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# Your Neighbourhood

Consultation on changes to local services



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## Equalities Impact Assessments





This document has been designed to support the completion of the Your Neighbourhood consultation on changes to local services.

Please pick up a survey information booklet and questions booklet to give us your feedback. Or you can complete the survey online at [www.bristol.gov.uk/yourneighbourhood](http://www.bristol.gov.uk/yourneighbourhood)

You can request alternative formats of this document by contacting the consultation team on [consultation@bristol.gov.uk](mailto:consultation@bristol.gov.uk) or by calling **0117 922 2848**.

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# Bristol Community Links

The Equalities Impact Assessment is a living document which is regularly updated and full equalities information will be used to design and develop the proposals for decision.

## 1.1 What is the current situation?

Since 2012 Bristol City Council has provided full day services for adults with learning difficulties and/or severe physical impairment and adults with dementia via three Community Links Centres, based in North, South and Central. These Centres provide buildings-based facilities for people with complex and high level personal care needs. The Centres are a base for people to access community services and activities, but also provide appropriate space for people who need a safe, quiet environment. Whilst recognising the need for safe space, the Centres also look to bring in activities and interests from outside, developing a community resource that is publicly accessible. In addition to the Centres, there are three drop in centres providing low level support to people who are more able to access the community by themselves but who benefit from advice, support and friendship.

Current budgets for each Centre and drop in, including all services, are as follows:

|                     | North Link | South Link | Central Link |
|---------------------|------------|------------|--------------|
| Annual Budget       | £1,135,230 | £976,650   | £541,170     |
| No of service users | 55         | 50         | 30           |

|                     | North Drop In | South Drop In | Central Drop In |
|---------------------|---------------|---------------|-----------------|
| Annual Budget       | 124,700       | £117,720      | £111,240        |
| No of service users | 37            | 60            | 36              |

## 1.2 What is the Proposal?

The proposal is to explore opportunities to change the way that we provide day services to vulnerable adults and as a result reduce the core service budget by £1.239m over the next three years. There is also a requirement to bring in an additional £100k in income.

There are a wide range of possibilities for how the service can be developed to release these savings, including changes to staffing, delivery models, location of services and operations (e.g. transport), income generation, as well as how the service aligns with other council services and community activities. The planned approach is as follows:

### Step 1: Year 1 savings through service redesign

Bristol Community Links have now been operational for five years, meaning that there is a clearer understanding of demand for the service. Therefore it has been possible to redesign the staffing model for the service, which will result in staffing efficiencies as a result of changing working patterns. By making adjustments to the use of casual staff and managing vacancies that have arisen, these changes can be made without impacting on current users, carers or staff.

## **Step 2: Co-design a new service model with key stakeholders and carry out a comprehensive consultation on the proposed changes**

In early 2017, a period of co-design was completed with; service users, carers, staff and partners to review the Community Links service to identify what people value about the service and what could be improved, to better exploit possibilities and increase efficiency. The co-design exercise explored all new ideas for delivering the service in a different way, including looking at opportunities for working closely with other services and community partners.

Following this, a detailed public consultation on a preferred option is taking place in June 2017.

Following the co-design period, a full options appraisal has been carried out which has resulted in the following proposals (Other options which were ruled out as not viable are described in the survey). We are proposing changes to the drop-in centres, the Community Links Centres and the minibus transport service.

### **1. Drop-in service**

- We propose that we maintain the drop-in service. This is because people have explained how important it is to have help close to home so that they can access support when they need it.
- We will look at ways we could develop the service so it is available in other parts of the city and supports other resident needs; for example people with a sensory impairment or physical disabilities. We will explore partnerships with other organisations such as health services or other providers of social care services, so drop-in services can be available to more people.

### **2. Bristol Community Links Centres**

We propose that services currently provided from the Community Links Centres are split into two separate parts:

1. Independent Living. This service will work with people with a range of disabilities - for example, learning disabilities, autism, sensory impairment – helping them to live more independently by accessing things like training, employment, accommodation and other useful skills. It will also help people become more involved in their community. This approach is designed to reduce the need for people to use ongoing packages of support from adult care services.

When people have developed their skills enough to not need the Independent Living service, the drop-in service will still be available to people as and when they need it.

2. A Centre of Excellence for Dementia. This will be a day centre for people with mild and moderate dementia. Our aim is to create a centre of excellence for the whole city that brings together council, health and dementia provider services plus support for carers and families. As this service develops it is likely this will include a main centre as a base plus outreach services across the whole city.

We now need to develop the detail of how we can best deliver these two services, including where they are located and how the council and other providers can work together.

The council will no longer act as a provider for individuals with more complex learning disabilities. Our research shows there is a good range of other providers offering this care at a high quality standard across the city. This means we can help individuals and their families move to a new provider within a suitable timeframe and be confident they will receive an equivalent level of care based on their specific needs.

We will work with all existing users of Bristol Community Links services on an individual basis to ensure that their eligible needs continue to be met, in line with the Care Act and the Corporate Strategy. This may be within the newly designed service, or with other services in the city, as appropriate to the individual.

We will also work with partners to develop the new service, and will explore new opportunities. These might include looking at ways we can generate income from the existing buildings, as well as how we might open these new services to self-funders and people in receipt of a personal budget.

As a result of feedback to these proposals we may need to change the buildings that we operate from and may no longer require all of our current Bristol Community Links buildings.

We recognise these buildings are valuable assets to local communities and to people with disabilities citywide. So we will explore ways other organisations might be able to use them. We will also look at other opportunities to provide our services from other locations so we can best meet peoples' needs.

### 3. Transport

Current minibus transport to centres is very costly and uses funds that could be used to provide more services at the centres. So we are proposing to:

- Assess people's needs on an individual basis through their Adult Social Care review before any potential changes are made.
- Work with individuals to see if they can use support closer to home so their travelling time is reduced.
- Stop universal transport to our centres. Instead will we look at how people can arrange their own transport. For example where people receive the mobility component of benefit we will consider, in consultation with them, whether they can arrange their own transport to services or may be able to use public transport if appropriate.
- Where people do require support to access services, we will work with them to find suitable travel solutions.

PLEASE NOTE: Any proposed changes to current transport arrangements will be done on an individual basis as part of a person's Adult Social Care review.

## Step 2: What information do we have?

Decisions must be evidence-based, and involve people with protected characteristics that could be affected. Please use this section to demonstrate understanding of who could be affected by the proposal.

