Predictive: assessing and analysing proposed changes to services, policies and budgets

Enfield Council

Predictive Equality Impact Assessment (EQIA) - Equality Analysis

HEALTH AND SAFETY
TEAMS MERGER
NOVEMBER 2013
13. Predictive equality impact assessment/equality analysis template

Please complete this cover sheet

<table>
<thead>
<tr>
<th>Proposed change to service/policy/budget</th>
<th>Health and Safety Services-Merging Enfield Council and Enfield Homes teams</th>
</tr>
</thead>
<tbody>
<tr>
<td>Officer completing the assessment</td>
<td>John Griffiths</td>
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<tr>
<td>Extension Number</td>
<td>3696</td>
</tr>
<tr>
<td>Service</td>
<td>Corporate Health and Safety</td>
</tr>
<tr>
<td>Department</td>
<td>Environment</td>
</tr>
<tr>
<td>Date impact assessment completed</td>
<td>28th October 2013</td>
</tr>
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</table>
Section 1 – About the service, policy or budget, and proposed change

Q1. Please provide a brief description of the service/policy/budget.

The safety management system employed by the Council is not used by Enfield Homes; however, the Council’s health and safety and asbestos teams are used piecemeal on a few specified areas, e.g. audits, through a service level agreement. Asbestos management systems and drawings used by the Council are not always compatible with systems that Enfield Homes may choose to use. The autonomy means that evaluations on processes is ignored or not known about and established best practice can be lost. Despite autonomy, Enfield Homes require support from the Council’s asbestos team at all levels on a more or less daily basis but asbestos management systems and drawings used are not always compatible, which creates duplication.

The current separation of health and safety and asbestos management does not enable economies of scale, joined up thinking, or synergies. It is not possible to ensure that Enfield Homes is working to the same standards as the rest of the Council. Moreover, it increasingly creates; incompatibilities, duplication, non-effective use of resource, and fragmented health and safety management.

This report recommends that the creation of a single team to overcome these problems enabling equitable sound risk-based management and judicious allocation of resource across the whole organisation. Reduced costs would arise once duplication of processes and systems are designed out. A restructure report will identify all parts of a new service.
Q2. Please provide a brief description of the proposed change(s) to the service/policy/budget

There are considerable benefits to be gained from a single service and these gains are across the board with the potential for cost savings as well as service improvement. The risks arising from the Council having responsibility but no day-to-day management over health and safety issues for Enfield Homes would also be resolved.

Full use and integration of the Council’s health and safety and asbestos teams offers considerable advantages to the existing safety management of Enfield Homes. These two corporate teams provide a safety management system that is in line with Health and Safety Executive (HSE) guidance HS (G) 65 and that is also United Kingdom Accreditation Service (UKAS) accredited with regard to asbestos management. High standards have demonstrably been attained and externally measured through recognised awards, accreditation and measured against external audit.

Shared working under a single management structure will:

- Enable like for like standards and joined up thinking.
- Resolve incompatibility issues.
- Provide a single asbestos management system in line with corporate standards
- Ensure a broad range of skill sets are readily available.
- Enable clear and direct management of health and safety rather than just the current general oversight.
- Enable risk based management of resource.
- Ensure effective allocation of resource.
- Provide a holistic safety management system that reduces risk across the whole organisation.
- Facilitate an open culture and joined up working.
- Ensure suitable and sufficient competent advice and support is equitably available across the whole of the organisation (Council and Enfield Homes)
- Cost savings from reduced level of consultants on specialised areas such as Fire Safety Management.
- Enable the whole organisation to work together on a single safety plan and strategy.
- Provide standard documentation, policies and processes.
- Improve functionality and use of the Asbestos Management System (AMS) asbestos database will assist in removing duplication of data and effort, improve electronic management of information. This work is currently progressing and the Council’s Corporate Information Technology (CIT) Team will assist.

Q3. Does equalities monitoring of your service show that the beneficiaries in terms of the recipients of the service, policy or budget, and the proposed change, include people from the following groups?

R The Council’s occupational health and safety service is available to all staff. It is not a service that targets anyone, it a service to encourage safe and healthy working environment, and as such, it is a universal service that combats discrimination against, and promotes equality of opportunity for, any member of staff needing assistance. The service is also freely available to all staff, many of whom live in the borough and thus supports the community.

