



Budget Proposals 2019/20 and 2020/21

Equality and Safety Cumulative Impact Assessment

October 2018

Equality and Safety Cumulative Impact Assessment

Introduction

1. Southampton City Council, in line with its statutory responsibilities, undertakes Equality and Safety Impact Assessments (ESIAs). ESIAs provide a systematic way of assessing the impact of policies, strategies, programmes, projects, services or functions on different equality groups - and on poverty and community safety. During the council's annual budget cycle, ESIAs are completed for all proposals identified as requiring them to inform decision making.
2. This document draws into one place a summary of all the ESIAs for the 2019/20 and 2020/21 budget proposals. This assessment focuses on service based proposals identified as having a direct impact on customers/residents. In addition, there are a range of budget proposals which are efficiencies and do not have a disproportionate impact for people within the equalities legislation.
3. It is important to fully understand the impact of the budget proposals on equality groups (identified in paragraph 11) and on community safety, poverty and health and wellbeing. The council, working with others, will need to take action to mitigate the collective impact of any such proposals. Mitigating actions could include re-shaping services to target more efficiently and to reduce the potential of disproportionate impacts on equalities groups, community safety, poverty and health and wellbeing.
4. Consultation will be undertaken with residents and stakeholders on the draft budget proposals between 24 October 2018 and 16 January 2019. Analysis on consultation feedback will be considered by the Cabinet before they finalise their budget proposals that will be recommended to Full Council in February 2019 when it will set the budget. Feedback will be incorporated into the relevant individual Equality and Safety Impact Assessments and reflected in an updated version of this Cumulative Impact Assessment.

Context

5. Local government has had to change significantly in response to ongoing changes in the city's profile, trends in customer behaviour, national and local policies and the austerity challenges. This is accompanied by ongoing challenges in the shape of rising demand in adults and children's social care.
6. The 4 year financial settlement Southampton City Council has agreed with central government ends in 2019/20. As yet, it is unclear what the next settlement will be, with the government proposing a radical overhaul of how local government funding is allocated via the Fair Funding Review. Alongside this, there is the recognition by central government for the provision of funding of adult social care to be reviewed.
7. This Cumulative Impact Assessment is also being carried out against the backdrop of the welfare reforms, a number of which have been implemented since 2011 and the programme continues. The government's programme of welfare reform is 'intended to reduce benefit dependency for households, and to make the system more affordable for government. The reforms are therefore predicated on those affected being able to

respond positively to reforms – by increasing their income through work; and/ or by reducing their outgoings, in particular through housing choices.’¹

8. The most recent major change locally, has been the introduction of Universal Credit Full Service. Southampton was in an early tranche of the roll-out, becoming a Universal Credit Full Service area in February 2017. The national roll-out of Universal Credit Full Service is due to be completed in December 2018. The main differences for claimants are; their claim is made and managed online, they are paid a single monthly payment in arrears (this includes housing costs). If they are in a couple, the payment is made to the main claimant.
9. In general, welfare reforms affect households with working age people on benefits - including people in work on low incomes. There are data limitations around claimant information. This means analysis of the cumulative impact of the reforms on households with particular characteristics is not possible at a local level. But available evidence indicates that young people, those who are homeless or vulnerably housed, lone parents, larger families, households with a disabled person and women are some of the ‘hardest hit’.

Legal Framework – Equalities

10. The Equality Duty, section 149 of the Equality Act, came into effect on 5th April 2011 and places a duty on all public bodies and others carrying out public functions.
11. The Public Sector Equality Duty (the Equality Duty) replaced three previous public sector equality duties – for race, disability and gender, and broadened the breadth of protected characteristics to include:
 - Age
 - Disability
 - Gender reassignment
 - Marriage and civil partnership, but only in respect of the requirements to have due regard to the need to eliminate discrimination.
 - Pregnancy and maternity
 - Race – ethnic or national origins, colour or nationality
 - Religion or Belief – including lack of belief
 - Sex (Gender)
 - Sexual orientation.
12. The Act was designed to ensure public bodies consider the needs of all individuals in their day to day work, including: shaping policy, delivering services and employment of employees. It requires public bodies, such as local councils not to discriminate against any person on the basis of a protected characteristic such as disability. The legislation strengthened existing provisions about discrimination to also include associative and perceptible discrimination as well as direct and indirect discrimination.
13. Direct discrimination occurs when a rule, policy or practice offers less favourable treatment to a group and indirect discrimination occurs by introducing a rule, policy or practice that applies to everyone but particularly disadvantages people who have a

¹ Wilson, T., Foster, S. (October 2017). *The Local Impacts of Welfare Reform: A Review of the impact of welfare changes on people, communities and services.* Learning and Work Institute.
<https://www.local.gov.uk/sites/default/files/documents/FINAL%20Review%20of%20impacts%20of%20welfare%20reform%20report%20to%20LGA%20Oct%202017-1.pdf>

protected characteristic. Direct discrimination will always be unlawful. Indirect discrimination will not be unlawful if it can be justified, for instance it can be shown that the rule, policy or practice was intended to meet a legitimate objective in a fair, balanced and reasonable way.

14. In considering whether or not any indirect discrimination is justified, the council must consider whether or not there is any other way to meet their objective that is not discriminatory or is less likely to disadvantage those with protected characteristics. This may well mean setting out clearly whether or not consideration has been given to other ways of achieving these objectives.
15. The Public Sector Equality Duty does not impose a legal requirement to conduct an Equality and Safety Impact Assessment, rather it requires public bodies to demonstrate their consideration of the Equality Duty and the conscious thought of the Equality Duty as part of the process of decision-making. This entails an understanding of the potential effect the organisation's activities could have on different people and a record of how decisions were reached. Producing an Equality Impact Assessment post decision making is non-compliant with the Public Sector Equality Duty. For this reason the council requires adherence to the existing impact assessment framework.

Legal Framework - Community Safety

16. Community Safety is a broad term. It refers to the protection of local communities from the threat and consequence of criminal and anti-social behaviour by achieving reductions in relation to both crime and the fear of crime.
17. Section 17 of the Crime and Disorder Act 1998, as amended by the Police and Justice Act 2006, requires responsible authorities to consider crime and disorder, including antisocial behaviour and other behaviour adversely affecting the local environment; and the misuse of drugs, alcohol and other substances in the exercise of all their duties, activities and decision-making. This means consideration must be given to the likely impact on crime and disorder in the development of any policies, strategies and service delivery. This responsibility affects all employees of the council.
18. This responsibility is summed up by guidance issued by the Home Office. This guidance describes the legal responsibility as: '*a general duty on each local authority to take account of the community safety dimension in all of its work. All policies, strategies, plans and budgets will need to be considered from the standpoint of their potential contribution to the reduction of crime and disorder*'.

Scope and our approach

19. This assessment identifies areas where there is a risk that changes resulting from individual budget proposals for 2019/20 and 2020/21, may have, when considered together, negative impacts on particular groups.
20. It is important to note this is an ongoing process. As individual budget proposals are developed and implemented, they will be subject to further assessment. This assessment also describes mitigating actions that will need to be considered.
21. The council's approach on assessing the impact of its policies, proposals and decisions, is designed to demonstrate that it has acted over and above its statutory duties. This is reflected in including poverty in the ESIA, as the council is committed to

addressing the impact on poverty for people in work and unemployed and for other low income households.

22. In order to inform decision-making on the budget proposals, the council has taken the following steps:
- Managers identified proposals which in their view require an Equality and Safety Impact Assessment (ESIA).
 - All budget proposals have been screened independently by a group of officers to check whether or not an ESIA was required. This was based on an assessment of whether or not they were likely to have a disproportionate equalities impact on particular groups of residents, or have implications for community safety or increasing poverty.
 - This resulted in a list of proposals for which an ESIA was clearly required and those for which further detail was needed to be gathered before making a decision.
 - As a result of the screening, ESIA's have been produced for every proposal assessed as requiring one. These primarily focus on the impact of proposals on residents and service users.
23. This Cumulative Impact Assessment will be updated and developed based on the final proposals and detail of individual ESIA's. It will also be informed by the feedback from residents and stakeholders as part of the public budget consultation.

City Profile

24. The most recent data available for the population of Southampton is from the Office of National Statistics mid-year estimate 2017. This puts the total figure at 252,359. There are 123,610 females and 128,749 males. However, the 2011 Census provides a more detailed population profile for the city. According to this, in 2011 the city's population profile comprised 236,900 residents and:
- There were 122,368 females and 127,168 males, a 49% to 51% split.
 - 77.7% of residents were white British (compared to 88.7% in 2001).
 - The 'Other white' population, which includes migrants from Europe, increased by over 200% (from 5,519 to 17,461) compared to Census 2001.
 - The largest percentage increase is in our 'other Asian' population, which increased from 833 to 5,281 people compared to Census 2001.
 - It is estimated that there are 26,929 residents whose main language is not English; of these 717 cannot speak English at all and a further 4,587 do not speak it well.
 - 4,672 residents in Southampton are aged 85 or over, of whom 834 are in bad or very bad health and have a long term illness or disability.
25. The Index of Multiple Deprivation (IMD) provides another range of data about the city. It focuses on the geographical profile of poverty but there is also a link between equality strands and risk factors for poverty. The most recent IMD was published in 2015, and covers the period between 2008/9 and 2012/13. It indicates that, during this period, Southampton became relatively more deprived compared to other places in the country. Of the 326 local authorities in England, Southampton is now ranked 54th most deprived, compared to 72nd in IMD 2010. Within the city, almost 70% of Lower Super Output Areas (LSOAs) are judged to be more deprived in both absolute and relative terms compared with IMD (2010).