### 2.1 What data or evidence is there which tells us who is, or could be affected?

Service Users:

We have reports from the Adult Care Management system which details for all service users of the Links Centres as follows:

|                       | BCLC   | BCLC | BCLN   | BCLN | BCLS   | BCLS |
|-----------------------|--------|------|--------|------|--------|------|
|                       | Number | %    | Number | %    | Number | %    |
| Gender                |        |      |        |      |        |      |
| Female                | 11     | 34%  | 29     | 52%  | 28     | 50%  |
| Male                  | 21     | 66%  | 27     | 48%  | 27     | 48%  |
| Ethnicity             |        |      |        |      |        |      |
| Asian/British Asian   | 2      | 6%   | 6      | 11%  | 1      | 2%   |
| Black/Black British   | 9      | 28%  | 7      | 13%  | 1      | 2%   |
| White/White British   | 21     | 66%  | 43     | 77%  | 52     | 93%  |
| Other                 | 0      | 0%   | 0      | 0%   | 1      | 2%   |
| Other                 | 0      | 0%   | 0      | 0%   | 1      | 2%   |
| Religion              |        |      |        |      |        |      |
| Christian             | 0      | 0%   | 14     | 25%  | 0      | 0%   |
| Muslim                | 1      | 3%   | 6      | 11%  | 0      | 0%   |
| Other                 | 1      | 3%   | 0      | 0%   | 0      | 0%   |
| No Religion           | 0      | 0%   | 3      | 5%   | 0      | 0%   |
| Unknown               | 30     | 94%  | 33     | 59%  | 56     | 100% |
| Disability            |        |      |        |      |        |      |
| Learning Difficulties | 23     | 72%  | 38     | 68%  | 17     | 30%  |
| Physical Disabilities | 2      | 6%   | 29     | 52%  | 12     | 21%  |
| People with Dementia  | 7      | 22%  | 9      | 16%  | 26     | 46%  |
| Sexual Orientation    |        |      |        |      |        |      |
| Unknown               | 32     | 100% | 56     | 100% | 16     | 29%  |
| Heterosexual          | 0      | 0%   | 0      | 0%   | 39     | 70%  |
| Gay                   | 0      | 0%   | 0      | 0%   | 0      | 0%   |
| Transgender           | 0      | 0%   | 0      | 0%   | 0      | 0%   |

For the adult drop ins, the demographic is as follows:

|                           | Central<br>Number | Central<br>% | North<br>Number | North<br>% | South<br>Number       | South<br>% |
|---------------------------|-------------------|--------------|-----------------|------------|-----------------------|------------|
| <b>Gender</b>             |                   |              |                 |            |                       |            |
| -Female                   | 17                | 47%          | 12              | 39%        | 14                    | 33%        |
| -Male                     | 19                | 53%          | 19              | 61%        | 29                    | 67%        |
| -Transgender              | 0                 | 0%           | 0               | 0%         | 0                     | 0%         |
| <b>Ethnicity</b>          |                   |              |                 |            |                       |            |
| -Asian / British Asian    | 2                 | 6%           | 0               | 0%         | 1                     | 2%         |
| -Black / Black British    | 3                 | 8%           | 0               | 0%         | 2                     | 4%         |
| -White / White British    | 26                | 71%          | 19              | 95%        | 39                    | 92%        |
| -Chinese                  | 2                 | 6%           | 0               | 0%         | 0                     | 0%         |
| -White Muslim             | 2                 | 6%           | 0               | 0%         | 0                     | 0%         |
| -Other                    | 1                 | 3%           | 1               | 5%         | 1                     | 2%         |
| <b>Religion</b>           |                   |              |                 |            |                       |            |
| -Christian inc Catholic   | 7                 | 19%          | 9               | 29%        | 2                     | 4%         |
| -Muslim                   | 3                 | 8%           | 0               | 0%         | 0                     | 0%         |
| -Rastafarian              | 1                 | 3%           | 0               | 0%         | 0                     | 0%         |
| -Sikh                     | 1                 | 3%           | 0               | 0%         | 0                     | 0%         |
| -Other                    | 0                 | 0%           | 0               | 0%         | 0                     | 0%         |
| -No Religion              | 0                 | 0%           | 0               | 0%         | 0                     | 0%         |
| -Unknown                  | 24                | 67%          | 22              | 71%        | 41                    | 96%        |
| <b>Disability</b>         |                   |              |                 |            |                       |            |
| -Learning Difficulties    | 36                | 100%         | 31              | 100%       | 43                    | 100%       |
| -Physical Difficulties    | 8                 | 22%          | 0               | 0%         |                       |            |
| -Sensory Impairment       | 3                 | 8%           | 0               | 0%         | [11 – included in 43] |            |
| -People with Dementia     | [2]               | 6%           | 0               | 0%         |                       |            |
| -Mental Health            | 27                | 75%          | 0               | 0%         | [2 – included in 43]  |            |
| -Substance Dependency     | 1                 | 3%           | 0               | 0%         |                       |            |
| -Autistic Spectrum        | 4                 | 11%          | 0               | 0%         | [1 – included in 43]  |            |
| <b>Sexual Orientation</b> |                   |              |                 |            |                       |            |
| -Heterosexual             | 10                | 28%          | 30              | 97%        | 32                    | 75%        |
| -LGBT                     | 4                 | 11%          | 1               | 3%         | 10                    | 23%        |
| -Unknown                  | 22                | 61%          | 0               | 0%         | 1                     | 2%         |

