Potential for developments in partnership working across frontline services – update March 2014
Guidance

Please refer to the Impact Assessment and Human Rights Screening Guidance v1.5 which is available on the Intranet via the following link:


If you require further assistance please contact your department’s Corporate Equality & Diversity group representative. This information is available from the Corporate Policy Department.
Section 1: Initial Assessment

Please provide as much information as possible

<table>
<thead>
<tr>
<th>Name of activity:</th>
<th>Potential for developments in frontline partnership working</th>
</tr>
</thead>
<tbody>
<tr>
<td>Manager or Sponsoring Directors Name:</td>
<td>Sally McIvor</td>
</tr>
<tr>
<td>Department/Directorate:</td>
<td>Chief Executive’s Department</td>
</tr>
<tr>
<td>Service:</td>
<td>Children’s Services; Adult Social Care Services and Neighbourhood Services</td>
</tr>
<tr>
<td>Assessment Lead:</td>
<td>Philippa Cross</td>
</tr>
<tr>
<td>Telephone:</td>
<td>01254 585245</td>
</tr>
<tr>
<td>E-mail:</td>
<td><a href="mailto:philippa.cross@blackburn.gov.uk">philippa.cross@blackburn.gov.uk</a></td>
</tr>
<tr>
<td>Who else will be involved in undertaking the equality analysis and impact assessment:</td>
<td>n/a</td>
</tr>
<tr>
<td>Who are you consulting with and how?</td>
<td>Consultations with partner agencies and services users will be undertaken at the relevant points in time in relation to each of the specific potential service developments being explored.</td>
</tr>
</tbody>
</table>

Updated March 2014

Service proposals to be explored with operational managers with a workshop in April. Service user engagement to be held in May, all feedback will help to inform the model design.

Please insert any information around surveys and consultations undertaken:

Integrated service delivery across health and adult social care
- Blackburn with Darwen Clinical Commissioning Group
- General Practitioners Operating in Blackburn with Darwen
- Pennine Lancashire Clinical Transformation Board
- 50+ Partnership
- Families, Health and Wellbeing Consortia.
- Additional consultation sessions for patients, service users and the public have been carried out between January and March 2014 including a focus group of residents over 65 and carers, patient groups and The Older Peoples Forum.

Early Help for children and families
The Early Help approach was developed in consultation with a wide range of partner organisations; council services and children and young people.
Extensive consultation was undertaken in relation to the Children’s Centres review, as outlined to Executive Board in August 2013. Details of the consultation and outcomes are provided within the Executive Board report, which can be accessed here: http://94.236.33.182/CmiswebPublic/Binary.ashx?Document=10753
### Area based service delivery with Lancashire Constabulary (the Transforming Lives approach for Blackburn with Darwen)

Initial discussions have been undertaken with representatives from Lancashire Constabulary; Blackburn with Darwen Clinical Commissioning Group; East Lancashire Hospitals Trust; Lancashire Care Foundation Trust and Blackburn with Darwen Families, Health and Well-being Forum.

A programme of consultation and engagement with frontline staff and key service users is currently being developed and will be delivered from March - May, in order to ensure that their view and opinions inform the design and delivery of the Transforming Lives approach.

### References

Please identify additional sources of information you have accessed to complete the EIA for example, websites; journals; reports etc.

**Updated March 2014**

*The Better Care Fund – Integration for Improved Outcomes (in support of Better Care Fund application) – EIA March 2014*


HM Government (2012); “Social justice; transforming lives”; The Stationery Office Limited; London.

Kippin, H; Randle, A (2014) “Managing Demand: Building future public services”; The Royal Society for the Arts; London

Mental Health Strategic Partnership (2013); “Building resilient communities: Making every contact count for public mental health”; Mind; London


### Implementation date:

**Updated March 2014**

*Integrated service delivery across health and adult social care*

It has now been agreed that the year 1 (2014-2015), focus for this approach will be those deemed most at risk of hospital admission, including those with long term conditions, mental health problems, substance misusers and the frail, elderly populations.

