Equality impact assessment (EIA) form: evidencing paying due regard to protected characteristics

(Form updated April 2023)

Developing care services in the Craven area

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যদি আপনি এই ডকুমেন্ট অন্য ভাষায় বা ফরমেটে চান, তাহলে দয়া করে আমাদেরকে বলুন।

如欲索取以另一語文印製或另一格式製作的資料,請與我們聯絡。 - اگرآپومعلومات کسی دیگرزبان یادیگرشکل میں درکار ہوں توبرائے مہر یاتی ہم سے یو چھے۔

Equality Impact Assessments (EIAs) are public documents. EIAs accompanying reports going to County Councillors for decisions are published with the committee papers on our website and are available in hard copy at the relevant meeting. To help people to find completed EIAs we also publish them in the Equality and Diversity section of our website. This will help people to see for themselves how we have paid due regard in order to meet statutory requirements.

| Name of Directorate and Service Area | Health and Adult Services; Service Development & Care Provider Services |
|--|---|
| Lead Officer and contact details | Hannah Brown hannah.brown3@northyorks.gov.uk |
| Names and roles of other people involved in carrying out the EIA | Ben Kirkhope Service Development Project Officer Amanda Jacques Senior Service Development Officer (Craven) |
| How will you pay due regard? e.g., working group, individual officer | The EIA will be undertaken by lead officers with input from other colleagues via discussions at project meetings. |
| When did the due regard process start? | 02/03/23 |

Section 1. Please describe briefly what this EIA is about. (e.g., are you starting a new service, changing how you do something, stopping doing something?)

A proposal is being put forward to replace Neville House Elderly People's Home (EPH) in Gargrave with a new Extra Care Housing ECH scheme in Gargrave, and for further work to be undertaken to develop new supported accommodation in the wider locality to better meet the needs of people

with a range of care and support needs in line with our 'home first' approach. If these proposals are approved, this will result in the closure of Neville House EPH in Autumn 2023. This EIA is to assess the impact on the staff and residents of Neville House and local community.

Section 2. Why is this being proposed? What are the aims? What does the authority hope to achieve by it? (e.g., to save money, meet increased demand, do things in a better way.) The replacement of Neville House is being proposed due to the reasons listed below:

- The Council is committed to a home first approach that supports people to remain in their own home with the least restrictive option that maximises and sustains their independence. Care market developments in the Craven locality mean that the home first approach is well established. The development of a new ECH scheme in the area will add to the more favourable and personalised models of care for people with this level of need are available which enable people to remain at home and independent for longer.
- Residential care demand in the Craven area is for people with more complex residential needs
 including people living with dementia, and bed-based provision to support hospital discharge
 and admission avoidance. The current service model and staffing structure at Neville House is
 not suited to this more complex delivery model with the home currently supporting older people
 with relatively low-level care needs. Ashfield Skipton is local to Neville House and as a Care
 and Support Hub in development, is more geared towards this service delivery model.
- Analysis of referral and admission data for Neville House shows limited demand for the service over the last three years. Between January 2020 – March 2022, there were a total of only 33 admissions to the service. Only eight of these admissions were permanent admissions. With the service being registered for 26 beds this is unsustainable. Average occupancy over the last three years has been 54%. This is well below the overall Care Provider Services EPH occupancy which is 73% over the same time period.
- The Neville House property and site is not fit for purpose in the medium-to-long term. The property requires significant investment to support the continued safe delivery of social care services from the site. It is anticipated that the site's maintenance needs will continue to escalate with a significant failure of some part of the building or infrastructure increasingly likely over time which would potentially necessitate a less planned conclusion to the use of the building.

The aims of the replacement of the service are to:

- Better meet the needs of people in the local area with a range of services that support the Council's home-first ambitions, through sustainable home-based support, Extra Care Housing and a model of residential care that caters for people with more complex needs such as dementia.
- Enable the development of a new Extra Care Housing scheme in Gargrave, alongside other supported accommodation developments that will provide improved accommodation-based services across the locality enabling people to remain independent in their own home for longer, with improved living and working environments for people we support and our care workforce, respectively.
- Mitigate the future budget impact of increasing maintenance costs of the site and achieve savings as set out in the Medium-Term Financial Strategy.

Section 3. What will change? What will be different for customers and/or staff?