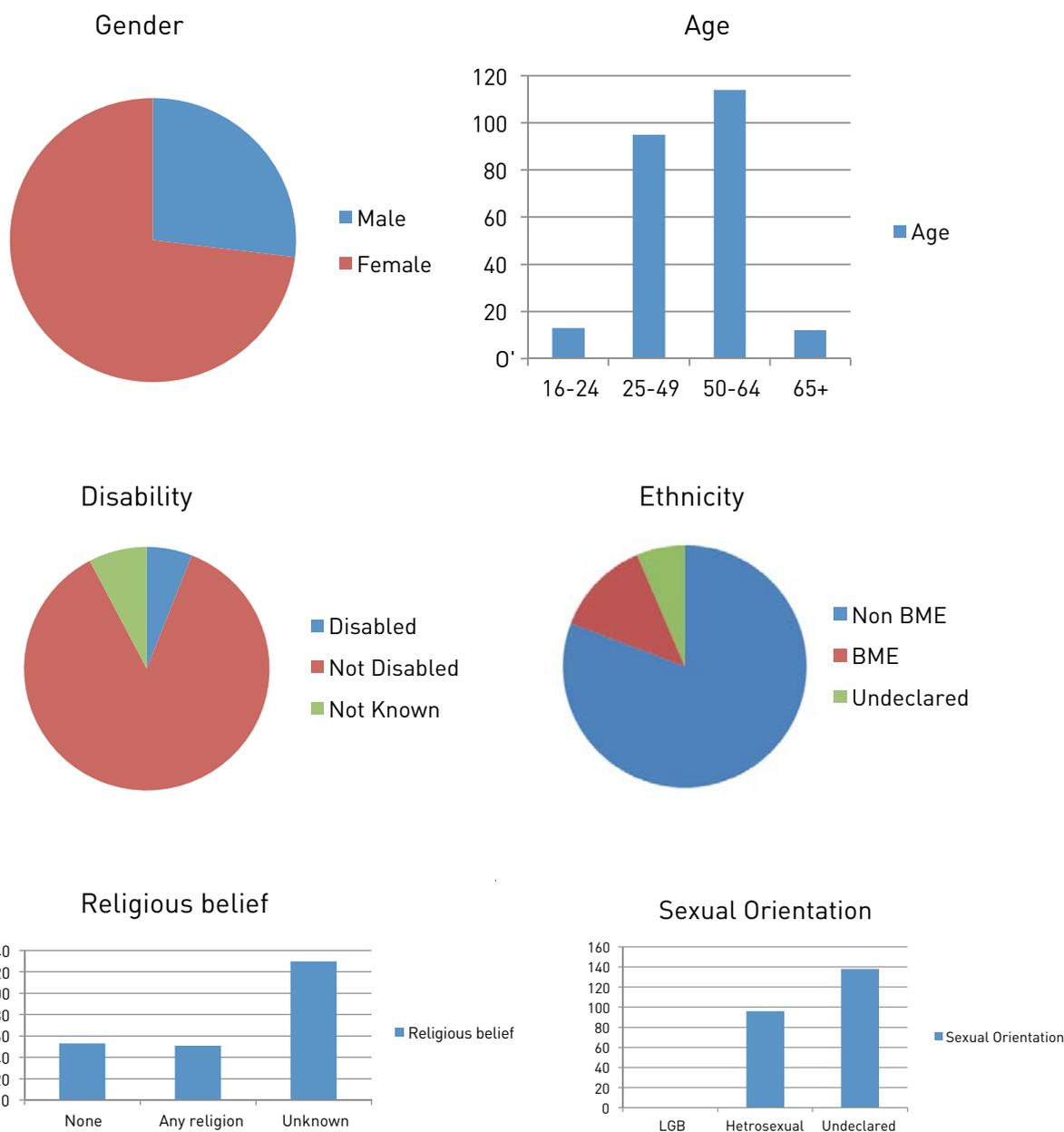
**Staff:**

The Year 1 savings that will be made during 2017/18 from staffing budgets will not result in any redundancies within the service at the current time. However, the future proposals that are being consulted on are likely to result in a reduction in the number of council staff required to deliver the service.

Depending on the outcome of the consultation, the further consideration of this impact will take place as part of the next stage of service planning. A full Managing Change exercise for staff will be completed following the public consultation and decision on the future service.

Data analysis has been completed on the wider staff group in 'Transitional Change' which includes Concorde Lodge, Bristol Community Links, Adults Residential, Adult Drops and Redfield Lodge.

**Total Number – 234**



## 2.2 Who is missing? Are there any gaps in the data?

The data is reliant on practitioners entering it. However the only area with significant gaps is around 'religion', and sexual orientation although the figures do show that there are not details recorded in all areas for all service users.

## 2.3 How have we involved, or will we involve, communities and groups that could be affected?

As highlighted in Section 1.2, we have already completed a co-design exercise with service users, carers, staff and community partners. We have developed a detailed consultation plan, with full stakeholder analysis, for how we will engage all these groups during the public consultation.

Staff were included in the co-design exercise and will be included in the detailed consultation, and a full Management of Change will take place. There will also be consultation with Unions.

## Step 3: Who might the proposal impact?

*Analysis of impacts on people with protected characteristics must be rigorous. Please demonstrate your analysis of any impacts in this section, referring to all of the equalities groups as defined in the Equality Act 2010.*

### 3.1 Does the proposal have any potentially adverse impacts on people with protected characteristics?

Due to the scale of the budget reduction proposed, it is likely that there could be some adverse impacts on people with protected characteristics as a result of potential changes to the way that the service will be delivered.

Bristol Community Links are predominantly used by people with a learning disability and older people with dementia, so this means that both these groups could be impacted in some way. The proposals that are included in the consultation may have a short-term impact on service users with complex learning disabilities, as the proposal is for the council to stop providing the care directly and to instead use other providers offering this care at a high quality standard across the city. Individuals may experience some changes to their care during this transition.

The other proposal that may impact on some service users is the proposed changes to transport. As the council is proposing to no longer automatically provide transport for all service users, some individuals will have to go through a review process or will experience a change to their current journeys (e.g. changes to who provides transport, the vehicle or the timings).

In addition, any proposed changes to Bristol Community Links Central could particularly impact those who identify as black / black British, as they make up a higher than average (8%) proportion of the service users. Similarly, there is a significant proportion of Muslim service users at Bristol Community Links North. These specific groups should be considered when considering potential options for the future service.

### 3.2 Can these impacts be mitigated or justified? If so, how?

The co-design exercise was designed to ensure that any impact on service users and carers of future proposals was well understood and could be mitigated where possible. The public consultation will similarly be critical to understanding whether individuals and their families are likely to be adversely impacted by the proposed changes to the service – which is why the consultation plan includes detailed engagement with service users, carers, staff, care providers and partners.

Whilst it is recognised that there may be some adverse impacts of the proposed changes (as set out above in section 3.1), this impact should primarily be short-term related to the process of transitioning in to a new service model. All proposed changes have been designed to ensure that service users receive equivalent or enhanced levels of care once the new service model is embedded.



### **3.3 Does the proposal create any benefits for people with protected characteristics?**

Whilst the full details of the proposals are not known at this stage, there will be some design principles that underpin the new service design, ensuring we target support at the right level at the right time for peoples' needs. In addition, the proposed focus on drop ins, dementia care and independent living is intended to enhance service delivery in these areas. For example, the new dementia care centre plans to be more integrated with community partners providing dementia care, to provide a better overall service to individuals.

### **3.4 Can they be maximised? If so, how?**

Further detailed work will be carried out during consultation discussions with key stakeholders and following the consultation period to establish how these benefits can be maximised.