Code	Description of Proposal	Age	Disability	Gender Reassignment	Marriage & Civil Partnership	Pregnancy & Maternity	Race	Religion & Belief	Sex	Sexual Orientation	Community Safety	Poverty	Health & Wellbeing	Other
SHIL 3	Reclassify some council properties currently only available to those aged 60 and over, making them available to people over 50 or over 55.	*											*	
SHIL 4	Review service charges to tenants in council owned properties, increasing the existing charges and introducing three new ones.											*	*	
Southampton is a city with strong sustainable economic growth														
SSEG1	Introduce charges for blue badge holders in council owned off street car parks.	*	*									*		
SSEG2	Increase Itchen Bridge fees for non-residents and non-smart card users.											*		

Age – Older people

26. People in later life may be more likely to use some council services and so may be more vulnerable than the general population to reductions or changes in those services. This vulnerability will be worsened for those living on low incomes. Some older people may feel the impact of several proposals. Some of the most significant are those relating to social care, and accessing services and information. Below is a summary of the main proposals that may impact on some older people.

27. **SHIL 1: Revise the Adult Social Care Charging Policy.** We are proposing to review the council's adult social care charging policy. This policy sets out how we charge people for a contribution towards the cost of their social care services. Our policy is in line with the Care Act 2014, which provides a national legal framework for charging and for recovering debts. It says that, when a council arranges care and support to meet an adult's needs, it may charge them unless the law says the care and support must be free of charge. In cases where we may charge, we must only ask people to pay what they can afford. So, we carry out financial assessments (means tests) to work out the amount individuals need to contribute towards the cost of their care and support.

28. We want to make sure that the policy is fair and affordable for everyone, and that it is financially sustainable for the council so that we can use the money we have to support those people who really need our help. We are proposing to make the following changes to the policy:

- To introduce a new Arrangement Fee of £250 or £500 (dependent on the level of service) for people whose assets are over the capital threshold, currently £23,250, (and who therefore must pay the full cost of their care) but who nevertheless request Southampton City Council to make the arrangements for their care (as is permitted under the Care Act 2014).
- To take account of the higher rate Attendance Allowance and disability benefits (Personal Independence Payment and the care component of Disability Living Allowance) when assessing for financial contributions. This amounts to a maximum increase of £28.00 per week for those on higher rate disability related benefits.
- To make it clear that any charges start from the date the service commences.
- To increase charges for universal deferred payment scheme loans. This is a service where the council provides a loan to enable people to pay care home costs. The loan is secured against their home, and recovered either when the property is sold by the customer or when the customer dies.

We are also proposing to remove the exemption from charging for customers receiving social care support who were previously supported by the Locally Based Hospital Unit (LBHU) prior to its closure in 2011.

29. We have identified the following impacts:

- Older people are disproportionately highly represented in the adult social care customer group and therefore older people will be impacted by these proposals.
- Within the customer group it is the older customers that are more likely to have the type of capital assets that these proposals take in to account.
- Within the client group itself the proposed changes will apply equally regardless of age, and these proposals could therefore impact customers of any age.
- Older people impacted are likely to experience a negative financial impact as a result of the proposals.

30. We have identified the following mitigations:

- A full review of all charges and the impacts of any proposals will be undertaken.
- All representations made during the consultation will be taken into account before any decision is made and this will in particular consider any new identified impacts and how these could be mitigated.
- Customers and their families will be provided with advice and information including details of local advice agencies which will provide financial advice where relevant.

31. For all groups, these changes help to ensure that the council can continue to help as many people with care and support needs as possible within the limited resources available. To this extent there should be a positive impact overall, as resources will be distributed more equitably.

32. These proposals impact on existing social care clients and we will be undertaking a separate and more detailed consultation in addition to the overarching budget consultation so we can make sure all our clients and their families have the opportunity to engage fully.

33. **SHIL2: Closure of two council owned residential care homes for older people, enabling the council to focus on the development of housing with care and community-based services, with the local home care market providing residential care where this is needed.** The council currently runs two residential care homes, Holcroft House and Glen Lee, which provide short and long term care for adults living with dementia. There is currently an over provision of residential homes in the city with a total of 36 residential homes registered for dementia care (including the two homes run by the council), and 70 vacancies as of October 2018. Although demand for adult social care is increasing, the demand for residential care is decreasing as more people are supported to live independently in their own homes. Most older people prefer to continue living at home for as long as possible, or to access alternatives like housing with care or Shared Lives, rather than go into a residential care home. We are therefore proposing to close both the council owned residential care homes. This would allow the council to focus on developing more Housing with care and community-based services, and for other providers to continue providing care and support where residential care is needed.

34. These proposals impact on existing social care clients and we will be undertaking a separate and more detailed consultation in addition to the overarching budget consultation so we can make sure all our clients and their families have the opportunity to engage fully. Thorough, person-centred assessments will be undertaken of each individual resident of the homes to determine their needs and how they can best be met in future before any final decisions are taken. These will take into account the views and preferences of the person as well as their families, carers and where appropriate their independent advocates. The proposed closures would be carefully managed and the needs and welfare of residents and families would be paramount when considering transfers to other social care provision.

35. We have identified the following impacts:

- The greatest impact of the proposal is likely to be on those older residents who have been using Glen Lee and Holcroft services for many years and for whom any change in provision will be difficult.
- All of the residents are over 65 years.
- There is potential for decline in residents' emotional and physical health during and immediately after any move following closure of a care home.

36. We have identified the following mitigations:

- Needs assessments and reviews will take place for all residents prior to any changes taking place. Through this process information on alternatives will be made available. A gradual approach will be taken to support those who will be most affected.
- Individual transition plans will be produced and updated. This plan will include analysing the impact and where necessary other professionals and agencies will be called upon to support the individual to minimise any impact.
- Advocacy services are in place to help support the individual's and their families throughout the proposed process. Any proposed move will be considered carefully taking into account the persons best interest's and their families' wishes and feelings. Any move will need to meet the individuals assessed eligible needs for care and support are met.
- A project management team will be set up who will prepare a Closure Plan which will be reviewed regularly and will be followed.
- There is adequate residential and non-residential provision within the city boundary.

37. In the longer term there is evidence that supporting people living with a dementia to live independently in their own homes drawing where appropriate on the support of others in their community leads to the best outcomes for those people. Re-providing residential care and support in homes run by charities and the private sector is more cost effective, supporting a more sustainable social care system locally, ensuring that the needs of people in Southampton can continue to be met in full.

38. The proposal for change includes the development of more housing with care schemes as an alternative to residential care. This is a positive impact on people who live in Southampton, as this will enable people to live independently within a scheme in a self-contained flat which will have the benefit of an on-site care team.

39. These proposals impact on existing social care clients and we will be undertaking a separate and more detailed consultation in addition to the overarching budget consultation so we can make sure all our clients and their families have the opportunity to engage fully. If, following consultation, a decision is made to close the two homes, thorough, person-centred assessments will be undertaken of each individual resident of the homes to determine their needs and how they can best be met in future. These will take into account the views and preferences of the person as well as their families, carers and where appropriate their independent advocates. The proposed closures would be carefully managed and the needs and welfare of residents and families would be paramount when considering transfers to other social care provision.

40. SHIL 3: Reclassify some council properties currently only available to those aged 60 and over, making them available to people over 50 or 55. There is a significant demand for affordable social rented homes in Southampton and there are currently 8,000 people on the Housing Register. However, there are a number of properties that are currently 'hard to let'. These are typically properties which are restricted to residents aged 60+, which are on the first floor or above in walk up blocks (without lifts). We are proposing to reclassify some properties which are currently restricted to residents aged 60+ to make them available to those aged 50+ or 55+. The blocks currently identified as potentially suitable for reclassification include: Malin Close, Rockall Close, Lundy Close, Curzon Court, Sarina Court, Manston Court, Maybush Court, Vellan Court, Penrith Court, Mansel Court, Jessamine Road, Edward Road, Avington Court, Basset Green Court, Bowman Court, Meon Court and Dewsbury Court.

41. We have identified the following impacts:

- Reclassification would introduce people aged 50-60 in to what is currently designated over 60s accommodation.
- This would have a positive impact on residents in this age bracket currently on the Housing Register, by making more properties available to them.
- This would only apply to properties that are currently vacant, and therefore not have an impact on people over 60 on the Housing Register.
- Some tenants aged 60+ may have concerns about the reclassification of neighbouring properties, as it would mean that the block has a wider mix of tenants including those who are 50+ rather than 60+, as well as potentially younger partners and families.