Residents:

There are currently seven permanent residents living in Neville House. All the permanent residents have been assessed as having 24-hour care and support needs, although the level of support provided to individuals will vary.

The proposed closure of Neville House will mean the seven current residents will require a supported move to an alternative residential care home. It is recognised that changes to services for the current residents of Neville House has the potential to cause distress to people and their families and/or carers. Sensitive consultation will be undertaken with people and their families prior to the closure, working closely with Locality Care and Support Teams to ensure alternative care and support is identified that meets people's needs and wishes. This will follow a person-centred approach and the latest good practice.

During the process North Yorkshire Council (NYC) will:

- Put in place well organised and skilled assessment teams who will work with the residents and their families to find a new service that best meets the needs of the individual. Personal choice will be considered alongside already developed friendships and support networks beyond the care home, including proximity to families visiting their loved ones. Residents and their families/carers will be kept informed at each stage of the process with open lines of communication being set up.
- Assess the current needs using strength-based and person-centred assessments to identify which service will best meet residents care and support needs
- Involve residents and their families in the assessment process to understand where they would like to move to. Some residents will want to move closer to family or friends and where possible they will be assisted in doing this.
- Provide counselling and support where needed to help residents through the potentially distressing and unsettling changes.
- Offer support, compassion and understanding to residents who will be impacted by the loss of a familiar setting that may hold a sense of community and place.
- Work at the pace of the individual and give as much time and space as needed
- Ensure independent advocacy is available
- Ensure that residents are supported on the day of the move.
- Listen to any concerns residents/family or friends have about the move.

Good practice will be followed; including but not limited to <u>Achieving closure - What happens to older people and staff when care homes close? | NIHR (National Institute for Health Research)</u>

Residents will have the option to move into Ashfield Skipton, which is the most local NYC EPH, alongside other independent sector care homes, local Extra Care Housing schemes as well as to explore other options as appropriate.

Future potential residents:

Demand is currently very low for the current service model of residential care provided by Neville House. Targeted work with the care market in Craven has meant that there is now improved resilience and availability of care in Craven meaning more people can be supported at home. There are now 4 ECH schemes across Craven with a fifth proposed in Gargrave as a replacement to Neville House, as outlined in this report, in which people are able to be more independent and live in their own home whilst receiving the care and support they need.

Staff:

There are currently 31 established staff, equating to 20 full-time equivalents at Neville House. Although there are vacant care hours, the service is no longer actively recruiting carers due to the low number of people being supported in the service. If the proposal is approved by Executive, HR will lead a 30-day consultation with staff on their employment options. The Council would seek to offer staff suitable alternative roles, wherever possible. The outcome of this cannot be predetermined, and will take account of individual factors.

Support will be provided to staff throughout the process, with involvement and engagement with trade unions, as appropriate. It is anticipated that staff will find the process stressful and difficult. Support will also be made available in the form of counselling and Human Resources support. Trade Unions will be involved and informed throughout the process and will be available to support staff.

Section 4. Involvement and consultation (What involvement and consultation has been done regarding the proposal and what are the results? What consultation will be needed and how will it be done?)

The decision to replace Neville House will be taken by the Council's Executive Committee on 20th June. There is an eight day call-in period following this. If the proposal is approved, consultation with the affected individuals will be carried out once the call-in period is concluded. The consultation period is anticipated to begin in early July and will last a total of 30 days.

The consultation for residents (and their families/carers) will involve:

- Information on the replacement of the home;
- How they will be supported to find a new service by the Council's Social Care teams, considering personal choice alongside personal and social needs;
- Availability of advocacy and counselling.

The consultation for staff will involve:

- Information on the replacement of the home:
- Alternative employment options, and any other options specific to their circumstances;
- Availability of support throughout the process.

Briefing sessions have taken place with staff and residents ahead of the publication of the report. Further briefing sessions will be arranged for residents, families/carers and staff once the decision is know. One-to-one staff meetings and individual person-centred support from care and support teams for residents and their families/carers will also be arranged. Human Resources and Trade Unions will also be available to staff, as well as counselling services.

Residents and staff will be kept up to date throughout the consultation period with clear lines of communication being available.

Section 5. What impact will this proposal have on council budgets? Will it be cost neutral, have increased cost or reduce costs?