It is the stated intention addressed by successive leaders of the Council, the Chief Executive and Directors to engage with all staff. All staff attends the ‘Annual Forum’ (over 7 days) to encourage staff to meet Councillors and Directors enabling grass root input including health, safety and wellbeing. Similar events held as part of induction for new staff are compulsory and provide opportunities to raise individual concerns. Issues raised around health and safety can affect not only staff but the community as well e.g. the safety of special needs clients throughout the borough, all pupils and users of our services in our community.

Biennial staff Performance Assessment Reviews set targets for individuals, including compulsory Health and Safety objectives e.g. specific tasks, training
modules etc. Monthly one to one staff management meetings are more informal but present an opportunity for input on health and safety - again this in turn affects all those affected by our undertaking.

Compulsory targets for H&S Computer Based Training (CBT) modules are set and there is a raft of these modules for all staff to assist in communication and involvement of H&S. Union Safety representatives input to all Health and Safety Committee meetings and have direct access to senior management and management meetings. Unions also represent other employees and concerned parties, e.g. Council tenants, charities etc. - their input ensures all communities have an input.

Focus groups facilitated by safety advisers engage relevant staff on special initiatives e.g. the Violence and Aggression Working Group and First Aid Forum. These provide frameworks for dealing with and supporting all in the community.

The consultation process also includes union input to policy, guidance, risk assessment and developing safe systems of work e.g. engaging in implementation of policies on Pupil Risk Assessment (particularly relevant to any pupil with special needs, behavioural issues, permanent or temporary problems of any kind, or the Smoking Policy that affects all users of our buildings, etc.

Employees are engaged in workplace health and safety performance monitoring, with inclusions in workplace inspections, risk assessments, and also fire marshals feedback meetings. These activities help ensure all Council properties used or accessed by any in our community are safe and usable facilities and comply with Disability Discrimination Act requirements for those with access or mobility issues.

The annual health fair is part of the strategy on health and wellbeing and has previously had 3,433 visits where checks for cholesterol, blood sugar, and health advice are provided. Quit smoking campaigns, exercise and cycle to work schemes are all supported. Many of our staff and families are members of our community and thus this broadly supports families throughout the borough.

The Council recruits from a diverse ethnic and cultural population. This can present the British Safety Council international standards with challenges e.g., first aid/defibrillation led to concerns about male staff attending female casualties, more so on some ethnicity concerns. The solution was consultation with stakeholders and unions resulting in appointing female first aiders. Whenever new initiatives or policies are brought in or existing ones modified, the consideration of a diverse ethnic and cultural population together with special needs has to be woven in.

The benefits are clearly ensuring low accident rates and ill health is reduced for any who work live or play in the borough and it is our aim to continue to do so. The high standards achieved are reflected in the demonstrable external audits in achieving British Safety Council 5 Star Award, Sword of Honour award, Royal Society for the Prevention of Accidents (ROSPA) Gold Award and the British Standard BS OHSAS 18001:2007 accreditation.

D Ditto

The service also provides processes to enable those who may require help to access and work in the workplace safely with Occupational Health Service, Return to Work and Individual Needs policies and Pupil Risk Assessment processes.

G Ditto

A Ditto

F Ditto

S Ditto

T Ditto
M Ditto

P In addition to the above, the service provides Risk Assessment and Occupational Health support in particular to this group.

Q4. If you answered 'no' to any of the groups listed in Q3, please state why?

N/A

Q5. How will the proposed change eliminate discrimination, promote equality of opportunity, or promote good relations between groups in the community?

The synergy from the combination of the Corporate and existing Enfield Homes teams would enable seamless provision of service in supporting the existing responsibilities of both. Clarity and one team working will help to ensure better management when dealing with fire protection, asbestos, contractors, safety auditing etc. The benefits will apply to all affected by the Council's undertaking including in particular the workforce and residents of Enfield Homes. As this is a universal non-discriminatory service prescribed by legislation for all it will assist in ensuring all of the above. Simply put, the better the service we can provide then the better for all groups.