42. The potential impact of this proposal is positive and could result in improved void turnaround times, increase in rental income and improved rehousing for those aged 50-60 who are on the housing register.

43. The proposal is to review and potentially reclassify accommodation in phases, block by block. We would undertake detailed consultation with affected tenants as proposals are developed, and before any decisions are taken about each block. As part of that process we would also review and consider what measures we might need to take to address equality impacts for individuals and properties.

44. **SSEG1: Introduce charges for blue badge holders in council owned off street car parks.** We are proposing to withdraw free parking for Blue Badge holders in council owned off-street car parks, so they will be subject to the same charges, terms and conditions as other users. The Blue Badge scheme helps disabled people park close to their destination, and is specifically intended for on-street parking (e.g. on streets with parking meters or pay-and-display machines, in disabled parking bays and on yellow lines). Under this proposal, holders will still be able to park on-street for free, but charges will be introduced in council owned surface car parks and the West Park Road Multi-story car park. All other multi-story car parks in the city already charge blue badge holders for parking, and many other local authorities also charge for parking off-street.

45. We have identified the following impacts:

- This proposal will have an impact on Blue Badge holders aged over 17 years who drive and all ages who are passengers in cars. Higher numbers of older people are likely to be Blue Badge holders.
- The impact will require Blue Badge holders to pay for parking which was previously free if they choose to park in off-street car park, and mean that they are subject to any terms and conditions of the car park such as time restrictions.

46. We have identified the following mitigation:

- Charges only apply to off-street car parks. There is a statutory requirement to provide free on street car parking, which is often nearer to a destination. Signing in car parks and communications will draw attention to this change.

Age - Children and young people

47. Nearly a quarter of children live in poverty in the city and this figure rises to almost 40% in one of our most deprived wards. Continued economic and social pressures on

families, including the impact of welfare reforms, are likely to put increase pressure on support services.

48. In September 2015, the Council undertook a public consultation on what should be prioritised so these areas could be protected wherever possible. 'Children and young people get a good start in life' has been identified as one of our overarching priorities.

49. **CYP1: Review and redesign early help and outreach preventative services, to deliver a new focussed locality based model which prevents children becoming looked after by the council.** The locality based early help and prevention model was introduced in 2017, in partnership with health. The service offers advice and support to children and families and includes a mix of universal services (meaning they are open to everyone who wants to use them), and more targeted, intensive support for children and young people with additional needs. It includes Sure Start children's centres, health visiting, school nursing, Families Matter and the Family Nurse Partnership. The service has been successful, and we are proposing to extend it by bringing in more specialist and targeted health and social care services which can address issues such as complex parenting, challenging behaviours, supporting disabilities, welfare advice, mental health advice, domestic abuse and exploitation support services.

50. These services are currently available, but have to be accessed separately. By delivering more services locally for families, we aim to make them part of a community resource that is practical and easy to access. We also want to increase our partnership working with local community and voluntary services. This will enable us to engage families at an early stage when they are facing difficulties, challenges or need advice to avoid those challenges. Providing the right help early can stop problems getting worse or avoid issues altogether. Evidence shows that this can deliver better outcomes for children and families as well as saving money in the longer term as it avoids the need for more intensive, long term support. Therefore, it should ultimately reduce the number of children coming into statutory services with escalated needs, requiring the intervention of the council. The redesign will review current specialist services such as Educational Welfare, Inclusion and Targeted teams, Youth Offending and others to offer a more uniform approach and increase accessibility in local settings to support families and schools.

51. We have identified the following impacts:

- 63,091 children and young people (aged 0-19) live in the city, and this is expected to grow by 4.5% by 2024 to 65,912 (2,821 children and young people).
- This proposal relates to the extension of Locality Based Services for children, young people and their parents and carers. Its principal direct impact will be upon these groups.
- Overall it is anticipated that the extension of the Locality Based model will have possible impacts on children and families. Some localities may experience a change in the specialist and targeted services available locally and so some children and families may not be able to access all services in their local area. This is because services will be based on local need and targeted where they are needed most. Therefore, there may be a reduced offer in parts of the city.

52. The proposed service will have a number of positive impacts on children and families in Southampton:

- There will be a clearer offer for children and families and more services will be based locally.

- There will be less reliance on assessment or strict criteria of access and greater focus on targeted need and intervention.
- Children and families will be able to access support and help with any challenges or issues more quickly.
- Services will be more joined up and focused on the key issues that are challenging family stability and resilience.
- There will be closer working relationships across the professional networks.
- There will be greater opportunities to develop links with community and voluntary sector organisations.

53. As proposals are developed in more detail, we may need to undertake some additional consultation.

54. **CYP2: Review the council run play offer and seek community and voluntary sector partners to take over the direct running of this service.** The council's 'play offer' runs out of Sure Start Children's Centres and allows children and families to access play sessions in a safe and contained space. The council currently sets up, runs and facilitates play sessions in 7 centres across the city and these are all staffed by council employees. The sessions interact with an average of 15 children per session and their parents and usually run weekly. The current offer extends to an estimated 140 children. The council recognises the importance of these play sessions to children and their parents/carers. However, it is also important that council resources are targeted where they are needed most, and that we work with other public sector, private sector, voluntary and community organisations to deliver the best value and most joined up services.

55. We are therefore proposing to explore opportunities for some play services to be run or co-run by local community volunteers and/or parent volunteers rather than council staff. The council and its partners will continue to coordinate and support the running of these groups, though will seek to hand over some facilitation to capable and trained members of the community. Council staff will continue to run some targeted sessions if there are areas where it is not viable to deliver a community led play offer; in that case, these will be targeted to those areas with the greatest need. The council will also support work to develop the availability of play opportunities across the city.

56. Further work will be undertaken to engage with local voluntary and community organisations during the process of the consultation, including assessing the level of interest in running or co-running play sessions, and their views will help inform the final decision on this proposal.

57. We have identified the following impacts:

- There are 140 children currently using the Sure Start Children's Centre play offer.
- 63,091 children and young people (aged 0-19) live in the city, and this is expected to grow by 4.5% by 2024 to 65,912 (2,821 children and young people).
- The successful development of a community led model would ensure that the play offer is maintained for children in the city. However, it is possible that services could reduce in some areas, which could have a negative impact on some children.

58. We have identified the following mitigations:

- The council will work with individuals and community groups to explore opportunities for community groups and individuals to take over delivery and facilitation of play sessions.
- The council will continue to target resources to areas of greatest need, if community led delivery is not possible in these areas.
- The council will also support work to develop the availability of play opportunities across the city.

59. The delivery of a play offer through communities will strengthen and build partnerships between the council and communities. Exploring innovative community led delivery models will enable the council to maintain services in parts of the city which potentially could otherwise see a significant reduction of ceasing of the play offer.

60. **CYP3: Review the Contact Service which facilitates contact for looked after children with their birth families, with a view to this being delivered by a partner organisation.** The Contact Service facilitates contact for our Looked After Children (LAC) with their birth families. The service supervises contact between approximately 300 LAC and their families. The current service is costly and is not flexible enough for children or their families, as it only operates in core hours and is not able to meet urgent contacts or to facilitate out of area contact. The proposal is to review, scope and assess the benefits of the current Contact Service, with a view to it being contracted out to a partner organisation. In doing so, the service has the potential to become more flexible, with a 7 day a week service across extended hours. Detailed impacts of this proposal would not be known until a delivery model is agreed with any organisation that might be interested in taking over this service. At that stage, any changes that would impact on service users would be subject to further consultation and/or engagement.

61. We have identified the following impacts:

- Around 300 children are supported by the Contact Service. These children could be impacted by any changes to the service.

62. We have identified the following mitigation:

- Following a review, proposals affecting the service will be subject to further consultation and engagement.

63. The proposal may have positive impacts including; clearer offer for families which are locality based, extended hours offer, potential for 7 day service, flexible use of buildings, quicker response for families, more cost efficient, extended service could be used to assist in rehabilitation work and so reduce the numbers of LAC and the time they spend in care.

64. **CYP 4: Reduce the funding provided to Compass School Pupil Referral Unit in line with actual demand.** Compass School is a Pupil Referral Unit (PRU), providing transitional, full time education and support for pupils aged 5 - 16 who are not accessing mainstream schools. The council currently provides funding to Compass School for 160 pupils but this does not reflect that actual number of pupils attending this provision. So, we are proposing to reduce the number of funded places from September 2019, in line with actual pupil numbers.

65. We have identified the following impacts:

- There are currently 67 pupils aged 5-16 attending Compass School.

66. We have identified the following mitigation:

- Schools are increasingly developing a curriculum which meets the needs of a broader range of students, which will enable learners to access provision within mainstream education and reduce the need for places at Compass School.