## **Step 4: What next?**

*The Equality Impact Assessment must be able to influence the proposal and decision. This section asks how your understanding of impacts on people with protected characteristics has influenced your proposal, and how the findings of your Equality Impact Assessment can be measured going forward.*

### **4.1 How has the equality impact assessment informed or changed the proposal?**

As the groups that use the Links automatically fall into a protected characteristic of some description, the whole proposal will be informed by the needs of service users. The same issues and concerns an Equality Impact Assessment is designed to address are the ones the proposal addresses in the first place.

### **4.2 What actions have been identified going forward?**

There will be continued engagement with all service users, carers, partners and staff during the 12 week consultation period.

### **4.3 How will the impact of your proposal and actions be measured moving forward?**

A combination of the following approached will be used:

- Individual service user reviews
- Stress risk assessments
- Staff consultation and feedback sessions
- Monitoring of staff turnover and retention levels
- Ongoing dialogue with partners / providers
- Exit interviews

# Libraries

The Equalities Impact Assessment is a living document which is regularly updated and full equalities information will be used to design and develop the proposals for decision.

## **Step 1: What is the proposal?**

The joint council consultation to launch on 13 June 2017 includes a consultation on the future provision of libraries for the city of Bristol.

Full Council has decided to save £1.4m from the library service budget. The proposed savings are spread over three years starting in April 2017 to March 2020. The budget is profiled at saving £300K, then £740K, then £360K. Our total current budget is £4.6m.

As a result we are proposing to reduce the number of council-run libraries, while meeting our statutory duty to ensure Bristol has a “comprehensive and efficient” library service.

We propose to run a reduced number of libraries that are spread geographically around the city.

The Central Library will still be the main library. It will have seven-day opening over 54 hours a week. As well as the Central Library, there will be two types of branch libraries – Area libraries and Local libraries. The Area and Local libraries will be spread across three geographical areas (North West, East and South) which together cover the city.

We have developed three different options for library service provision in the future. Each option contains 10 libraries. Each option has different weighting applied. Citizens can only choose one option.

We are also asking for feedback and suggestions of any alternative options

## Step 2: What information do we have?

### 2.1

The Library service is a universal service and available to all; therefore everyone in every neighbourhood could be affected by the proposals. It is important for us to use comprehensive data about the protected characteristics of the whole population when considering and designing the future service.

The population of Bristol is estimated to be 449,300.

We hold comprehensive information from the Neighbourhood Partnership Statistical Profiles about the age, gender, disability, race, and religion & belief of citizens living in each Neighbourhood Partnership area. This data comes from the 2011 Census. This data also informs the ward data, lower super output area and output areas which are even smaller.

There is also information available from the Joint Strategic Needs Assessment in draft form for 2016, and Deprivation in Bristol 2015.

We also have information from previous consultations (two citywide consultations in 2015), including specific consultations with children and young people who use the libraries, at specific library level and broken down by age, gender and ethnicity.

We have the information from 2015 Equalities Report from the specific equalities consultation in the last review.

We also have the results of the Citizens Panel in November 2016 discussing the impact and awareness of the new library opening hours, and the Citizens Panel results from 2015. The Citizens Panel is useful as an independent panel that replicates the diversity of Bristol and - for libraries - contains library members and non-library users.

Potentially all current library members and users and potential library users may be affected by any changes to the library service. We know that we have 66,707 active members - those who have used service at least once in the last year. Whilst the Library service offers equality monitoring surveys, this is not compulsory and offers only a snapshot of new members, who are not necessarily current members.

Therefore most accurate data on residents is from the 2011 Census.

### 2.2

Detailed library specific data is missing as the collecting of equality information is not compulsory and happens when new people join the library via the library membership form.

## 2.3 How have we involved, or will we involve, communities and groups that could be affected?

In the last review (finishing in September 2015) we held two wide ranging consultations with all the citizens of Bristol, with printed and online surveys and many public meetings. We also held specific equalities meetings with the support of Neighbourhoods. The information from this consultation is still very valuable, as the most successful consultation Bristol City Council has run.

The public consultation will launch in June 2017, and involve local communities and specific community groups as well as communities of interest across the city. As this will be a joint consultation we will participate as a service in any meetings or drop in sessions. We will be sharing the consultation through the equalities forums who will distribute through their networks.

We will also include staff of the library service in this consultation.

### Step 3: Who might the proposal impact?

#### 3.1 Does the proposal have any potentially adverse impacts on people with protected characteristics?

There will be significant citywide impact if the number of council run libraries is reduced. There may also be changes to the way that libraries are run, when they are open and levels of staffing and types of staffing.

This means that there are potentially adverse impacts for all citizens of Bristol, including people with protected characteristics. This may affect people in different ways. There may be cumulative impacts on citizens if other services are also changed.

Specifically the options in the consultation are :

#### Option 1

High = Community Need; Quite High = Building and Location; Low = Current Usage

- Central Library
- Area Libraries:
  - Henleaze
  - Junction 3
  - Bedminster
- Local Libraries:
  - Henbury
  - Southmead
  - Bishopston
  - Fishponds
  - Knowle
  - Hartcliffe

## Option 2

High = Community Need; Low = all other criteria

- Central Library
- Area Libraries:
  - Henbury
  - Junction 3
  - Bedminster
- Local Libraries:
  - Southmead
  - Sea Mills
  - Fishponds
  - St George
  - Filwood
  - Hartcliffe

## Option 3

All criteria equal

- Central Library
- Area Libraries:
  - Henleaze
  - Junction 3
  - Bedminster
- Local Libraries:
  - Henbury
  - Southmead
  - Fishponds
  - Bishopston
  - Stockwood
  - Hartcliffe

We are working on an analysis of each library area in relation to the census data and this will be completed during the early stages of the consultation, so we can map protected characteristics and any particular impact.

We anticipate a key issue will be transport or access to libraries at possibly a further distance than now. This may have a particular impact on protected characteristics e.g. disabled people.

### 3.2 Can these impacts be mitigated or justified? If so, how?

Creating a modern library service for the future which meets our ambition as a city but in the context of ongoing financial restrictions is extremely challenging and there will be impacts on all our citizens. We currently have 27 libraries. Many comparative core cities have fewer full service libraries than Bristol. We also acknowledge that the opening hours that were affected by a 25% reduction in April 2016, do not offer a full range of access to our citizens and need a comprehensive review. Maintaining the opening hours is a challenge with a stretched staff group over 27 sites.

We have considered mitigations of:

### **1. Options have been planned for a citywide service:**

We have carefully considered geographical access across the city and at least 97% of the city's population is served by all three options. We can see that most of the population have access to a library within two miles. Although this does not fully reduce the local impact on a community the proposals include a library within close distance that has full facilities.