Wider roll out of the integration programme will be delivered as outlined below:

- Services for frail/older people and those with long term conditions 2013 – 2015, with a planned date for integrated teams by September 2014

- Services for children and young people including children with complex needs; targeted and universal service provision 2013 -
2017. To include the delivery of the 0-25 strategy and integrated care and assessment plans and transfer of Early Years Health services to the Council in April 2015. Some services will continue to be centralised, some may lend themselves to delivery within the four local areas. There will be a close link between this strand and the Early Help approach.

- Working age adults (18 - 65) mental health, learning disability services and drug and alcohol services 2013 – 2016. This work stream involves a small number of people with complex and chaotic lifestyles, many who live in temporary accommodation and present additional demand pressures on services, there will be a close link between this strand and the Transforming Lives approach.

Further details are identified within the Better Care Fund – Integration for Improved Outcomes (in support of Better Care Fund application) – EIA March 2014, documented within the References section above.

Early Help for children and families
The excellent work undertaken on developing and delivering the Early Help strategy and approach, has been, and will continue to be critical in informing the development of the Transforming Lives approach, as such relationships and working practices for key children’s services are likely to continue to evolve as Transforming Lives develops further.

Specifically, the Family Support Team, and other current early years services, will be reviewed over the next six months, to ensure that they work appropriately with the local area Transforming Lives teams and that the Early Help approach is delivered by the widest possible range of partners.

Area based service delivery with Lancashire Constabulary (the Transforming Lives approach for Blackburn with Darwen)
From April 2014, a multi-agency Transforming Lives panel, will operate, building on the current Family Support Panel, and will consider requests for multi-agency support for a person, or family, experiencing significant problems.

A phased approach to implementing the model is currently being developed, which aims to see the first phase (the panel) being implemented from April 2014, with full roll out being completed by April 2015.

<table>
<thead>
<tr>
<th>Type of activity:</th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>Budget changes</td>
<td>☐</td>
</tr>
<tr>
<td>Change to existing policy</td>
<td>☒</td>
</tr>
<tr>
<td>Commissioning</td>
<td>☐</td>
</tr>
<tr>
<td>Decommissioning</td>
<td>☐</td>
</tr>
<tr>
<td>New policy</td>
<td>☒</td>
</tr>
</tbody>
</table>
**How was the need for the activity identified?**

Development work is currently underway within the Council and with partners in the health and police services, through which the remodelling and integration of frontline services, at a local area level, is being considered. Such changes would be with a view to ensuring more efficient, joined up and effective service delivery.

Such developments have arisen as a logical next step following the re-shaping of the health services nationally and locally, and the re-organisation of divisional policing arrangements, coupled with the need to bring about better outcomes for our communities, at a time when resources are shrinking.

**Update March 2014**

**Integrated service delivery across health and adult social care**

Health and social care services for frail elderly and disabled adults as currently configured are widely agreed to be unsustainable in the face of future projected need and increasing financial constraints. A major drive is under way at a national level to promote greater integration of health and care services, now supported by the new Better Care Fund announced in the Government’s 2013 Spending Review. The national drive for integration across health and social care is matched by work being undertaken at local level between the Council and CCG to integrate a much broader range of services, and to develop and implement partnership teams based on four local areas across the borough. These integrated teams will provide a means by which we can co-ordinate care around the needs of individuals in our community to enable our goal of disability free, increased life expectancy to be realised.

From the perspective of the individual service user, integrated care can be described as “I plan my care with people who work together to understand me and my carer(s), allow me control, and bring together services to achieve the outcomes important to me”.

This principle underpins our approach to integrating health and adult social care within the four local areas identified within the December Executive Board report.

The case for integrated care as an approach, particularly to meet the needs of the aging population and those with long term and complex conditions, is well evidenced nationally.

**Early Help for children and families**

It is well documented that Early Help approaches for children, young people and their families do more to reduce the prevalence of abuse and neglect than reactive and more costly statutory services. Early Help provides effective, co-ordinated, multi-agency early intervention and prevention not only to children and young people, but to their families too.

The Early Help strategy will contribute at a local level to:

- Narrowing the Gap – e.g. reducing health inequalities
- Keeping children and young people safe
### What is the activity looking to achieve?