67. The proposal may have positive impacts including;

- Long term places in Compass School will be made available to those most in need of specialist support.
- There will be an increased focus on preventing exclusion and reintegration into mainstream schooling which will have positive impacts on the outcomes of children and young people.
- The proposal will include the development of preventative outreach programmes (particularly at secondary level).
- Increased numbers of pupils will be supported locally and within the mainstream through flexible provision.
- Specialist resources will be targeted to the most complex cases.

68. **CYP 6 Reduce Early Intervention Fund which supports early years and childcare providers to expand or set up new provision.** The Early Intervention Fund supports early years and childcare providers to expand or to set up new provision. In 2018/19, £116,000 was allocated to the Fund. The proposal is to reduce the funding allocated to the Early Intervention Fund to £15,000 per annum in 2019/20 and beyond. Providers will be encouraged to seek funding from other sources. The council will also work with schools to encourage more of them to deliver early education.

69. We have identified the following impacts:

- 49,513 children and young people (aged 0-17) live in the city, and this is expected to grow by 5.5% by 2024 to 52,246.
- There are 15,826 children aged 0-4 in the city, and by 2024 this predicted to fall by 0.2% (30 children).
- Demand for early education and childcare places has increased in recent years. A reduction in funding available from the council could have an impact on the number of places available in the city if providers are unable to attract funding from other sources to support expansion.

70. We have identified the following mitigation:

- Southampton has always had a mixed model of early years provision. With most national grants only being available to schools, the council will work with schools to encourage more of them to deliver early education. The council has a statutory duty under the Childcare Act 2006 and subsequent revisions to ensure there are sufficient early education places, so if insufficient places are available in future, the council will take appropriate action to address that.

Disability

71. According to the Equality Act 2010, a person has a disability if he or she has a physical or mental impairment which has a long term adverse effect on that person's ability to carry out day to day activities. Disabled people may feel the impact of several proposals. Some of the most significant are those relating to accessing services, information and social care. Below is a summary of the main proposals that may impact on people with a physical or mental impairment.

72. **CYP1: Review and redesign early help and outreach preventative services, to deliver a new focussed locality based model which prevents children becoming**

looked after by the council. The locality based early help and prevention model was introduced in 2017, in partnership with health. The service offers advice and support to children and families and includes a mix of universal services (meaning they are open to everyone who wants to use them), and more targeted, intensive support for children and young people with additional needs. It includes Sure Start children's centres, health visiting, school nursing, Families Matter and the Family Nurse Partnership. The service has been successful, and we are proposing to extend it by bringing in more specialist and targeted health and social care services which can address issues such as complex parenting, challenging behaviours, supporting disabilities, welfare advice, mental health advice, domestic abuse and exploitation support services.

73. These services are currently available, but have to be accessed separately. By delivering more services locally for families, we aim to make them part of a community resource that is practical and easy to access. We also want to increase our partnership working with local community and voluntary services. This will enable us to engage families at an early stage when they are facing difficulties, challenges or need advice to avoid those challenges. Providing the right help early can stop problems getting worse or avoid issues altogether. Evidence shows that this can deliver better outcomes for children and families as well as saving money in the longer term as it avoids the need for more intensive, long term support. Therefore, it should ultimately reduce the number of children coming into statutory services with escalated needs, requiring the intervention of the council. The redesign will review current specialist services such as Educational Welfare, Inclusion and Targeted teams, Youth Offending and others to offer a more uniform approach and increase accessibility in local settings to support families and schools.

74. We have identified the following impacts:

- There are some users of this service that have special educational needs and/or disabilities (SEND). The overall impact of extending this model should be positive in terms of its impact.
- Some localities may experience a change in the specialist and targeted services available locally and so some children and families may not be able to access all services in their local area. This is because services will be based on local need and targeted where they are needed most. Therefore, there may be a reduced offer in parts of the city.
- If specific specialist services are not available in a particular locality, some disabled children or parents may need to travel further to access services that might have previously been available in their locality.

75. We have identified the following mitigations:

- The intention though is to increase local availability of more specialist support.
- Where need is identified families will not be excluded on the grounds of their location, and transport options will be considered to enable those individuals to access services.

76. The proposed service will have a number of positive impacts on children and families in Southampton:

- There will be a clearer offer for children and families and more services will be based locally.
- There will be less reliance on assessment or strict criteria of access and greater focus on targeted need and intervention.
- Children and families will be able to access support and help with any challenges or issues more quickly.

- Services will be more joined up and focused on the key issues that are challenging family stability and resilience.
- There will be closer working relationships across the professional networks.
- There will be greater opportunities to develop links with community and voluntary sector organisations.

77. CYP2: Review the council run play offer and seek community and voluntary sector partners to take over the direct running of this service. The council's 'play offer' runs out of Sure Start Children's Centres and allows children and families to access play sessions in a safe and contained space. The council currently sets up, runs and facilitates play sessions in 7 centres across the city and these are all staffed by council employees. The sessions interact with an average of 15 children per session and their parents and usually run weekly. The current offer extends to an estimated 140 children. The council recognises the importance of these play sessions to children and their parents/carers. However, it is also important that council resources are targeted where they are needed most, and that we work with other public sector, private sector, voluntary and community organisations to deliver the best value and most joined up services.

78. We are therefore proposing to explore opportunities for some play services to be run or co-run by local community volunteers and/or parent volunteers rather than council staff. The council and its partners will continue to coordinate and support the running of these groups, though will seek to hand over some facilitation to capable and trained members of the community. Council staff will continue to run some targeted sessions if there are areas where it is not viable to deliver a community led play offer; in that case, these will be targeted to those areas with the greatest need. The council will also support work to develop the availability of play opportunities across the city.

79. Further work will be undertaken to engage with local voluntary and community organisations during the process of the consultation, including assessing the level of interest in running or co-running play sessions, and their views will help inform the final decision on this proposal.

80. We have identified the following impacts:

- There will be a reduction in access to professional support during play sessions, which could have a greater impact on children with SEND and their parents/carers.

81. We have identified the following mitigation:

- The council will continue to target resources to areas of greatest need, if community led delivery is not possible in these areas. It will still be possible to access professional support via other routes.

82. The delivery of a play offer through communities will strengthen and build partnerships between the council and communities. Exploring innovative community led delivery models will enable the council to maintain services in parts of the city which potentially could otherwise see a significant reduction of ceasing of the play offer.

83. CYP3: Review the Contact Service which facilitates contact for looked after children with their birth families, with a view to this being delivered by a partner organisation. The Contact Service facilitates contact for our Looked After Children (LAC) with their birth families. The service supervises contact between approximately 300 LAC and their families. The current service is costly and is not flexible enough for children or their families, as it only operates in core hours and is not able to meet

urgent contacts or to facilitate out of area contact. The proposal is to review, scope and assess the benefits of the current Contact Service, with a view to it being contracted out to a partner organisation. In doing so, the service has the potential to become more flexible, with a 7 day a week service across extended hours. Detailed impacts of this proposal would not be known until a delivery model is agreed with any organisation that might be interested in taking over this service. At that stage, any changes that would impact on service users would be subject to further consultation and/or engagement.

84. We have identified the following impacts:

- Some children or parents being supported may have disabilities. These individuals could be impacted by any changes to the service. There is a potential positive impact if the service moves location, as this may improve ease of access.

85. We have identified the following mitigation:

- Following a review, proposals affecting the service will be subject to further consultation and engagement.

86. The proposal may have positive impacts including; clearer offer for families which are locality based, extended hours offer, potential for 7 day service, flexible use of buildings, quicker response for families, more cost efficient, extended service could be used to assist in rehabilitation work and so reduce the numbers of LAC and the time they spend in care.

87. **CYP 4: Reduce the funding provided to Compass School Pupil Referral Unit in line with actual demand.** Compass School is a Pupil Referral Unit (PRU), providing transitional, full time education and support for pupils aged 5 - 16 who are not accessing mainstream schools. The council currently provides funding to Compass School for 160 pupils but this does not reflect that actual number of pupils attending this provision. So, we are proposing to reduce the number of funded places from September 2019, in line with actual pupil numbers.

88. We have identified the following impacts:

- 100% of pupils in Compass School have special educational needs and/or disabilities (SEND) compared to a national average of 22%.

89. We have identified the following mitigation:

- Frequent periods of change can have a detrimental effect on outcomes for young people with SEND. Therefore, the short-term nature of the placements at Compass may not be beneficial to this cohort. Sustaining placements in mainstream schools through early intervention will see pupils with SEND fully included in mainstream education.
- Having a needs-led, child centred approach to learning within mainstream schools will engage young people with SEND.
- Tailoring the curriculum within mainstream schools to meet the needs of these pupils will have a positive impact on outcomes.

90. The proposal may have positive impacts including;

- Long term places in Compass School will be made available to those most in need of specialist support.
- There will be an increased focus on preventing exclusion and reintegration into mainstream schooling which will have positive impacts on the outcomes of children and young people.

- The proposal will include the development of preventative outreach programmes (particularly at secondary level).
- Increased numbers of pupils will be supported locally and within the mainstream through flexible provision.
- Specialist resources will be targeted to the most complex cases.