### **2. Changes to the Central Library:**

The Central Library is proposed to open over seven days with Wednesday hours re-instated. We will look at the internal layout to rebalance seating and access to computers. We acknowledge that whilst transport in the city may still be an issue, the Central Library is accessible to whole city and holds the most stock and resources, is centrally located and on good transport routes, and is accessible with public facilities.

### **3. Digital and electronic resources**

We would also look at the digital resources we hold and what is available through our website direct to homes. Although the budget to buy materials and books will be reduced as the number of libraries is reduced, we will look at the balance of material available in libraries and available 24/7 on the website.

### **4. Extended access**

We plan, where possible within budget, to install extended access in local libraries. Extended Access is where we use technology to allow customers to use the library at certain times outside the staffed opening hours. This will increase the opening hours and extend the access to library facilities.

### **5. Accessible Buildings**

All the building contained in the options are compliant to the Equality Act and have better facilities to accommodate possible increased use in a network of fewer libraries. All current and potential accessibility needs have been considered in the criteria and the options include the best possible sites.

We will update the Equalities Impact Assessment to reflect the local and specific impact during the course of the consultation as citizens disclose any impacts.

### **3.3 Does the proposal create any benefits for people with protected characteristics?**

As the options are planned for a citywide service, there is provision across the city for all residents.

### **3.4 Can they be maximised? If so, how?**

Yes – the Central Library opening hours are being extended to seven day opening, with Wednesday service reinstated. The Area libraries opening hours are longer than the current hours. There is the potential for increased access to local libraries with Extended Access and working with community groups and volunteers to offer library services on days or times when library staff are not present.



## **Step 4: What next?**

### **4.1 How has the equality impact assessment informed or changed the proposal?**

The proposal is still subject to consultation for the service.

There is a free text box in the consultation where citizens can respond with alternative options for the service and also declare impacts that have not yet been identified.

### **4.2 What actions have been identified going forward?**

The Equalities Impact Assessment is a living document which is regularly updated and full equalities information will be used to design and develop the proposals for decision.

1. We will consider any alternative options put forward in the consultation including any alternative providers who may be able to build on the options proposed
2. We will consider community and voluntary organisations who have suggestions about alternative forms of access to library resources e.g. wider reach of Royal Voluntary Service At Home service.

### **4.3 How will the impact of your proposal and actions be measured moving forward?**

This will be assessed when the consultation results are known and this Equalities Impact Assessment will be updated.



# Public Toilet Provision

The Equalities Impact Assessment is a living document which is regularly updated and full equalities information will be used to design and develop the proposals for decision.

## Step 1: What is the proposal?

*Please explain your proposal in Plain English, avoiding acronyms and jargon. This section should explain how the proposal will impact service users, staff and/or the wider community.*

### 1.1 What is the proposal?

The current facilities consist of 16 public toilets and two urinals, open between 8am and 7pm six days per week (a few sites have seven day provision and the sites on the Downs close at 8pm during the summer months). The current toilets are getting older, are not spread equally across the city and in many cases do not provide quality, accessible toilet provision. We now have a budget saving target which reduces the available funding for public toilets to £30k a year.

We are consulting on 3 options:

1. Close all the public toilets listed, work with partners to identify and market existing toilets that are open to the public and invest the remaining £30k per annum in the development of a Business/Community Toilet Scheme. This would involve the council working alongside partners and business to open up as many publicly accessible toilets as possible to replace traditional stand-alone toilet provision. The aim would be, as a minimum, to double the amount of publicly available toilet sites and ensure that they are spread across the city. This scheme would to provide clean, safe, and accessible toilets in more convenient locations for residents and visitors to the city at a fraction of the price of current provision and help protect other services.
2. Close all the public toilets except one – location to be identified through the consultation.
3. Close all the public toilets and make a further £30k saving from the remaining budget.



## Step 2: What information do we have?

*Decisions must be evidence-based, and involve people with protected characteristics that could be affected. Please use this section to demonstrate understanding of who could be affected by the proposal.*

### 2.1 What data or evidence is there which tells us who is, or could be affected?

All members of the community within Bristol would have the need for a public toilet at some point, but the need is more prevalent amongst certain groups such as elderly and disabled people, children and those suffering with continence issues. Working with public health we have put together this assessment and evidence base for our considerations.

- Census
- Consultation responses
- SHINE health integration team. <http://www.bristolhealthpartners.org.uk/health-integration-teams/supporting-healthy-inclusive-neighbourhood-environments-hit/>
- Bladder and Bowel Foundation. <http://www.bladderandbowelfoundation.org/>
- Department for Communities and Local Government. Improving Public Access to Better Quality Toilets. A Strategic Guide, March 2008.
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## 2.2 Who is missing? Are there any gaps in the data?

We have put together a comprehensive view of who is likely to be affected by this change (see section 3.1). The available data around disability is not comprehensive. For example, we don't know how many disabled people there are in Bristol. The census does not count if you identify as a disabled person, it counts if you have a lifelong limiting illness and many disabled people do not consider they have a lifelong limiting illness. We also do not have data on the number of wheelchair users or wheelchair users with young children etc.

## 2.3 How have we involved, or will we involve, communities and groups that could be affected?

Public consultation and targeted focus groups.

## Step 3: Who might the proposal impact?

Analysis of impacts on people with protected characteristics must be rigorous. Please demonstrate your analysis of any impacts in this section, referring to all of the equalities groups as defined in the Equality Act 2010.

### 3.1 Does the proposal have any potentially adverse impacts on people with protected characteristics?

#### Gender:

Urinary incontinence affects more women than men. It is estimated that 34% of women aged over 19 are affected by urinary incontinence (NICE 2015) which equates to 60,000 Bristol residents.

Women who are pregnant or at the menopause need to use the toilet more often, as do those with other conditions such as diabetes. At any one time, about a quarter of all women of childbearing age will be menstruating and require access to toilets.

<https://www.ncbi.nlm.nih.gov/pmc/articles/PMC3120214/>

Carers of older people or children need toilets in accessible locations with facilities to accommodate the needs of those for whom they are caring as well as their own.

#### Gender reassignment:

Transgender people may be worried that they will be turned away due to people's perception about their gender.

#### Disability:

There are over 11 million people with a limiting long term illness, impairment or disability in Great Britain. These conditions often include problems with mobility or stamina and require access to adapted toilets.

Conditions such as irritable bowel syndrome, ulcerative colitis, and Crohn's disease cause many people to reduce their outdoor activities and stay at home because of concerns about toilet facilities.