The benefits of this improved service will ensure that those residents from more deprived or disadvantaged backgrounds or areas are served for purposes of health and safety, to the standards required from that discipline that relate to levels of risk. This means the health and safety of any group or individual is resourced and brought up to (and sometimes exceeded) standards solely on the criteria relating to risk and not any other. Any improvement in the service improves risk reduction across the board be that from fire, asbestos or anything else.

Section 2 – Consultation and communication

Q6. Please list any recent consultation activity with disadvantaged groups carried out in relation to this proposal

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<td>None at this moment as this is work in progress</td>
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<td>M</td>
<td>None at this moment as this is work in progress</td>
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Q7. Please state how you have publicised the results of these consultation exercises, and what action you have taken in response

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<tr>
<td>D</td>
<td>Ditto</td>
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Section 3 – Assessment of impact

Q8. Please describe any other relevant research undertaken to determine any possible impact of the proposed change.

Merging Enfield Council and Enfield Homes health and safety report has looked into this and describes the improvements to be gained.

Q9. Please list any other evidence you have that the proposed change may have an adverse impact on different disadvantaged groups in the community.

R  There is no evidence that this would have an adverse effect or disadvantage any group.
D  There is no evidence that this would have an adverse effect or disadvantage any group.
G  There is no evidence that this would have an adverse effect or disadvantage any group.
A  There is no evidence that this would have an adverse effect or disadvantage any group.
F  There is no evidence that this would have an adverse effect or disadvantage any group.
S  There is no evidence that this would have an adverse effect or disadvantage any group.
T  There is no evidence that this would have an adverse effect or disadvantage any group.
M  There is no evidence that this would have an adverse effect or disadvantage any group.
P  There is no evidence that this would have an adverse effect or disadvantage any group.

Q10. Could the proposal discriminate, directly or indirectly, and if so, is it justifiable under legislation? Please refer to the guidance notes under the heading 7. Useful Definitions.

No, due to the type of statutory services we provide and the relevance to our service. However, we do carry out surveys for our customer groups and the feedback is analysed. Legislation requires occupational health and safety and wellbeing to be provided for all, this includes not only employees but all those affected by the Council’s undertaking. Any failings in our duty of care to anyone whatsoever would in itself be a criminal offence as well as potentially giving rise to civil action. Hence, the service is completely holistic in the view it takes to all.

Q11. Could the proposal have an adverse impact on relations between different groups? If so, please describe.
No once again, due to the type of statutory services we provide and the relevance to our service. However, we do carry out surveys for our customer groups and the feedback is analysed.

Legislation requires occupational health and safety and wellbeing to be provided for all, this includes not only employees but all those affected by the Council’s undertaking. Any failings in our duty of care to anyone whatsoever would in itself be a criminal offence as well as potentially giving rise to civil action. Hence, the service is completely holistic in the view it takes to all.

Q12. How could this proposal affect access to your service by different groups in the community?

R There is no evidence that this would have an adverse effect or disadvantage any group.
D There is no evidence that this would have an adverse effect or disadvantage any group.
G There is no evidence that this would have an adverse effect or disadvantage any group.
A There is no evidence that this would have an adverse effect or disadvantage any group.
F There is no evidence that this would have an adverse effect or disadvantage any group.
S There is no evidence that this would have an adverse effect or disadvantage any group.
T There is no evidence that this would have an adverse effect or disadvantage any group.
M There is no evidence that this would have an adverse effect or disadvantage any group.
P There is no evidence that this would have an adverse effect or disadvantage any group.

Q13. How could this proposal affect access to information about your service by different groups in the community?

R It would not affect access to information; access is freely available on Enfield Eye on the health and safety web page.
D It would not affect access to information; access is freely available on Enfield Eye on the health and safety web page.
G It would not affect access to information; access is freely available on Enfield Eye on the health and safety web page.
A It would not affect access to information; access is freely available on Enfield Eye on the health and safety web page.
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P It would not affect access to information; access is freely available on Enfield Eye on the health and safety web page.

Section 4 – Tackling socio-economic inequality

Q14. Will the proposal in any way specifically impact on communities disadvantaged through the following socio-economic factors? Please explain below. If it does not, please state how you intend to remedy this (if applicable to your service), and include it in the action plan.