91. **CYP 6 Reduce Early Intervention Fund which supports early years and childcare providers to expand or set up new provision.** The Early Intervention Fund supports early years and childcare providers to expand or to set up new provision. In 2018/19, £116,000 was allocated to the Fund. The proposal is to reduce the funding allocated to the Early Intervention Fund to £15,000 per annum in 2019/20 and beyond. Providers will be encouraged to seek funding from other sources. The council will also work with schools to encourage more of them to deliver early education.

92. We have identified the following impacts:

- This proposal may mean that some groups are unable to expand, therefore potentially meaning less places for children with special educational needs and/or disabilities (SEND).
- The costs of supporting a child with high-end additional needs in an Early Years setting is not completely covered by the early years funding formula, therefore providers may choose, if they have limited places, to prioritise taking children who do not need dedicated support. This could have a negative impact on SEND children and their families.

93. We have identified the following mitigation:

- The council will work on a case by case basis to identify suitable provision for 2, 3 and 4 year olds with special educational needs and/or disabilities (SEND).

94. **SHIL 1: Revise the Adult Social Care Charging Policy.** We are proposing to review the council's adult social care charging policy. This policy sets out how we charge people for a contribution towards the cost of their social care services. Our policy is in line with the Care Act 2014, which provides a national legal framework for charging and for recovering debts. It says that, when a council arranges care and support to meet an adult's needs, it may charge them unless the law says the care and support must be free of charge. In cases where we may charge, we must only ask people to pay what they can afford. So, we carry out financial assessments (means tests) to work out the amount individuals need to contribute towards the cost of their care and support.

95. We want to make sure that the policy is fair and affordable for everyone, and that it is financially sustainable for the council so that we can use the money we have to support those people who really need our help. We are proposing to make the following changes to the policy:

- To introduce a new Arrangement Fee of £250 or £500 (dependent on the level of service) for people whose assets are over the capital threshold, currently £23,250, (and who therefore must pay the full cost of their care) but who nevertheless request Southampton City Council to make the arrangements for their care (as is permitted under the Care Act 2014).
- To take account of the higher rate Attendance Allowance and disability benefits (Personal Independence Payment and the care component of Disability Living Allowance) when assessing for financial contributions. This amounts to a maximum increase of £28.00 per week for those on higher rate disability related benefits.
- To make it clear that any charges start from the date the service commences.

- To increase charges for universal deferred payment scheme loans. This is a service where the council provides a loan to enable people to pay care home costs. The loan is secured against their home, and recovered either when the property is sold by the customer or when the customer dies.

We are also proposing to remove the exemption from charging for customers receiving social care support who were previously supported by the Locally Based Hospital Unit (LBHU) prior to its closure in 2011.

96. We have identified the following impacts:

- Up to 746 people may be impacted by the proposal to take into account the higher rate of Attendance Allowance or disability benefits.
- 24 customers with who are living with a learning disability will be impacted by the proposal to remove the locally based hospital unit exemption.
- Other proposals are likely to have impacts on people with disabilities which contribute to their care requirements. Some people with disabilities may be adversely impacted by more than one of the charging proposals meaning that their assessed charge will increase.

97. We have identified the following mitigations:

- A full review of all the proposed charges, and the impacts of any proposals will be undertaken after taking account of all representations made during the consultation process.
- Potentially affected customers will have the opportunity to consider the proposals as part of a formal consultation in 2019.
- Taking into account Disability Related Expenditure (DRE) will help mitigate any impact on people who are required to contribute more to the cost of their care and support.

98. For all groups, these changes help to ensure that the council can continue to help as many people with care and support needs as possible within the limited resources available. To this extent there should be a positive impact overall, as resources will be distributed more equitably.

99. These proposals impact on existing social care clients and we will be undertaking a separate and more detailed consultation in addition to the overarching budget consultation so we can make sure all our clients and their families have the opportunity to engage fully.

100. **SHIL2: Closure of two council owned residential care homes for older people, enabling the council to focus on the development of housing with care and community-based services, with the local home care market providing residential care where this is needed.** The council currently runs two residential care homes, Holcroft House and Glen Lee, which provide short and long term care for adults living with dementia. There are currently too many residential homes in the city with a total of 36 residential homes registered for dementia care in Southampton (including the two homes run by the council), and 70 vacancies as of October 2018. Although demand for adult social care is increasing, the demand for residential care is decreasing as more people are supported to live independently in their own homes. Most older people prefer to continue living at home for as long as possible, or to access alternatives like Housing with care or Shared Lives, rather than go into a residential care home. We are therefore proposing to close both the council owned residential care homes. This would allow the council to focus on developing more Housing with care and community-based services, and for other providers to continue providing care and support where residential care is needed.

101. These proposals impact on existing social care clients and we will be undertaking a separate and more detailed consultation in addition to the overarching budget consultation so we can make sure all our clients and their families have the opportunity to engage fully. Thorough, person-centred assessments will be undertaken of each individual resident of the homes to determine their needs and how they can best be met in future before any final decisions are taken. These will take into account the views and preferences of the person as well as their families, carers and where appropriate their independent advocates. The proposed closures would be carefully managed and the needs and welfare of residents and families would be paramount when considering transfers to other social care provision.

102. We have identified the following impacts:

- All residents have a cognitive impairment and a significant number also have a physical impairment.
- The proposal may have either a positive or negative impact depending on the individual and the extent to which they prefer current models of service.
- Those with physical disabilities may experience a larger impact due to some of the alternative options not having the equipment to be able to support appropriately and being able to accommodate in private sector, however, this will be no different to our internal homes.

103. We have identified the following mitigations:

- Needs assessments and reviews will take place for all residents prior to any changes taking place. Through this process information on alternatives will be made available. A gradual approach will be taken to support those who will be most affected.
- Individual transition plans will be produced and updated. This plan will include analysing the impact and where necessary other professionals and agencies will be called upon to support the individual to minimise any impact.
- Advocacy services are in place to help support the individual's and their families throughout the proposed process. Any proposed move will be considered carefully taking into account the persons best interest's and their families' wishes and feelings. Any move will need to meet the individuals assessed eligible needs for care and support are met.
- A project management team will be set up who will prepare a Closure Plan which will be reviewed regularly and will be followed.
- There is adequate residential and non-residential provision within the city boundary.
- Residents and their carers will be supported to identify the most appropriate respite option which meets their physical needs.

104. In the longer term there is evidence that supporting people living with a dementia to live independently in their own homes drawing where appropriate on the support of others in their community leads to the best outcomes for those people. Re-providing residential care and support in homes run by charities and the private sector is more cost effective, supporting a more sustainable social care system locally, ensuring that the needs of people in Southampton can continue to be met in full.

105. The proposal for change includes the development of more housing with care schemes as an alternative to residential care. This is a positive impact on people who live in Southampton, as this will enable people to live independently within a scheme in a self-contained flat which will have the benefit of an on-site care team.

106. These proposals impact on existing social care clients and we will be undertaking a separate and more detailed consultation in addition to the overarching budget consultation so we can make sure all our clients and their families have the opportunity to engage fully. If, following consultation, a decision is made to close the two homes, thorough, person-centred assessments will be undertaken of each individual resident of the homes to determine their needs and how they can best be met in future. These will take into account the views and preferences of the person as well as their families, carers and where appropriate their independent advocates. The proposed closures would be carefully managed and the needs and welfare of residents and families would be paramount when considering transfers to other social care provision.
107. **SSEG1: Introduce charges for blue badge holders in council owned off street car parks. We are proposing to withdraw free parking for blue badge holders in council owned off-street car parks, so they will be subject to the same charges, terms and conditions as other users.** The Blue Badge scheme helps disabled people park close to their destination, and is specifically intended for on-street parking (e.g. on streets with parking meters or pay-and-display machines, in disabled parking bays and on yellow lines). Under this proposal, holders will still be able to park on-street for free, but charges will be introduced in council owned surface car parks and the West Park Road Multi-story car park. All other multi-story car parks in the city already charge Blue Badge holders for parking, and many other local authorities also charge for parking off-street.
108. We have identified the following impacts:
- All Blue Badge are people who have a disability or health condition that affects their mobility.
 - The proposal to introduce charges in off-street car parks will have a financial impact on this group if an individual chooses to park in an off-street car park.
 - Blue Badge holders will be subject to the terms and conditions of the car park, which may include time restrictions, including a two hour parking limit in car parks including the Civic Centre Forecourt and Albion Place (Castle Way). People with a disability that affects their mobility may be more affected by time limitations than those who do not have a disability.
109. We have identified the following mitigation:
- Charges only apply to off-street car parks. There is a statutory requirement to provide free on street car parking, which is usually nearer to a destination. Signing in car parks and communications will draw attention to this change.