- Improving readiness for school
- Mitigating the effects of poverty

In addition, future Ofsted inspections will focus on Early Help, particularly the “degree to which agencies work together to identify problems and offer effective early help without the need for a formal referral to social care”. The effectiveness of early help services will thus impact significantly on the Local Authority’s inspection judgment.

**Transforming Lives approach for Blackburn with Darwen**

Transforming Lives draws heavily on national evidence in relation to Early Help, and work by the Audit Commission, the Early Action Task Force, and the Marmot Review 2010. These national policy sources all document the benefits achieved through agencies working together at the earliest opportunity; working with people facing multiple problems to secure better outcomes and reducing the costs of service delivery.

It is recognised nationally and locally that the combined issues of domestic abuse, parental mental ill health and parental substance misuse impact massively on children and their families, with an increased risk of this cycle of harm continuing to affect the next generation. The Transforming Lives approach will work with Early Help services to coordinate work with adults, children and their families to address these issues and prevent harm continuing in the next generation.

Anecdotal evidence suggests there are likely to be crossovers in the group of people who come into contact with the different service models being considered for local area delivery, particularly in relation to adult services. For example, adults under 65 with complex needs could potentially need input from the health and social care local area team as well as the Transforming Lives team, due to mental health and substance misuse issues. Rather than re-designing these services and developing the approaches in isolation, a coordinated approach can avoid duplications across agencies, and avoid the dangers of ‘silos working’. Cross-agency work on information sharing, workforce development and assets will also be an important aspect of the new approach, to maximise the use of joint resources.

The developmental discussions referred to within the Executive Board report are being undertaken to explore radical changes to the way services are delivered in Blackburn with Darwen, to ensure they put services users at their heart and deliver better, more cost effective outcomes.

**Update March 2014**

The use of a local area-based approach to partnership working across agencies is in line with both national and local policy directions, aimed at increasing resilience in local communities through the development of community capacity and coordinated service delivery across agencies.

The Early Help strategy for the borough sets out a framework for early intervention and prevention services across the multi-agency Children and Young People’s Partnership, adopting a coordinated approach to...
ensure that a whole family, early action is taken to tackle the problems faced by children, young people and their families. The effectiveness of local Early Help provision will be tested through the new OFSTED framework and will significantly impact on the Local Authority’s inspection judgement.

Transforming Lives will provide a coordinated approach to local area based service delivery, across adult services, Lancashire Constabulary and health services, alongside Early Help services.

The Transforming Lives approach will be targeted towards people who are experiencing/demonstrating one or more of the following characteristics and interventions are required from more than one agency:

- Mental health and well-being problems
- Substance misuse, including alcohol
- Repeat victim or perpetrator of violence and/or aggression (except those deemed as high risk in relation to safeguarding)
- Frequent user of emergency services and/or unscheduled care (e.g. A&E) for genuine or non-genuine reasons
- Frequent malicious caller to emergency services (e.g. to police; fire and ambulance)
- Repeat offender for crime or anti-social behaviour

It is felt that this targeted approach to specific people would allow Transforming Lives to have the biggest impact in addressing inter-generational harm and reducing future demand on crisis services.

### What are the aims and objectives?

**Integrated service delivery across health and adult social care**

Integrated care is a concept which aims to bring together inputs, delivery, management and organisation of services related to assessment, diagnosis, treatment, care, rehabilitation and health promotion. Integration is a means by which we can co-ordinate care and support around the needs of individuals in our community, to improve their quality of life.

**Update March 2014**

Local area integrated community teams will initially focus on:

- Identifying levels of risk within the population - using all the information available to group people with Long Term Conditions according to risk level so that a targeted and co-ordinated approach to their care can be delivered; the risk stratification tool will be held within the GP Practices who are participating in the pilot
- There will be one identified lead key worker caring for a given person in a ‘virtual ward’ model
- Emphasising self-care for people with Long Term Conditions - that is support to help people maximise their personal capacity to manage their own health conditions

The programme for integration will be supported by the Better Care Fund (BCF, previously Integration Transformation Fund), which was announced in June 2013 as part of the Government’s Spending...
Round. The BCF will provide an opportunity through pooled budget arrangements to transform local services so that people are provided with better integrated care and support. The BCF will bring together NHS and Local Government resources, and provide a real opportunity to improve services and value for money, protecting and improving adult social care services by shifting resources from acute services into community and preventative settings at scale and pace.