People with incontinence can worry so much about needing the toilet, even on a quick trip to the local shops that they become virtually housebound (NHS Choices).

It is estimated that over 1 in 20 women aged between 15 and 44 years and up to 1 in 7 women aged between 45 and 64 suffer with bladder problems. Over 1 in 33 men of working age have bladder problems.

It is estimated that 1% of the adult population have bowel problems.

Faecal incontinence remains a greater taboo subject than urinary incontinence; it is quite prevalent, with an estimated 1–10% of adults living with this condition.

### **Mental Health & Social Exclusion:**

The wider knock-on effect of inadequate public toilet facilities is that by not being able to go out in their community, people could become inactive. This can impact on health and social care as, in the future, inactive individuals likely to become more immobile, isolated, ill and depressed leading to a possible need further treatment.

This has detrimental effects on people's mental health due to the isolation created by not leaving home - in order to avoid the need to find a toilet - could have a significant impact on individuals' mental health

### **Faith:**

The closure of public toilets in itself does not have a direct impact on those of faith, however if we went along the Business/Community toilet scheme, it would be important to ensure there is provision suitable for people of different cultural or religious backgrounds. For example, if all the community provision was in licensed premises, this would not be appropriate for some members of the community.

### **Age:**

#### **Children**

Carers of young people may need more frequent access to public convenience facilities. Thirteen of the current sites have baby changing facilities;

Small children have less control over their bladders and outings can be abruptly shortened if a child needs to use a toilet.

#### **Older people**

Elderly people are more likely to suffer with incontinence so need to use the toilet more frequently and with greater urgency. This together with reduced mobility leads to an increased dependency on public toilets as people age.

For many older people, lack of toilet facilities can stop them going out which can increase physical and mental health problems. The issue of toilet provision is so important for the health and wellbeing of the global ageing population that the WHO has cited it as a major factor in their Age Friendly Cities Guide (SHINE 2013)

### **Homeless people:**

There could be negative impacts to homeless individuals who use public toilets as somewhere to wash as well as a toileting facility. The needs of homeless people are seldom mentioned in connection with public toilets, but their toileting requirements do need to be addressed if street fouling is to be reduced. Homeless people may also suffer from stigma, and may not be or may not feel welcome in some establishments.

There is evidence of more people sleeping in parks away from the city centre rather than on the streets as they feel safer there but this has also led to soiling in these areas due to a lack of toilets.

It can be presumed that options 2 and 3 outlined in the consultation survey would be less effective in providing accessible and appropriate facilities for these groups thus increasing the negative impact.

### 3.2 Can these impacts be mitigated or justified? If so, how?

The decision to remove the majority of the budgets for managing public toilets has already been made as part of the budget decisions in February 2017. There are mitigations in Options 1 & 2.

- In Option 1, the development of a Business/Community Toilet Scheme as proposed will significantly increase the availability of publicly accessible toilets, across the city and in a range of different venues. This would not only offset the negative impacts of closing the Council's Public Toilets, but will also offer an increase in provision. This would need to ensure appropriate accessibility for all residents, with specific attention to those with access requirements from protected characteristic groups. There are already successful Business/Community Toilet Schemes in a number of other Authorities including Gloucester, Oxford, Richmond, Poole, Sheffield, and Edinburgh to consider as examples.
- In Option 2, there will be a single Public Toilet remaining. This is a mitigation though most likely to be of use to people living in or visiting that specific location and limited beyond that.
- Option 3 has no mitigation at this time.

### 3.3 Does the proposal create any benefits for people with protected characteristics?

The benefits of the proposal are mostly focussed on Option 1, because of the impact of the Business/Community toilet scheme. This would increase accessible provision across the city. The quality of this provision will be higher than the standard currently offered by the public provision. Areas with no accessible provision currently could be targeted through the scheme to increase accessibility. Some participating premises are likely to have longer opening hours into the evening, unlike the current provision.

Option 2, keeping a single toilet, is likely to mean improving the quality of that specific provision, thereby benefiting those in that area.

### 3.4 Can they be maximised? If so, how?

As outlined above for option 1. In addition, the Business/Community Toilet scheme could be targeted to specific needs of communities of protected characteristics. For example, such as mapping accessible provision clearly, ensuring close proximity to transport links, ensuring all participating businesses comply with the Equality Act 2010. Much of this work can be done in partnership with leading VCS/equality organisations to ensure all the communications about such a scheme are accessible and clear, including web presence, signage etc.

Further work can be undertaken with two major city centre locations to encourage the installation of Changing Places for adults.

There are some mitigating factors in that there are a number of services that are available for homeless people and rough sleepers to access during the day where they can access services. See [www.bristol.gov.uk/documents/20182/503114/Survival+Handbook+for+homeless+people/b73b7aae-c9fa-4f1b-bc4f-c788dc4eacfd](http://www.bristol.gov.uk/documents/20182/503114/Survival+Handbook+for+homeless+people/b73b7aae-c9fa-4f1b-bc4f-c788dc4eacfd). We will work with St Mungo's to update the toilets information on page 37.



## Step 4: What next?

*The Equality Impact Assessment must be able to influence the proposal and decision. This section asks how your understanding of impacts on people with protected characteristics has influenced your proposal, and how the findings of your Equality Impact Assessment can be measured going forward.*

### 4.1 How has the equality impact assessment informed or changed the proposal?

Identifying the groups most at risk of negative impact from the closure or severe reduction in public toilets run by the city council has encouraged the development of the mitigations offered by the potential Business/Community Toilet Scheme. Sharing these impacts and potential mitigations is a key part of the consultation.

### 4.2 What actions have been identified going forward?

This will be subject to the consultation responses to the options put forward.

### 4.3 How will the impact of your proposal and actions be measured moving forward?

For Option 1, a monitoring and review approach will be put in place for any Business/Community Toilet Scheme, to ensure access for all residents and to understand any further support required by businesses to continue to manage and improve the scheme.

For the other options, there will not be a formal reviewing approach, but we will be alert to feedback received from the public moving forward regarding further impacts or issues arising.

# School Crossing Patrols

The Equalities Impact Assessment is a living document which is regularly updated and full equalities information will be used to design and develop the proposals for decision.

## Step 1: What is the proposal?

There are currently around 80 school crossing patrols at schools in Bristol, plus a small number of sites currently where the school crossing patrol (SCP) position is vacant. There is no statutory requirement to provide a school crossing patrol service. SCPs are situated at locations where a real or perceived road danger has been identified and where the location reaches a statistical threshold in terms of traffic flow for both vehicles and pedestrians, however recent re-assessments using the national ROSPA guidelines on assessing SCP sites have shown that because of changing traffic and pedestrian patterns many of these sites no longer meet the criteria for having a school crossing patrol (an SCP). The Council has decided to cut £155k from the budget for service. This cut is approximately half of the budget.