Pregnancy and Maternity

110. **CYP2: Review the council run play offer and seek community and voluntary sector partners to take over the direct running of this service.** The council's 'play offer' runs out of Sure Start Children's Centres and allows children and families to access play sessions in a safe and contained space. The council currently sets up, runs and facilitates play sessions in 7 centres across the city and these are all staffed by council employees. The sessions interact with an average of 15 children per session and their parents and usually run weekly. The current offer extends to an estimated 140 children. The council recognises the importance of these play sessions to children and their parents/carers. However, it is also important that council resources are targeted where they are needed most, and that we work with other public sector, private sector, voluntary and community organisations to deliver the best value and most joined up services.

111. We are therefore proposing to explore opportunities for some play services to be run or co-run by local community volunteers and/or parent volunteers rather than council staff. The council and its partners will continue to coordinate and support the running of these groups, though will seek to hand over some facilitation to capable and trained members of the community. Council staff will continue to run some targeted sessions if there are areas where it is not viable to deliver a community led play offer; in that case, these will be targeted to those areas with the greatest need. The council will also support work to develop the availability of play opportunities across the city.

112. Further work will be undertaken to engage with local voluntary and community organisations during the process of the consultation, including assessing the level of interest in running or co-running play sessions, and their views will help inform the final decision on this proposal.

113. We have identified the following impact:

- It is possible that some services may reduce in some areas, which could have an impact on the socialisation of children and their parents/carers, and have a greater impact on those with more than one younger child.

114. We have identified the following mitigation:

- The council will continue to target resources to areas of greatest need, if community led delivery is not possible in these areas. It will still be possible to access professional support via other routes.

115. The delivery of a play offer through communities will strengthen and build partnerships between the council and communities. Exploring innovative community led delivery models will enable the council to maintain services in parts of the city which potentially could otherwise see a significant reduction of ceasing of the play offer.

116. **CYP 6 Reduce Early Intervention Fund which supports early years and childcare providers to expand or set up new provision.** The Early Intervention Fund supports early years and childcare providers to expand or to set up new provision. In 2018/19, £116,000 was allocated to the Fund. The proposal is to reduce the funding allocated to the Early Intervention Fund to £15,000 per annum in 2019/20 and beyond. Providers will be encouraged to seek funding from other sources. The council will also work with schools to encourage more of them to deliver early education.

117. We have identified the following impacts:

- Southampton has a birth rate of 53.2 births per 1,000 females aged 15 to 44 years. This is lower than the England average of 62.5 per 1,000 females.
- The number of children aged 0-4 in Southampton is due to fall by 0.2% (30 children) by 2027.
- However, demand for early education and childcare places has increased in recent years. A reduction in funding available from the council could have an impact on the number of places available in the city if providers are unable to attract funding from other sources to support expansion.

118. We have identified the mitigation:

- Southampton has always had a mixed model of early year's provision. With most national grants only being available to schools, the council will work with schools to encourage more of them to deliver early education. The council has a statutory duty under the Childcare Act 2006 and subsequent revisions to ensure

there are sufficient early education places, so if insufficient places are available in future, the council will take appropriate action to address that.

Poverty

119. **CYP1: Review and redesign early help and outreach preventative services, to deliver a new focussed locality based model which prevents children becoming looked after by the council.**

The locality based early help and prevention model was introduced in 2017, in partnership with health. The service offers advice and support to children and families and includes a mix of universal services (meaning they are open to everyone who wants to use them), and more targeted, intensive support for children and young people with additional needs. It includes Sure Start children's centres, health visiting, school nursing, Families Matter and the Family Nurse Partnership. The service has been successful, and we are proposing to extend it by bringing in more specialist and targeted health and social care services which can address issues such as complex parenting, challenging behaviours, supporting disabilities, welfare advice, mental health advice, domestic abuse and exploitation support services.

120. These services are currently available, but have to be accessed separately. By delivering more services locally for families, we aim to make them part of a community resource that is practical and easy to access. We also want to increase our partnership working with local community and voluntary services. This will enable us to engage families at an early stage when they are facing difficulties, challenges or need advice to avoid those challenges. Providing the right help early can stop problems getting worse or avoid issues altogether. Evidence shows that this can deliver better outcomes for children and families as well as saving money in the longer term as it avoids the need for more intensive, long term support. Therefore, it should ultimately reduce the number of children coming into statutory services with escalated needs, requiring the intervention of the council. The redesign will review current specialist services such as Educational Welfare, Inclusion and Targeted teams, Youth Offending and others to offer a more uniform approach and increase accessibility in local settings to support families and schools.

121. We have identified the following impact:

- The majority of looked after children in Southampton originally come from the 20% most deprived communities – 6.3 x higher than the 20% least deprived.

122. We have identified the following mitigation:

- The council will continue to target resources to areas of greatest need, if community led delivery is not possible in these areas.

123. The proposed service will have a number of positive impacts on children and families in Southampton:

- There will be a clearer offer for children and families and more services will be based locally.
- There will be less reliance on assessment or strict criteria of access and greater focus on targeted need and intervention.
- Children and families will be able to access support and help with any challenges or issues more quickly.
- Services will be more joined up and focused on the key issues that are challenging family stability and resilience.
- There will be closer working relationships across the professional networks.

- There will be greater opportunities to develop links with community and voluntary sector organisations.

124. As proposals are developed in more detail, we may need to undertake some additional consultation.

125. **CYP2: Review the council run play offer and seek community and voluntary sector partners to take over the direct running of this service.** The council's 'play offer' runs out of Sure Start Children's Centres and allows children and families to access play sessions in a safe and contained space. The council currently sets up, runs and facilitates play sessions in 7 centres across the city and these are all staffed by council employees. The sessions interact with an average of 15 children per session and their parents and usually run weekly. The current offer extends to an estimated 140 children. The council recognises the importance of these play sessions to children and their parents/carers. However, it is also important that council resources are targeted where they are needed most, and that we work with other public sector, private sector, voluntary and community organisations to deliver the best value and most joined up services.

126. We are therefore proposing to explore opportunities for some play services to be run or co-run by local community volunteers and/or parent volunteers rather than council staff. The council and its partners will continue to coordinate and support the running of these groups, though will seek to hand over some facilitation to capable and trained members of the community. Council staff will continue to run some targeted sessions if there are areas where it is not viable to deliver a community led play offer; in that case, these will be targeted to those areas with the greatest need. The council will also support work to develop the availability of play opportunities across the city.

127. Further work will be undertaken to engage with local voluntary and community organisations during the process of the consultation, including assessing the level of interest in running or co-running play sessions, and their views will help inform the final decision on this proposal.

128. We have identified the following impact:

- The majority of looked after children in Southampton originally come from the 20% most deprived communities – 6.3 x higher than the 20% least deprived.

129. We have identified the following mitigation:

- The council will continue to target resources to areas of greatest need, if community led delivery is not possible in these areas. It will still be possible to access professional support via other routes.

130. **CYP 6 Reduce Early Intervention Fund which supports early years and childcare providers to expand or set up new provision.** The Early Intervention Fund supports early years and childcare providers to expand or to set up new provision. In 2018/19, £116,000 was allocated to the Fund. The proposal is to reduce the funding allocated to the Early Intervention Fund to £15,000 per annum in 2019/20 and beyond. Providers will be encouraged to seek funding from other sources. The council will also work with schools to encourage more of them to deliver early education.

131. We have identified the following impacts:

- 23.4% of children in Southampton live in poverty. Local data shows that only 37% of children living in the 10% most deprived areas of the city who do not

attend early years provision reach the expected level in the Early Years Foundation Stage at age 5, compared with 59% who have attended for over 540 hours.

- Reducing the early intervention grant may result in fewer new places being made available to under 2s, as it is more costly to staff places for younger children.

132. We have identified the following mitigations:

- The council will signpost providers who are considering expanding to national grants, and work with schools to encourage more schools to deliver early intervention. The council has a statutory duty under the Childcare Act 2006 and subsequent revisions to ensure there are sufficient early education places, so if insufficient places are available in future, the council will take appropriate action to address that.

133. **SHIL 1: Revise the Adult Social Care Charging Policy.** We are proposing to review the council's adult social care charging policy. This policy sets out how we charge people for a contribution towards the cost of their social care services. Our policy is in line with the Care Act 2014, which provides a national legal framework for charging and for recovering debts. It says that, when a council arranges care and support to meet an adult's needs, it may charge them unless the law says the care and support must be free of charge. In cases where we may charge, we must only ask people to pay what they can afford. So, we carry out financial assessments (means tests) to work out the amount individuals need to contribute towards the cost of their care and support.

134. We want to make sure that the policy is fair and affordable for everyone, and that it is financially sustainable for the council so that we can use the money we have to support those people who really need our help. We are proposing to make the following changes to the policy:

- To introduce a new Arrangement Fee of £250 or £500 (dependent on the level of service) for people whose assets are over the capital threshold, currently £23,250, (and who therefore must pay the full cost of their care) but who nevertheless request Southampton City Council to make the arrangements for their care (as is permitted under the Care Act 2014).
- To take account of the higher rate Attendance Allowance and disability benefits (Personal Independence Payment and the care component of Disability Living Allowance) when assessing for financial contributions. This amounts to a maximum increase of £28.00 per week for those on higher rate disability related benefits.
- To make it clear that any charges start from the date the service commences.
- To increase charges for universal deferred payment scheme loans. This is a service where the council provides a loan to enable people to pay care home costs. The loan is secured against their home, and recovered either when the property is sold by the customer or when the customer dies.