**Early Help for children and families**

The aim of Early Help is to rationalise and join up existing services to achieve better outcomes, while reducing overall expenditure; ensuring that the children, young people and their families receive support as quickly as possible; and that their needs are met and risks are managed without on-going, long-term social work support.

**Update March 2014**

The borough’s Early Help strategy was endorsed at Executive Board in January 2014; it sets out the key principles and approach that all partners will take in coordinating early intervention and prevention activities for children and their families who are facing problems. The key principles of the Early Help approach are:

1. Focusing on the identification and access to early help opportunities with families
2. Commitment from all professional staff, volunteers and family members to working together
3. Positive interventions and sharing responsibility for the achievement of better outcomes for children, young people and their families
4. Working to overcome barriers to achieving better outcomes for all
5. Promote shared learning across organisations to ensure that what we do is based on good evidence

These principles are underpinned by the view that families are central to defining and addressing the problems that they face and that they are key partners in the process.

**Area based service delivery with Lancashire Constabulary (the Transforming Lives approach for Blackburn with Darwen)**

It is envisaged that this review will provide a model which assesses the level of risk posed by an individual/family; agrees what the most effective response will be and identifies a single agency to lead that response and work with the individual/family (liaising with other services as necessary). This model would then avoid the need for organisations to intervene separately and would ensure all interventions are coordinated.

**Update March 2014**

The December 2013 Executive Board considered proposals outlining that frontline local authority and police services were to be transformed to ensure professionals work together more effectively at a local area level, with families and individuals, who are presenting concerns, or a level of risk to themselves or their community, to avoid duplicate interventions and reduce the increasing demand on services. The resultant Transforming Lives approach provides an
overarching philosophy for structuring services to respond to the needs of people, before their behaviour escalates to crisis point.

There are six key principles of Transforming Lives which each agency signing up to the approach will be required to adopt:

1. Identifying and taking opportunities as early as possible with people who require our support
2. Committing to working together with all organisations, to ensure the delivery of the Transforming Lives approach and the achievement of improved outcomes for people
3. Recognising that working with people, is everyone’s business, and it is everyone’s job to support individuals in the manner outlined within the Transforming Lives approach
4. Recognising that the individual(s) is/are central to defining and addressing the problems that they face and they are key partners in this approach
5. Working with the individual(s) and other services to overcome barriers to achieving better outcomes
6. Recognising that taking action early is an investment that reduces demand on high cost services

These principles have been informed by, and reflect those agreed for the health and social care integration programme and the Early Help strategy, in order to ensure consistency of approach and whole system change across all organisations concerned.

The approach also has, at its core, the drive to create efficiency savings for the local authority and other key partners and to create a model that manages and reduces the increasing demand on high cost services. In the short term, savings will be made from remodelling the workforce and avoiding duplicate service delivery, in the medium/long term, savings will be made from the reduced demand on high cost/crisis services (e.g. safeguarding; adult social care; the criminal justice service and A&E).

<table>
<thead>
<tr>
<th>Services currently provided:</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Integrated service delivery across health and adult social care</strong></td>
</tr>
<tr>
<td>This review will likely bring together adult social care staff, GP’s, community nurses, mental health teams, allied health professionals, pharmacists and specialists.</td>
</tr>
<tr>
<td><strong>Early Help for children and families</strong></td>
</tr>
<tr>
<td>The review’s scope covers the Council’s early help, family support and a majority of its children’s social care services.</td>
</tr>
<tr>
<td><strong>Area based service delivery with Lancashire Constabulary (the Transforming Lives approach for Blackburn with Darwen)</strong></td>
</tr>
<tr>
<td>The services currently included within the scope for this model are the Council’s neighbourhood services (including troubled families and community safety/anti-social behaviour); children’s social care; adult’s social care (safeguarding) and police early action and preventative services. Ideally, as the model progresses, the scope will widen to include North West Ambulance Service; East Lancashire Hospitals Trust; and third sector commissioned services, such as those for domestic abuse.</td>
</tr>
</tbody>
</table>
Recommendations following change in service:
Please outline recommendations that have been identified for implementation following a review of the activity.