If the proposal is approved by the Council's Executive Committee, it is anticipated that the seven current residents of Neville House will be supported to move to alternative residential care settings in the locality. Should it become necessary to source placements in the independent sector, we are confident this can be done at Approved Cost of Care (ACOC) rates in the locality. This would be at an annual cost of £270,088 which would be required to transfer to the appropriate locality Community Support Budget(s).

Whilst it is anticipated that the majority of staff at Neville House will be offered suitable alternative roles, and the preferred option is to retain staff within Care Provider Services wherever possible, the outcome of this is subject to consultation and cannot be predicated.

It is proposed that following closure of the service, the Neville House site is handed back to Corporate Property Services who will become responsible for the future of the site. There will be a one-off corporate cost of securing the site.

Neville House has an allocated saving of £135,000 on the Medium Term Financial Strategy. Considering the proposals for Extra Care and supported housing, there is the potential to achieve increased recurrent savings. Extra Care Housing is evidenced to deliver circa £300,000 annual recurrent savings based on a 60 unit scheme due to diversion of costs from residential care, meaning we can estimate a recurrent saving of £150,000 to be achieved through the replacement of Neville House with an Extra Care Housing scheme in Gargrave.

| Section 6. How will this proposal affect people with protected characteristics? | No impact | Make things better | Make things worse | Why will it have this effect? Provide evidence from engagement, consultation and/or service user data or demographic information etc. |
|---|--------------|--------------------------|-------------------------|---|
| Age | Х | Х | Х | As a residential care facility for the over 65's the closure of Neville House will affect older people. 6 of the remaining 7 residents in Neville House are over 90 years of age. Potential Negative Impacts: |
| | | | | There is the potential for residents, who may also have elderly family members, to be negatively impacted by the closure of Neville House. It be that a move to alternative services means that people have reduced engagement with their family and/or friends, which may have a negative impact on their mental and physical health. Care and support teams will assess this before the move and will support residents to find services that meet the need and wishes of residents and in terms of location, and involve families and carers, where appropriate. Location of family/friends, personal choice and current friendship will all be considered when choosing the new service for the person. Current residents may find the move difficult due to their age and having made the service their home. It is likely that they will find it stressful and worrying. To minimise the impact, experienced Care and Support teams will work closely with residents throughout the process. Communication will be open and honest from the outset, in line with the communication strategy. The availability of independent advocacy and counselling will be communicated to the residents. The entire process will be guided by established best practice and experience in supporting residents with this type of transition. |
| | | | | No Impact |
| | | | | Neville House received only 33 admissions to the service between January 2020 – March 2022, of which only eight were permanent admissions. Furthermore, since March 2022, when permanent admissions were suspended, there have only been nine short stay admissions which is well below other local care homes such as Ashfield Skipton which has received double this number. Local care market assessment determines that there is sufficient residential care, home-based |

Appendix C support and Extra Care Housing services in the area to meet need. Craven has very few unsourced packages of care and there is availability in other residential care homes. There are 12 independent sector care homes in Craven locality; 11 of these homes offer residential care with a total of 134 residential beds. Ashfield Skipton is the alternative Council-run EPH in Craven. During the last 12 months there have been between 0 - 14 residential beds available at any one time. There has only been a period of two weeks when there have been no available residential beds in Craven with the average availability being nine beds. There is a low waiting list for the Extra Care facilities, with units currently available in Bentham and Skipton. Positive Impact The Neville House site does not meet the emerging and future needs of people with care and support needs due to the limitations of the fabrication of the building. The current service model also supports people with relatively lowlevel needs. A well-embedded home first approach in the locality, further supported by Extra Care Housing developments locally means that more favourable and personalised models of care for people with this level of care need are available which enable people to remain at home and more independent for longer. There are currently four established Extra Care schemes in Craven with a fifth proposed in Gargrave itself, with good geographical spread across the locality. The planned replacement of Neville House with an Extra Care scheme in Gargrave will better meet the local need. Demand for residential care is for people with more complex residential needs including people living with dementia, and those requiring rehabilitation following hospital discharge, which cannot be met at Neville House. The development of a Care and Support Hub in Skipton is proposed to meet demand in this area. Χ Χ Χ Disability Potential Negative Impacts There is the potential for residents, who may also have elderly family members, to be negatively impacted by the closure of Neville House. It be that a move to alternative services means that people have reduced engagement