We are also proposing to remove the exemption from charging for customers receiving social care support who were previously supported by the Locally Based Hospital Unit (LBHU) prior to its closure in 2011.

135. We have identified the following impact:

- There could potentially be an impact as increasing charges and making new changes have an adverse financial affect.

136. For all groups, these changes help to ensure that the council can continue to help as many people with care and support needs as possible within the limited resources available. To this extent there should be a positive impact overall, as resources will be distributed more equitably.
137. These proposals impact on existing social care clients and we will be undertaking a separate and more detailed consultation in addition to the overarching budget consultation so we can make sure all our clients and their families have the opportunity to engage fully.
138. **SHIL 4: Review service charges to tenants in council owned properties, increasing the existing charges and introducing three new ones.** As a landlord, the council provides a range of services to tenants and leaseholders. Rents generally include all charges relating to the occupation of a property while service charges relate to additional services which may not be provided to every tenant, or to communal facilities. These include block cleaning, concierge, heating, grounds and garden maintenance and other services. The council has legal powers to charge for these services so long as the charges are clear and transparent and represent the actual cost of the service. The council's current charges are lower than the actual costs and in some cases the council has not previously made a charge, but has been providing a service to tenants. The council needs to have a viable and sustainable Housing Revenue Account (HRA) that enables the council to deliver effective services, invest in its properties so homes are of a modern standard, and to provide new social housing to rent. If the council does not recover its actual costs for these services it has a detrimental effect on the HRA overall.
139. We have identified the following impacts:
- Council tenants are more likely to be on lower incomes and eligible for qualifying benefits than other groups.
 - Approximately 10,000 tenants are currently in receipt of Housing Benefit/Universal Credit.
 - Those on lower incomes are more likely to experience a proportionally higher impacts of a service charge increase than others.
140. We have identified the following mitigations:
- Tenants will be given information as to how to gain advice from local agencies such as the council's Homeless Prevention Team, Citizen Advice, Money Advice Service, StepChange, Money Matters, Age UK, and local relevant charitable/voluntary sector organisations.
 - We would undertake detailed consultation with affected tenants as proposals are developed, and before any decisions are taken about each block. As part of that process we would also review and consider what measures we might need to take to address equality impacts or other impacts for individuals and properties.
 - Some service charges may be covered by Housing Benefit/Universal Credit.
 - The council intends to set up a discretionary relief fund if these proposals are approved to help those in most need to pay for all or part of the additional charges.
141. **SSEG1: Introduce charges for blue badge holders in council owned off street car parks.** We are proposing to withdraw free parking for Blue Badge holders in council owned off-street car parks, so they will be subject to the same charges, terms and conditions as other users. The Blue Badge scheme helps disabled people park close to their destination, and is specifically intended for on-street parking (e.g. on streets

with parking meters or pay-and-display machines, in disabled parking bays and on yellow lines). Under this proposal, holders will still be able to park on-street for free, but charges will be introduced in council owned surface car parks and the West Park Road Multi-story car park. All other multi-story car parks in the city already charge blue badge holders for parking, and many other local authorities also charge for parking off-street.

142. We have identified the following impact:

- People who are disabled and rely on their Blue Badge for free parking, who are on low income, may be impacted by the charging for off-street car parks.

143. We have identified the following mitigation:

- Free on-street car parking is available for anyone who is a Blue Badge Holder.

144. **SSEG2: Increase Itchen bridge fees for non-residents.** We are proposing to increase the Itchen Bridge toll charge by 20p for non-residents of the city. Residents who have a Smartcities card will pay the same charge as they do now, and crossing the bridge will still be free for motorcycles, electric vehicles and blue badge holders.

145. We have identified the following impact:

- This proposal may have a negative impact on some users who are non-residents or non-smart card users, who are low income earners and need to travel to Southampton to work.

146. We have identified the following mitigation:

- The price increase is to meet the running costs of the bridge, including maintenance and management. This charge would not apply to residents that receive a concessionary toll and this discount would be protected.

Health and Wellbeing:

147. **CYP1: Review and redesign early help and outreach preventative services, to deliver a new focussed locality based model which prevents children becoming looked after by the council.** The locality based early help and prevention model was introduced in 2017, in partnership with health. The service offers advice and support to children and families and includes a mix of universal services (meaning they are open to everyone who wants to use them), and more targeted, intensive support for children and young people with additional needs. It includes Sure Start children's centres, health visiting, school nursing, Families Matter and the Family Nurse Partnership. The service has been successful, and we are proposing to extend it by bringing in more specialist and targeted health and social care services which can address issues such as complex parenting, challenging behaviours, supporting disabilities, welfare advice, mental health advice, domestic abuse and exploitation support services.

148. These services are currently available, but have to be accessed separately. By delivering more services locally for families, we aim to make them part of a community resource that is practical and easy to access. We also want to increase our partnership working with local community and voluntary services. This will enable us to engage families at an early stage when they are facing difficulties, challenges or need advice to avoid those challenges. Providing the right help early can stop problems getting worse or avoid issues altogether. Evidence shows that this can deliver better outcomes for children and families as well as saving money in the longer term as it avoids the need for more intensive, long term support. Therefore, it should ultimately reduce the number of children coming into statutory services with escalated needs, requiring the

intervention of the council. The redesign will review current specialist services such as Educational Welfare, Inclusion and Targeted teams, Youth Offending and others to offer a more uniform approach and increase accessibility in local settings to support families and schools.

149. We have identified the following impact:

- If services reduce in some areas, this could have an impact on the socialisation of children and their parents/carers, and their health and wellbeing.

150. We have identified the following mitigation:

- The council will continue to target resources to areas of greatest need, if community led delivery is not possible in these areas. It will still be possible to access professional support via other routes.

151. The proposed service will have a number of positive impacts on children and families in Southampton:

- There will be a clearer offer for children and families and more services will be based locally.
- There will be less reliance on assessment or strict criteria of access and greater focus on targeted need and intervention.
- Children and families will be able to access support and help with any challenges or issues more quickly.
- Services will be more joined up and focused on the key issues that are challenging family stability and resilience.
- There will be closer working relationships across the professional networks.
- There will be greater opportunities to develop links with community and voluntary sector organisations.

152. As proposals are developed in more detail, we may need to undertake some additional consultation.

153. **CYP2: Review the council run play offer and seek community and voluntary sector partners to take over the direct running of this service.** The council's 'play offer' runs out of Sure Start Children's Centres and allows children and families to access play sessions in a safe and contained space. The council currently sets up, runs and facilitates play sessions in 7 centres across the city and these are all staffed by council employees. The sessions interact with an average of 15 children per session and their parents and usually run weekly. The current offer extends to an estimated 140 children. The council recognises the importance of these play sessions to children and their parents/carers. However, it is also important that council resources are targeted where they are needed most, and that we work with other public sector, private sector, voluntary and community organisations to deliver the best value and most joined up services.

154. We are therefore proposing to explore opportunities for some play services to be run or co-run by local community volunteers and/or parent volunteers rather than council staff. The council and its partners will continue to coordinate and support the running of these groups, though will seek to hand over some facilitation to capable and trained members of the community. Council staff will continue to run some targeted sessions if there are areas where it is not viable to deliver a community led play offer; in that case, these will be targeted to those areas with the greatest need. The council will also support work to develop the availability of play opportunities across the city.

155. Further work will be undertaken to engage with local voluntary and community organisations during the process of the consultation, including assessing the level of interest in running or co-running play sessions, and their views will help inform the final decision on this proposal.

156. We have identified the following impact:

- If services reduce in some areas, this could have an impact on the socialisation of children and their parents/carers, and their health and wellbeing.

157. We have identified the following mitigation:

- The council will continue to target resources to areas of greatest need, if community led delivery is not possible in these areas. It will still be possible to access professional support via other routes.

158. The delivery of a play offer through communities will strengthen and build partnerships between the council and communities. Exploring innovative community led delivery models will enable the council to maintain services in parts of the city which potentially could otherwise see a significant reduction of ceasing of the play offer.

159. **CYP 6 Reduce Early Intervention Fund which supports early years and childcare providers to expand or set up new provision.** The Early Intervention Fund supports early years and childcare providers to expand or to set up new provision. In 2018/19, £116,000 was allocated to the Fund. The proposal is to reduce the funding allocated to the Early Intervention Fund to £15,000 per annum in 2019/20 and beyond. Providers will be encouraged to seek funding from other sources. The council will also work with schools to encourage more of them to deliver early education.

160. We have identified the following impact:

- If sufficient childcare places are not available, this may have an impact on the health and wellbeing of children and their parents.

161. We have identified the following mitigation:

- The council will signpost providers who are considering expanding to national grants, and work with schools to encourage more schools to deliver early intervention. The council has a statutory duty under the Childcare Act 2006 and subsequent revisions to ensure there are sufficient early education places, so if insufficient places are available in future, the council will take appropriate action to address that.