In order to make the savings it is proposed to change the way the service is provided. This could result in the SCP service being removed from some sites/schools or it could result in the service being funded differently. It is proposed to remove SCPs from sites where there are existing engineering measures – e.g. a Pedestrian Crossing.

Removal of the service may have the effect of making the journey to school less safe, potentially increasing the number of injuries on the road. It may also have the effect of discouraging walking and cycling trips to and from school. This may also have the consequence of a fall in health and fitness levels among both children and adults.

The proposals will also impact on the 70 SCP staff of whom 77% are female, 58% are over 50 (including 13% over 65).

The service is not a statutory requirement for a Local Authority, it is the responsibility of parents / carers to get their children to school safely.

## Step 2: What information do we have?

*Decisions must be evidence-based, and involve people with protected characteristics that could be affected. Please use this section to demonstrate understanding of who could be affected by the proposal.*

### 2.1 What data or evidence is there which tells us who is, or could be affected?

The evidence is that the majority of users of the service are either children under 12 or parents or carers.

Visually impaired or disabled children and parents could be more affected due to a greater need for help to cross the road to school. In Bristol 12.4 % of people are disabled although we don't know how many parents and children are in this category and could be affected.

The proposal will impact on staff, many of whom are in the older age categories (58% are over 50, including 13% over 65), are predominantly female (77%), and many of whom are on low incomes. The BCC HR system does not record information on all staff (24% have no information on ethnicity and 52% have no information on religion / belief). From the staff records 12% of SCPs are recorded as BME or White Minority, and 7.5 % as other religion or belief. Any changes will be undertaken through the council's Managing Change process which provides support to staff.

## 2.2 Who is missing? Are there any gaps in the data?

The service does not exclude any particular group and so will reflect the population of Bristol as a whole. We do not hold specific data on service users.

## 2.3 How have we involved, or will we involve, communities and groups that could be affected?

In Autumn 2016 there was a citywide Corporate Strategy consultation which included budget savings proposals for School Crossing Patrols. Schools were sent a questionnaire and were asked to encourage parents to get involved in the citywide consultation. A 3000-strong petition was presented to Full Council and another online petition with 1650 signatures demonstrates that people were aware of these proposals. Responses from the Corporate Strategy consultation have confirmed that people have strong concerns over the proposed changes to School Crossing Patrols in terms of safety, and that this will impact some equalities groups.

The public consultation starting in June 2017 provides details of which School Crossing Patrols the council proposes to retain and which it proposes to discontinue.

### Step 3: Who might the proposal impact?

*Analysis of impacts on people with protected characteristics must be rigorous. Please demonstrate your analysis of any impacts in this section, referring to all of the equalities groups as defined in the Equality Act 2010.*

#### 3.1 Does the proposal have any potentially adverse impacts on people with protected characteristics?

Yes potentially all groups are affected but children and young families to a greater degree. Pregnancy and maternity groups will be highly represented within the affected group. The service users will reflect the makeup of the city as a whole, so will affect most if not all protected characteristics.

#### 3.2 Can these impacts be mitigated or justified? If so, how?

Yes, potential to be mitigated fully or in part at some sites (subject to available funding) by:

- Providing engineered crossings, however, this is not possible at all sites. This would also be a costly solution and even if the funding was available there would be a period when sites would have neither an SCP nor an engineered crossing.
- Seeking to fund the service by alternative means – e.g. schools provide funding, or seek to raise funding through sponsorship.

Bristol City Council will work with Head Teachers of affected schools who wish to identify potential mitigation actions that are appropriate for their school.

The justification for removing the service at all or some of the schools is that the provision of the School Crossing Patrol service is not a Statutory duty for the Local Authority. Many sites no longer meet the national ROSPA criteria for having a school crossing patrol.

We can justify the continuation of the service at some sites, based on meeting the Council's Road Safety objectives, as well as our commitment to promoting sustainable transport and encouraging walking and cycling. Risks involved in removing the service include the risk of increases in pedestrian casualties, an increase in the number of car journeys, a reduction in the number of children and parents walking and cycling with the associated losses and costs in terms of health. School Crossing Patrols not only offer a safer location for people to cross the road but they act as a visual reminder to motorists that they are near a school and should adjust their speed accordingly.

### **3.3 Does the proposal create any benefits for people with protected characteristics?**

No

### **3.4 Can they be maximised? If so, how?**

No

## **Step 4: What next?**

*The Equality Impact Assessment must be able to influence the proposal and decision. This section asks how your understanding of impacts on people with protected characteristics has influenced your proposal, and how the findings of your Equality Impact Assessment can be measured going forward.*

### **4.1 How has the equality impact assessment informed or changed the proposal?**

The proposal is still subject to consultation for the service.

There is a free text box in the consultation where citizens can respond with alternative options for the service and also declare impacts that have not yet been identified.

### **4.2 What actions have been identified going forward?**

Working with Head Teachers of affected schools to look at mitigation options. Invite participants of the consultation to identify if they would be willing to assist with mitigations or other measures to contribute to safety around schools where appropriate. Any affected staff will be supported through the council's Managing Change process.

### **4.3 How will the impact of your proposal and actions be measured moving forward?**

Variable depending on mitigation options but would include changes in casualty numbers around schools, particularly at the sites previously served by SCPs. Feedback from schools / parents.

Feedback from pupils/staff where we are working with the school to promote active travel.





# Withdrawal of funding for Neighbourhood Partnerships

The Equalities Impact Assessment is a living document which is regularly updated and full equalities information will be used to design and develop the proposals for decision.

## Step 1: What is the proposal?

*Please explain your proposal in Plain English, avoiding acronyms and jargon. This section should explain how the proposal will impact service users, staff and/or the wider community.*

### 1.1 What is the proposal?

Make a saving of £500k in 2017/18 and a further £562k in 2019/20 in the delivery of Neighbourhood Partnerships. This proposal removes all but £309k of the Neighbourhood Partnerships budget. It is about changing the way the council works with Bristol's communities by moving from 14 council-led Neighbourhood Partnership structures to community/locally-led initiatives. This is part of a process to support greater self-determination in communities rather than top down decision making with the council becoming facilitator and enabler.