Updated March 2014

Each of the three service reviews referenced above and in the Executive Board report, have not yet been fully completed, and many are still in scoping stage. However some initial service changes have been identified and these are currently being consulted on with relevant stakeholders; service users and staff.

Integrated service delivery across health and adult social care
There has been an eighteen month pilot, within the East area of Blackburn that has been testing out this model of integrated service delivery, using a “virtual” ward model and the increased promotion of self-care. This pilot is founded on international evidence of service delivery that has shown to have improved outcomes for people and reduced unscheduled admissions, particularly for those living with more than one condition. This evidence also supports taking a ‘person-centred approach’ to care which involves looking at the range of needs of an individual patient in order to assess health and social care service responses. The approach differs from those adopted traditionally, which focus on the nature of a disease and its associated risks, to determine the care response. This pilot is influencing the development of the integrated service delivery. More details of which are outlined within the Better Care Fund EIA referenced on page 1 of this EIA.

Early Help for children and families
Since December 2013, the re-organised Children’s Centre network hub and spoke model has been established, and the new local management boards have been formed. The officer management team and geographical team structures that will support the new network are currently being reviewed to ensure that they align in the most efficient way possible.

Social work services have also been reviewed and re-aligned to work across the four local areas. This strengthened local area focus, will ensure smoother; more seamless and uninterrupted pathways between Early Help and social care for children and families, should their needs and risk increase or decrease.

Area based service delivery with Lancashire Constabulary (the Transforming Lives approach for Blackburn with Darwen)
From April 2014, a multi-agency Transforming Lives panel, will operate, building on the current Family Support Panel, and will consider requests for multi-agency support for a person, or family, experiencing significant problems. If agreed, the case would then be allocated to the appropriate local area team (aligned to the four area model), where a lead agency key worker would be identified, who would then approach the person/family; conduct a detailed assessment and case history and develop an improvement plan with agreed milestones and arrange access to support services.

The Transforming Lives approach will be targeted towards people who are experiencing/demonstrating one or more of the following characteristics and interventions are required from more than one agency:
- Mental health and well-being problems
- Substance misuse, including alcohol
- Repeat victim or perpetrator of violence and/or aggression (except those deemed as high risk in relation to safeguarding)
- Frequent user of emergency services and/or unscheduled care (e.g. A&E) for genuine or non-genuine reasons
- Frequent malicious caller to emergency services (e.g. to police; fire and ambulance)
- Repeat offender for crime or anti-social behaviour

It is felt that this targeted approach to specific people would allow Transforming Lives to have the biggest impact in addressing inter-generational harm and reducing future demand on crisis services.

Following the establishment of the Transforming Lives panel, work will commence to bring together representatives from different services, into a single location in each of the agreed four areas. These teams will take on case management and coordination of work with the people engaged in Transforming Lives. The long term ambition is to base these teams with the integrated health and social care teams, in order to ensure they work closely together and continue to avoid duplicating interventions.

As and when full service proposals are developed, full EIAs will be completed for each of the three developmental work areas mentioned throughout section 1.

<table>
<thead>
<tr>
<th>Who does the policy or decision being made impact upon?*</th>
<th>**Carers or family</th>
<th>☑ Yes</th>
<th>☐ No</th>
<th>☐ Indirectly</th>
</tr>
</thead>
<tbody>
<tr>
<td>General Public</td>
<td>☐ Yes</td>
<td>☐ No</td>
<td>☑ Indirectly</td>
<td></td>
</tr>
<tr>
<td>** Partner organisations</td>
<td>☑ Yes</td>
<td>☐ No</td>
<td>☐ Indirectly</td>
<td></td>
</tr>
<tr>
<td>** Service Users</td>
<td>☑ Yes</td>
<td>☐ No</td>
<td>☐ Indirectly</td>
<td></td>
</tr>
<tr>
<td>** Staff</td>
<td>☑ Yes</td>
<td>☐ No</td>
<td>☐ Indirectly</td>
<td></td>
</tr>
</tbody>
</table>

Signature and Date:  

Cross  

31st March 2014

* If no impact is identified on any of the groups a full EIA may not be required. Please contact your departmental Corporate Equality & Diversity representative for further information.