162. **SHIL2: Closure of two council owned residential care homes for older people, enabling the council to focus on the development of housing with care and community-based services, with the local home care market providing residential care where this is needed.** The council currently runs two residential care homes, Holcroft House and Glen Lee, which provide short and long term care for adults living with dementia. There are currently too many residential homes in the city with a total of 36 residential homes registered for dementia care in Southampton (including the two homes run by the council), and 70 vacancies as of October 2018. Although demand for adult social care is increasing, the demand for residential care is decreasing as more people are supported to live independently in their own homes. Most older people prefer to continue living at home for as long as possible, or to access alternatives like Housing with care or Shared Lives, rather than go into a residential care home. We are therefore proposing to close both the council owned residential care homes. This would allow the council to focus on developing more

Housing with care and community-based services, and for other providers to continue providing care and support where residential care is needed.

163. These proposals impact on existing social care clients and we will be undertaking a separate and more detailed consultation in addition to the overarching budget consultation so we can make sure all our clients and their families have the opportunity to engage fully. Thorough, person-centred assessments will be undertaken of each individual resident of the homes to determine their needs and how they can best be met in future before any final decisions are taken. These will take into account the views and preferences of the person as well as their families, carers and where appropriate their independent advocates. The proposed closures would be carefully managed and the needs and welfare of residents and families would be paramount when considering transfers to other social care provision.

164. We have identified the following impact:

- Residents' concerns and levels of anxiety could impact their emotional and physical wellbeing particularly just before and move or immediately afterwards. Relatives of residents may also have concerns relating to finding suitable alternate care and support which could impact their health and wellbeing.

165. We have identified the following mitigation:

- Needs assessments and reviews will take place for all residents prior to any changes taking place. Through this process information on alternatives will be made available.

166. In the longer term there is evidence that supporting people living with a dementia to live independently in their own homes drawing where appropriate on the support of others in their community leads to the best outcomes for those people. Re-providing residential care and support in homes run by charities and the private sector is more cost effective, supporting a more sustainable social care system locally, ensuring that the needs of people in Southampton can continue to be met in full.

167. The proposal for change includes the development of more housing with care schemes as an alternative to residential care. This is a positive impact on people who live in Southampton, as this will enable people to live independently within a scheme in a self-contained flat which will have the benefit of an on-site care team.

168. These proposals impact on existing social care clients and we will be undertaking a separate and more detailed consultation in addition to the overarching budget consultation so we can make sure all our clients and their families have the opportunity to engage fully. If, following consultation, a decision is made to close the two homes, thorough, person-centred assessments will be undertaken of each individual resident of the homes to determine their needs and how they can best be met in future. These will take into account the views and preferences of the person as well as their families, carers and where appropriate their independent advocates. The proposed closures would be carefully managed and the needs and welfare of residents and families would be paramount when considering transfers to other social care provision.

169. **SHIL 3: Reclassify some council properties currently only available to those aged 60 and over, making them available to people over 50.** There is a significant demand for affordable social rented homes in Southampton and there are currently 8,000 people on the Housing Register. However, there are a number of properties that are currently 'hard to let'. These are typically properties which are restricted to residents aged 60+, which are on the first floor or above in walk up blocks (without

lifts). We are proposing to reclassify some properties which are currently restricted to residents aged 60+ to make them available to those aged 50+ or 55+. The blocks currently identified as potentially suitable for reclassification include: Malin Close, Rockall Close, Lundy Close, Curzon Court, Sarina Court, Manston Court, Maybush Court, Vellan Court, Penrith Court, Mansel Court, Jessamine Road, Edward Road, Avington Court, Basset Green Court, Bowman Court, Meon Court and Dewsbury Court.

170. We have identified the following impact:

- Some tenants aged 60+ may have concerns about the reclassification of neighbouring properties, as it would mean that the block has a wider mix of tenants including those who are 50+ rather than 60+, as well as potentially younger partners and families.

171. We have identified the following mitigations:

- Tenants will continue to have access to wellbeing and prevention staff and Local Housing Management staff.
- There will be clear signage including rights and responsibilities of tenants.

172. The potential impact of this proposal is positive and could result in, improved void turnaround times, increase in rental income and improved rehousing for those aged 50-60 who are on the housing register.

173. The proposal is to review and potentially classify accommodation in phases, block by block. We would undertake detailed consultation with affected tenants as proposals are developed, and before any decisions are taken about each block. As part of that process we would also review and consider what measures we might need to take to address equality impacts for individuals and properties.

174. **SHIL 4: Review service charges to tenants in council owned properties, increasing the existing charges and introducing three new ones.** As a landlord, the council provides a range of services to tenants and leaseholders. Rents generally include all charges relating to the occupation of a property while service charges relate to additional services which may not be provided to every tenant, or to communal facilities. These include block cleaning, concierge, heating, grounds and garden maintenance and other services. The council has legal powers to charge for these services so long as the charges are clear and transparent and represent the actual cost of the service. The council's current charges are lower than the actual costs and in some cases the council has not previously made a charge, but has been providing a service to tenants. The council needs to have a viable and sustainable Housing Revenue Account (HRA) that enables the council to deliver effective services, invest in its properties so homes are of a modern standard, and to provide new social housing to rent. If the council does not recover its actual costs for these services it has a detrimental effect on the HRA overall.

175. We have identified the following impacts:

- Tenants may experience increased financial strain due to increased living costs, which may have negative impacts on health and wellbeing.

176. We have identified the following mitigations:

- Tenants will be given information as to how to gain advice from local agencies such as the council's Homeless Prevention Team, Citizen Advice, Money Advice Service, StepChange, Money Matters, Age UK, and local relevant charitable/voluntary sector organisations.

- We would undertake detailed consultation with affected tenants as proposals are developed, and before any decisions are taken about each block. As part of that process we would also review and consider what measures we might need to take to address equality impacts or other impacts for individuals and properties.
- Some service charges may be covered by Housing Benefit/Universal Credit.
- The council intends to set up a discretionary relief fund if these proposals are approved to help those in most need to pay for all or part of the additional charges.

Other Protected Characteristics

177. We have identified no direct impacts for the following:

- Gender reassignment
- Marriage and civil partnership, but only in respect of the requirements to have due regard to the need to eliminate discrimination.
- Race – ethnic or national origins, colour or nationality
- Religion or Belief – including lack of belief
- Sex (Gender)
- Sexual orientation.

Public Consultation

178. An extensive programme of consultation will be undertaken between the between 24 October 2018 and 16 January 2019. Public consultation will be undertaken with any people or organisations affected by the proposals to ensure all options have been considered, as well as with residents at a wider level. Southampton City Council is in a challenging financial position with significant reductions in its funding from central government, at a time when demand for certain services such as adult and children's social care continues to increase. Therefore the aim of this consultation is to:

- Communicate clearly and make residents aware of the financial pressures the council is facing
- Ensure residents understand what is being proposed in the draft 2019/20 budget and are aware of what this will mean for them
- Enable any resident, business or stakeholder who wishes to comment on the proposals the opportunity to do so, allowing them to raise any impacts the proposals may have
- Ensure that the results are analysed in a meaningful, timely fashion, so that feedback is taken into account when final decisions are made
- Provide feedback on the results to the consultation and how these results have influenced the final decision.

179. Every effort will be made to ensure consultation is:

- Inclusive: so that everyone in the city has the opportunity to express their views.
- Informative: so that people have adequate information about the proposals, what different options mean, and a balanced and fair explanation of the potential impacts, particularly the equality and safety impacts.
- Understandable: by ensuring that the language we use to communicate is simple and clear and that efforts are made to reach all stakeholders, for example people who are non-English speakers or disabled people.
- Appropriate: by targeting people who are more likely to be affected and using a more tailored approach to get their feedback, complemented by a general approach to all residents, staff, businesses and partners.

- Meaningful: by ensuring decision makers have the full consultation feedback information so they can make informed decisions.
- Reported: by letting consultees know what we have done with their feedback.

180. The overarching consultation will be based around an online questionnaire with information sheets grouping proposals into themes, paper copies will also be made available. As a part of the main budget consultation affected service user consultation will take place on a service by service basis led by respective service managers and will be conducted in a way that is proportionate and appropriate to the budget proposal and service.

181. In addition to the overarching budget consultation, due to the nature of some of the proposals there will be three specific consultation which run in parallel to the budget consultation. This enables the appropriate information to be included and for materials and engagement to be targeted at those affected. The three additional consultations are:

- Revise the Adult Social Care charging policy
- Closure of two council owned residential care homes
- Review of service charges for tenants (HRA).

182. In addition further consultation will be undertaken with affected tenants on the proposal to reclassify some council properties currently only available to those aged 60 and over as proposals are developed, and before any decisions are taken about each block.

183. This Cumulative Impact Assessment will be updated and developed based on the final proposals and detail of individual ESIA's. It will also be informed by the feedback from residents and stakeholders as part of the public budget consultation.