Communities living in deprived wards/areas
The synergy from the combination of the Corporate and existing Enfield Homes teams would enable seamless provision of service in supporting the existing responsibilities of both. Clarity and one team working will help to ensure better management when dealing with fire protection, asbestos, contractors, safety auditing etc. The benefits will apply to all affected by the Councils undertaking including in particular the workforce and residents of Enfield Homes. As this is a universal non-discriminatory service prescribed by legislation for all it will assist in assuring all of the above. Simply put, the better the service we can provide then the better for all groups.

The benefits of this improved service will ensure that those residents from more deprived or disadvantaged backgrounds or areas are served for purposes of health and safety, to the standards required from that discipline that relate to levels of risk. This means the health and safety of any group or individual is resourced and brought up to (and sometimes exceeded) standard solely on the criteria of risk. Those in deprived areas will be provided with a service based on their need. Any improvement in the service improves risk reduction across the board be that from fire, asbestos or anything else.

### People not in employment, education or training
As above

### People with low academic qualifications
As above

### People living in social housing
As above

### Lone parents
As above

### People on low incomes
As above

### People in poor health
As above

### Any other socio-economic factor
As above

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### Section 5 – Impact on staff

**Q15. How have you consulted, or otherwise engaged with, all relevant staff about this proposal (including any staff on sickness or maternity leave)?**

We will carry out staff surveys and customer satisfaction surveys.

Also staff will be consulted in a number of other ways, these include:
- Service staff meetings
- Team meetings
- Corporate briefings
- Team briefs
- Staff 1:1’s with line managers
- Performance Annual Reviews (PAR) Interviews and reviews
- Input to Corporate and Departmental Health and Safety meetings.
- Consultation with the unions

**Q16 If your proposal involves a staff restructuring, how have you discussed this with relevant trade unions?**

No, not at this stage merging LBE and Enfield Homes still in working progress.
Q17. Does job matching of existing staff against the new proposed staff structure, following any assimilation process, indicate that any particular groups of staff are adversely affected more than others?

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<tr>
<th></th>
<th>A detailed resource review will be required of staff numbers in relevant areas.</th>
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<td>DITTO</td>
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<td>P</td>
<td>DITTO</td>
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Q18. Are there any proposed changes to working hours, work locations or duties likely to have a negative impact on particular groups of staff?

<table>
<thead>
<tr>
<th></th>
<th>There are no changes which will negatively impact any group.</th>
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<td>P</td>
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Section 6 - Miscellaneous

Q19. Is your proposal likely to have an impact on services provided by another Council department or service? If so, have you discussed the possible impact with them?

Not at this time. The expectation is that the created synergies will facilitate an improved service to all services and service users.

Q20. Do you plan to publicise the results of this assessment? Please describe how you plan to do this

Publicise results of assessment will be of a restricted circulation.

Q21. How and when will you monitor and review the effects of this proposal?
We will carry out staff surveys and customer satisfaction surveys.

Also staff will be consulted in a number of other ways, these include:

- Service staff meetings
- Team meetings
- Corporate briefings
- Team briefs
- Staff 1:1’s with line managers
- Performance Annual Reviews (PAR) Interviews and reviews
- Input to Corporate and Departmental Health and Safety meetings
- Consultation with the unions
14. Action plan template for proposed changes to service, policy or budget

Proposed change to, or new, service, policy or budget...Health and Safety Services – Merging Enfield Council and Enfield Homes

Team: Corporate Health and Safety... Department: Environment

Service manager: John Griffiths

<table>
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<th>Timescale</th>
<th>Costs</th>
<th>Comments</th>
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<tbody>
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<td>John Griffiths</td>
<td>TBA</td>
<td>No costs</td>
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<tr>
<td>Individual needs</td>
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<td>TBA</td>
<td>No costs</td>
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<td>TBA</td>
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<td>Review report on merging LBE and Enfield Homes health and safety teams</td>
<td>John Griffiths</td>
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Please insert additional rows if needed

APPROVAL BY THE RELEVANT ASSISTANT DIRECTOR - NAME: [Signature]