## Step 2: What information do we have?

*Decisions must be evidence-based, and involve people with protected characteristics that could be affected. Please use this section to demonstrate understanding of who could be affected by the proposal.*

### 2.1 What data or evidence is there which tells us who is, or could be affected?

Across the city Neighbourhood Partnerships actively engage with approximately 6% of the population; this would increase to about 10% taking account of all aspects of social media and online engagement. We carried out a comprehensive equalities monitoring of all Neighbourhood Partnership activity during April, May and June 2016. 24% of the people we worked with completed equalities monitoring questionnaires.

This information tells us our active membership is:

- Age: 5% under 24, 32% 25-49, 60% are over 50
- 53% Women, 45% Men
- 2% Transgender, 1% Lesbian, 2% Gay, 1% Bisexual
- 84% White British
- 6% White 'other' (non British),
- 2% Asian/Asian British
- 3% Black / African / Caribbean / Black British
- 1% 'Other'
- 13% Disabled people
- 44% have a religion or belief, 40% do not

This is city wide data. The number of returns varied from area to area.

The quality of life survey tells us where people feel they can influence decisions:

<https://www.bristol.gov.uk/documents/20182/33896/Results+of+quality+of+life+in+Bristol+survey+2015+to+2016/2a83bda4-fed5-400d-b638-2d2c72f67507>

In addition the Neighbourhood Partnerships are supported by a diverse staff team. (Specific data is not appropriate to share).

### 2.2 Who is missing? Are there any gaps in the data?

Due to reasons beyond anyone's control there was a gap in the data from Easton and Lawrence Hill which we would expect to show an increased number from Black, Asian and other Minority Ethnic people. The returns were not even across the city and so from some areas there were more returns than others.

These figures do not include the significant numbers of people who take part in NP consultations about the neighbourhood where there are street level conversations with a wide range of people.

The data tells us and we know from experience Black, Asian and other minority ethnic communities, Lesbian, Gay, Bisexual and Transgender communities and young people are all under-represented in Neighbourhood Partnerships. One of the reasons for changing the existing structures is to seek to make it more accessible and relevant to a wide range of people whilst taking account of the significant reduction in funding and support.

## 2.3 How have we involved, or will we involve, communities and groups that could be affected?

We will facilitate discussions about the transition from Neighbourhood Partnerships to new arrangements which are yet to be determined.

An important part of this conversation will involve a greater cross section of people and make links with equalities organisations working city wide. We will work with existing Neighbourhood Partnership members (where there is a high level of participation of women, disabled people and older people), young people's organisations such as the youth council, groups led by Black, Asian and other minority ethnic people, Lesbian, Gay and Bisexual organisations such as Bristol LGBT Forum and Pride.

We are working proactively with voluntary sector groups such as Black South West Network and SARI and VOSCUR. We have spoken to BEING about the proposed changes and to highlight our commitment to involving equalities communities in a city conversation about neighbourhoods. We talked about how we can work together to ensure equalities communities are part of the conversation and agreed in principle to organise a joint event.

We have attended the Bristol Disability Equality Forum open forum to talk about the changes and find out what interests people and the barriers to participation locally.

We will continue to reach out and attend meetings and events.

### Step 3: Who might the proposal impact?

*Analysis of impacts on people with protected characteristics must be rigorous. Please demonstrate your analysis of any impacts in this section, referring to all of the equalities groups as defined in the Equality Act 2010.*

#### 3.1 Does the proposal have any potentially adverse impacts on people with protected characteristics?

This proposal allows one year to implement a transition process from existing arrangements to community-led arrangements.

Broadly the adverse impacts are as follows:

1. These proposals will mean communities being able to establish and lead community arrangements which can influence decisions and involve a wide range of people with no city council officer support or funding. This will have the most adverse impact on places and people who face barriers to participation and greatest inequality. The transition arrangements will need to support those areas which are not in a position to organise themselves and influence decisions, if the transition is unsuccessful these areas will be further excluded. This in turn is likely to lead to loss of good will, key relationships and social capital.
2. It is the city council's policy to use buildings which are broadly accessible to disabled people with wheelchair access being a minimum standard. These buildings often charge more. With no resource, people will need to use free venues which are often not accessible. There is no data on access to buildings.
3. Reliance on community-led solutions could lead to participation by equalities communities becoming more difficult rather than easier particularly those who are already excluded. The Equalities Duty places a requirement on public authorities because this does not happen routinely or as standard practice. Self-organised networks would not have this obligation.
4. This proposal will mean decommissioning the service with significant reduction in staff many of whom are people with protected characteristics.



### **3.2 Can these impacts be mitigated or justified? If so, how?**

Where possible community-led arrangements will build on what already exists in an area and make better links with community groups which are not already involved. Community groups will have an existing network of people and connections with people the local authority finds it hard to reach.

A full risk analysis will be carried out which will enable us to identify possible resources to support the areas and equalities groups where there's the greatest risk.

One of the options we will be consulting on will make available some financial support to help communities organise and cover the cost of accessible venues. We have agreed with Voscur they will hold and maintain a list of accessible community venues which will be available on their website from 1st July. This can then be added to pinpoint data.

Bristol City Council is committed to sustaining a diverse workforce and to fostering talent. Staff will be supported to take up all the support and opportunities available to them.

### **3.3 Does the proposal create any benefits for people with protected characteristics?**

Yes.

We know from experience some people from equality communities do not want to engage with council-led arrangements and will be more inclined to get involved with community-led solutions.

### **3.4 Can they be maximised? If so, how?**

The Council's involvement will be minimal going forward but during the transition process we will take proactive steps to help build more inclusive community conversations and networks at a local level and city wide. We will continue to work with equalities-led self-organised groups citywide to involve people in wider conversation about the city, what matters to them and how they want to be involved.



## Step 4: What next?

*The Equality Impact Assessment must be able to influence the proposal and decision. This section asks how your understanding of impacts on people with protected characteristics has influenced your proposal, and how the findings of your Equality Impact Assessment can be measured going forward.*

### 4.1 How has the equality impact assessment informed or changed the proposal?

There will be a transition period which will be used to mitigate impact on equalities groups and disenfranchised areas, where possible.

The consultation process will highlight the equalities impacts and offer an opportunity for people to raise any further issues related to their protected characteristic.

We will work with city-wide, equalities-led organisations to inform the transition process and the development of neighbourhood networks.

We will host a series of networking events which will provide a forum for information sharing and learning between people who are committed to making positive things happen in the city.

### 4.2 What actions have been identified going forward?

To actively involve equality groups in the transition process and to create opportunities for Bristol people to learn from each other.

### 4.3 How will the impact of your proposal and actions be measured moving forward?

By the active participation of equality groups and communities in the setting up of local arrangements.

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# Your Neighbourhood

Consultation on changes to local services