with their family and/or friends, which may

| | | have a negative impact on their mental and physical health. Care and support teams will |
|------|---|---|
| | | assess this before the move and will support residents to find services that meet the need and wishes of residents and in terms of location, and involve families and carers, where appropriate. Location of family/friends, personal choice and current friendship will all be considered when choosing the new service for the person. |
| | | No Impact |
| | | Demand for residential care is for people with more complex residential needs including people living with dementia, and those requiring rehabilitation following hospital discharge, which cannot be met at Neville House. The development of a Care and Support Hub in Skipton is proposed to meet demand in this area. |
| | | Positive Impact |
| | | Developments in social care needs mean that people with disabilities can now be supported to remain in their own homes for longer through a well-embedded home first approach including within Extra Care Housing developments in the locality. This means that more favourable and personalised models of care for people with this level of care need are available which enable people to remain at home and more independent for longer. There are currently four established Extra Care schemes in Craven with a fifth proposed in Gargrave itself, with good geographical spread across the locality. The planned replacement of Neville House with an Extra Care scheme in Gargrave will better meet the local need. |
| Sex | X | Data shows that more women than men access social care services, and this is mirrored in the service where the majority of the current residents in Neville House are women, though there are no restrictions in terms of the eligibility criteria of the service. There is capacity in other local residential care homes and other social care services, none of which discriminate by sex, and therefore a neutral impact is anticipated. |
| Race | Х | The impact of the proposal is anticipated to be neutral. Whilst all current residents of Neville House are White British, however care services including the proposed Extra Care development take account of people's identity, culture and race |

| | | Appendix C |
|-------------------------------|---|--|
| | | in the assessment for and delivery of care services. This is addressed through personcentred assessment and our commissioning and quality assurance approach. |
| Gender reassignment | X | No evidence of an impact. The Council and our partners take account of people's identity, culture and race in the assessment for and delivery of care services. This is addressed through personcentred assessment and our commissioning and quality assurance approach. |
| Sexual orientation | X | No evidence of an impact. The Council and our partners take account of people's identity, culture and race in the assessment for and delivery of care services. This is addressed through personcentred assessment and our commissioning and quality assurance approach. |
| Religion or belief | X | No evidence of an impact. The Council and our partners take account of people's identity, culture and race in the assessment for and delivery of care services. This is addressed through personcentred assessment and our commissioning and quality assurance approach. |
| Pregnancy or maternity | X | No evidence for impact; not applicable to this service. |
| Marriage or civil partnership | X | No evidence of an impact. The Council and our partners take account of people's identity, culture and race in the assessment for and delivery of care services. This is addressed through personcentred assessment and our commissioning and quality assurance approach. |

| Section 7. How will this proposal affect people who | No impact | Make things better | Make things worse | Why will it have this effect? Provide evidence from engagement, consultation and/or service user data or demographic information etc. |
|---|--------------|--------------------------|-------------------------|---|
| live in a rural area? | X | X | | Although Gargrave is in a rural area of Craven, there are other local care services in the area able to support people from Gargrave who have care and support needs. Alternative care provision in the Craven area can support people with equivalent or higher care needs than can currently be met at Neville House. Milton House is the closest alternative located in Gargrave and provides both residential and nursing care. Home-based support providers are in operation and cover the Gargrave area, with capacity to deliver care in this area. There are no unsourced |
| | | | | care hours across the Craven locality at present. |

| | | | Appendix C |
|---|---|---|---|
| | | | The proposal is to develop a new Extra Care Housing scheme in the Gargrave area within close proximity to the Neville House site. |
| | | | Positive Impact |
| | | | The planned Extra Care Housing development in Gargrave will meet long term need, alongside the developments in the wider care market to deliver on our home first ambitions and planned supported accommodation developments to meet the needs of people with a range of care and support needs. This will have a positive impact for people in the local community, who will be able to remain independent in their own homes and/or with their own front door for longer. |
| have a low income? | | X | It is recognised that the proposals have the potential to have a negative impact on the current staff of Neville House. A sensitive and comprehensive consultation will be undertaken with staff, and wherever possible the Council will seek to redeploy staff within suitable alternative roles. Where redeployment has increased travel implications, time-limited financial protection can be offered. There are job vacancies within the local care sector, both within the Council and independent sector. The individual impact on staff will be picked up further during the staff consultation process. |
| are carers (unpaid family or friend)? | X | X | It is likely that residents will have elderly family members and family carers involved in their care and support who may be negatively impacted by the replacement of Neville House. In the event that people move out of Gargrave, it may mean they find it difficult to visit their family member in their alternative service. Location of family/friends, personal choice and current friendship will all be considered as part of the assessment and identification of alternative care provision for people. |