** As the plans have yet to be finalised, it is expected that the proposals will impact these groups. Once the plans have been finalised for consultation, full EIAs will be published.
### Section 3: Action Plan

<table>
<thead>
<tr>
<th>No.</th>
<th>What is the negative/adverse impact?</th>
<th>Actions required to reduce/eliminate the negative impact</th>
<th>Resources required* (see guidance note below)</th>
<th>Who will lead on action?</th>
<th>Target completion date</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Full impact not known at this stage</td>
<td>As and when full service proposals are developed, full EIAs will be completed for each of the three developmental work areas mentioned throughout section 1. <strong>Update March 2014</strong> Each of the three service reviews referenced above and in the Executive Board report, have not yet been fully completed, and many are still in scoping stage. However some initial service changes have been identified and these are currently being consulted on with relevant stakeholders; service users and staff. This consultation will feed into an updated EIA for each of the three strands of work outlined within this EIA.</td>
<td><strong>Update March 2014</strong> Resources to deliver the approaches referred to within this report, mainly staff time, will predominantly be met from within existing services. The programme of work to deliver the health and adult social care service integration will be supported by additional resources from the Better Care Fund, assuming that Blackburn with Darwen is successful in its submission to the Department of Health.</td>
<td>Philippa Cross</td>
<td>1&lt;sup&gt;st&lt;/sup&gt; April 2014 – 31&lt;sup&gt;st&lt;/sup&gt; March 2015</td>
</tr>
</tbody>
</table>

* ‘Resources required’ is asking for a summary of the costs that are needed to implement the changes to mitigate the negative impacts identified.
## Section 4: Monitoring and Review

### Monitoring guidance

The responsibility for establishing and maintaining the monitoring arrangements of the EIA action plan lies with the service completing the EIA. These arrangements should be built into the performance management framework.

Monitoring arrangements for the completion of Equality Impact Assessments will be undertaken by the Corporate Equality & Diversity Group and the oversight of the consequent action plans will be undertaken by the Management Accountability Framework.

<table>
<thead>
<tr>
<th>If applicable, where will the departmental action plan be monitored?</th>
<th>With the Corporate Strategy and Democratic Service management team</th>
</tr>
</thead>
</table>
| **GUIDANCE**  
*For example, Service Management Team; Service Leadership Team; Programme Area Meeting.* |

### Reviewing guidance

The responsibility for establishing and maintaining the review arrangements of the Impact Assessment and the action plan lies with the service completing the Impact Assessment.

<table>
<thead>
<tr>
<th><strong>Date of the next review of the Impact Assessment?</strong></th>
<th><strong>First initial EIA was completed in December 2013 and reviewed in March 2014.</strong></th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>It should be reviewed at least every three years to meet legislative requirements</strong></td>
<td><strong>The next review will take place at the end of April and then monthly as service proposals are developed.</strong></td>
</tr>
<tr>
<td><strong>How often will the EIA action plan be reviewed?</strong></td>
<td><strong>Monthly throughout the period of service developments</strong></td>
</tr>
<tr>
<td><em>E.g. Quarterly as part of MAF</em></td>
<td></td>
</tr>
<tr>
<td><strong>Who will carry out this review?</strong></td>
<td>Philippa Cross</td>
</tr>
</tbody>
</table>
Signature of Equality Impact Assessment lead officer:

Date Completed: 31st March 2014

Signature of Head of Service / Directorate Lead:

Date Completed: 31st March 2014
This signature signifies the acceptance of the responsibility and ownership of the EIA and the resulting action plan (if applicable).

Signature of Head of Policy and Performance, Blackburn with Darwen Borough Council:

Date received: 2nd April 2014
This signature signifies the acceptance of the responsibility to publish the completed EIA as per the requirements of the Equality Act 2010.