| Section 8. Geographic impact – P apply) | lease detail where the impact will be (please tick all that |
|--|---|
| North Yorkshire wide | |
| Craven district | X |
| Hambleton district | |
| Harrogate district | |
| Richmondshire district | |
| Ryedale district | |
| Scarborough district | |
| Selby district | |
| If you have ticked one or more distimpacted? If so, please specify bel | tricts, will specific town(s)/village(s) be particularly low. |

The proposal will have a specific impact on people living in the Gargrave catchment area as Neville House is in the centre of the village of Gargrave.

Section 9. Will the proposal affect anyone more because of a combination of protected characteristics? (e.g., older women or young gay men) State what you think the effect may be and why, providing evidence from engagement, consultation and/or service user data or demographic information etc.

Older people with a disability are the most likely to be affected by the replacement of Neville House. This is because Neville House is an elderly people's home that caters for people over the age of 65 with care needs. The longer term effect of the replacement, however, is anticipated to be positive with the proposed developments in Extra Care Housing and other supported accommodation providing further advancements in our home first approach in Craven and more favourable and personalised alternative care services to local people that enable them to remain more independent for longer.

| Section 10. Next steps to address the anticipated impact. Select one of the following options and explain why this has been chosen. (Remember: we have an anticipatory duty to make reasonable adjustments so that disabled people can access services and work for us) | Tick option chosen |
|---|--|
| <u> </u> | Х |
| potential for discrimination or adverse impact identified. | |
| 2. Adverse impact - adjust the proposal - The EIA identifies potential problems or missed opportunities. We will change our proposal to reduce or remove these adverse impacts, or we will achieve our aim in another way which will not make things worse for people. | |
| Adverse impact - continue the proposal - The EIA identifies potential problems or missed opportunities. We cannot change our proposal to reduce or remove these adverse impacts, nor can we achieve our aim in another way which will not make things worse for people. (There must be compelling reasons for continuing with proposals which will have the most adverse impacts. Get advice from Legal Services) | |
| Actual or potential unlawful discrimination - stop and remove the proposal – The EIA identifies actual or potential unlawful discrimination. It must be stopped. | |
| | ollowing options and explain why this has been chosen. (Remember: we have an anticipatory duty to make reasonable adjustments so that disabled people can access services and work for us) 1. No adverse impact - no major change needed to the proposal. There is no potential for discrimination or adverse impact identified. 2. Adverse impact - adjust the proposal - The EIA identifies potential problems or missed opportunities. We will change our proposal to reduce or remove these adverse impacts, or we will achieve our aim in another way which will not make things worse for people. 3. Adverse impact - continue the proposal - The EIA identifies potential problems or missed opportunities. We cannot change our proposal to reduce or remove these adverse impacts, nor can we achieve our aim in another way which will not make things worse for people. (There must be compelling reasons for continuing with proposals which will have the most adverse impacts. Get advice from Legal Services) 3. Actual or potential unlawful discrimination - stop and remove the proposal - |

Explanation of why option has been chosen. (Include any advice given by Legal Services.) The longer term effect of the replacement, however, is anticipated to be positive with the proposed developments in Extra Care Housing and other supported accommodation providing further advancements in our home first approach in Craven and more favourable and personalised alternative care services to local people that enable them to remain more independent for longer. The potential for immediate negative impact on residents and their families, as well as staff of Neville House, will be mitigated with overall and longer term positive impact.

Section 11. If the proposal is to be implemented how will you find out how it is really affecting people? (How will you monitor and review the changes?)

Adult social care teams will work sensitively and collaboratively with the current residents and their families/carers to identify alternative care and support services and will support them with the transition of care. They will be best placed to see how the changes are affecting the current residents and their families. The staff team at Neville House will also support the residents and their families, whilst being offered additional support, counselling and support throughout the process by Care Provider Services Service Managers and HR. This will allow us to know the real effect on staff.

The Craven Senior Service Development Officer continuously monitors the demand on services in the local area and will be able to pick up if the local area is negatively affected by the closure of Neville House.

A regular steering group will be set up to coordinate and monitor the process, with representation from Care Provider Services, Adult Social Care teams and HR. The steering group will monitor impact on people.

Section 12. Action plan. List any actions you need to take which have been identified in this EIA, including post implementation review to find out how the outcomes have been achieved in practice and what impacts there have actually been on people with protected characteristics.

| Action | Progress | Monitoring | | |
|------------------------------|--------------|----------------|----------|--------------|
| Action | Lead | By when | riogiess | • |
| | | | | arrangements |
| Work with current residents | Adult Social | August 23 | | |
| to ensure that they are | Care team(s) | | | |
| supported to find a | | | | |
| alternative care and support | | | | |
| which best meets their | | | | |
| current needs with their | | | | |
| personal choice, current | | | | |
| friendships and family | | | | |
| circumstances considered. | | | | |
| Continuously monitor | Service | Continuously | | |
| demand in the local area to | Development | | | |
| ensure that local need is | Team | | | |
| being met. | | | | |
| Continuously assess and | Adult Social | Continuously | | |
| monitor the impact on | Care team(s) | | | |
| residents and family | | | | |
| members. | | | | |
| Make counselling and | | Before, during | | |
| advocacy made available to | | and after the | | |
| both staff and residents | | consultation | | |
| during the consultation | | process. | | |
| process | | | | |

Section 13. Summary Summarise the findings of your EIA, including impacts, recommendation in relation to addressing impacts, including any legal advice, and next steps. This summary should be used as part of the report to the decision maker.

Overall, the replacement of Neville House will have a positive impact on local people. Due to the property condition and service model, Neville House does not have the ability to meet emerging and future local care and support need. The proposed developments in Extra Care Housing in Gargrave, and other supported accommodation are in line with the Council's commitments to reducing reliance on short-term residential stays and growing sustainable home-based and community-based support. Most people achieve better outcomes, and the Council also gets better value for money, if more people can be supported in their own homes with the least restrictive option that maximises their independence. The demand for residential care at Neville House has remained consistently low for over three years and market analysis has shown that there are sufficient services in the local area to meet short-medium term need whilst the proposed new accommodation-based services are delivered. The planned Extra Care development in Gargrave will provide approximately 30 residential units for older people, alongside the developments in the wider care market to deliver on our home first ambitions and planned support needs. This is a positive

impact for people in the local community, who will be able to remain independent in their own homes for longer.

There is the potential for negative impacts on current residents due to the need to move to an alternative residential service, and impact on their families. To mitigate this Care and Support teams will sensitively work with and support residents and their families throughout the process; before, during and after their move. Choice will be promoted throughout the assessment process, and current friendships alongside personal and social needs will be taken into account, with counselling and advocacy services being available to residents who are finding the move particularly stressful. Best practice will be used and where possible staff experienced in managing service closures will aid residents.

Staff will undoubtedly be impacted by the replacement. This will be mitigated by clear communications and sensitive consultation with the staff team, supported by HR, with staff involved in all elements of the process as much as possible. Staff will also have access to additional support, counselling and/or advocacy. Any additional needs of staff will be discussed as part of the consultation, and reasonable adjustments made to enable people with disabilities to take part in the consultation and identify alternative employment and re-deployment options, where appropriate. As part of the staff consultation, wherever possible, the staff team from Neville House will be offered alternative roles including roles at either Ashfield EPH, Jubilee Lodge or within the community reablement service where there are current vacancies. The preferred option is to retain staff within the Council's Care Provider Services wherever possible.

Next steps will depend on the outcome of the decision to be taken at Executive Committee on 20th June 2023. If the recommendation to replace Neville House is approved, staff, residents and their families will be informed on or as soon after 28th June; after the mandatory call-in period. The staff consultation and sensitive re-assessment of residents' care and support needs will then commence thereafter. A steering group will be set up to coordinate and monitor the process.

Section 14. Sign off section

This full EIA was completed by:

Name: Ben Kirkhope / Hannah Brown

Job title: Service Development Project Officer / Provider Services Development Manager

Directorate: Health and Adult Services **Signature:** Ben Kirkhope / Hannah Brown

Completion date: 02/06/23

Authorised by relevant Assistant Director: Abigail Barron

Date: 08/06/23