

EQIA Submission Draft Working Template

If required, this template is for use prior to completing your EQIA Submission in the EQIA App.

You can use it to understand what information is needed beforehand to complete an EQIA submission online, and also as a way to collaborate with others who may be involved with the EQIA.

Note: You can upload this into the App when complete if it contains more detailed information than the App asks for and you wish to retain this detail.

Section A

| | |
|--|--|
| 1. Name of Activity (EQIA Title): | External Community Opportunities Contract for People with Learning and Physical Disabilities |
| 2. Directorate | ASC&H |
| 3. Responsible Service/Division | Strategic Commissioning |

Accountability and Responsibility

| | |
|---|---------------|
| 4. Officer completing EQIA Note: This should be the name of the officer who will be submitting the EQIA onto the App. | Guy Offord |
| 5. Head of Service Note: This should be the Head of Service who will be approving your submitted EQIA. | Sharon Dene |
| 6. Director of Service Note: This should be the name of your responsible director. | Clare Maynard |

The type of Activity you are undertaking

| | |
|--|--|
| 7. What type of activity are you undertaking? | |
| Tick if Yes | Activity Type |
| | Service Change – operational changes in the way we deliver the service to people. |
| | Service Redesign – restructure, new operating model or changes to ways of working |
| | Project/Programme – includes limited delivery of change activity, including partnership projects, external funding projects and capital projects. |
| ✓ | Commissioning/Procurement – means commissioning activity which requires commercial judgement. |
| | Strategy /Policy – includes review, refresh or creating a new document |
| | Other – Please add details of any other activity type here. |

8. Aims and Objectives and Equality Recommendations – Note: You will be asked to give a brief description of the aims and objectives of your activity in this section of the App, along with the Equality recommendations. You may use this section to also add any context you feel may be required.

The Community Day Opportunities for Individuals with Disabilities framework contract was due to expire on 31st March 2021. However due to the pandemic, it was not possible to commence any engagement activity to begin the re-tendering of the contract. The contract was extended under guidance issued at the time (Procurement Policy Note, PPN 01/20) for 18 months in December 2020. The contract needs to be retendered for October 2022.

It is projected to find £1,000,000 savings from the contract through a new pricing matrix on activities and offering a greater variety of opportunities for individuals and move away, where appropriate, from a more 'traditional' approach to day support.

Section B – Evidence

Note: For questions 9, 10 & 11 at least one of these must be a 'Yes'. You can continue working on the EQIA in the App, but you will not be able to submit it for approval without this information.

| | |
|--|-----|
| 9. Do you have data related to the protected groups of the people impacted by this activity? <i>Answer: Yes/No</i> | Yes |
| 10. Is it possible to get the data in a timely and cost effective way? <i>Answer: Yes/No</i> | Yes |
| 11. Is there national evidence/data that you can use? <i>Answer: Yes/No</i> | |
| 12. Have you consulted with Stakeholders? <i>Answer: Yes/No</i> <i>Stakeholders are those who have a stake or interest in your project which could be residents, service users, staff, members, statutory and other organisations, VCSE partners etc.</i> | Yes |

13. Who have you involved, consulted and engaged with?
Please give details in the box provided. This may be details of those you have already involved, consulted and engaged with or who you intend to do so with in the future. If the answer to question 12 is 'No', please explain why.

Consultation has taken place with Providers, Adult Social Care officers and Children and Young People's Services Officers.
Limited engagement so far with people supported through these services via the LD Partnership Board, however wider engagement is planned.

| | |
|--|-----|
| 14. Has there been a previous equality analysis (EQIA) in the last 3 years? <i>Answer: Yes/No</i> | No |
| 15. Do you have evidence/data that can help you understand the potential impact of your activity? <i>Answer: Yes/No</i> | Yes |

Uploading Evidence/Data/related information into the App
Note: At this point, you will be asked to upload the evidence/ data and related information that you feel should sit alongside the EQIA that can help understand the potential impact of your activity. Please ensure that you have this information to upload as the Equality analysis cannot be sent for approval without this.

Section C – Impact

| | | | |
|---|-----|---|-----|
| 16. Who may be impacted by the activity? <i>Select all that apply.</i> | | | |
| Service users/clients <i>Answer: Yes/No</i> | Yes | Residents/Communities/Citizens <i>Answer: Yes/No</i> | Yes |
| Staff/Volunteers <i>Answer: Yes/No</i> | Yes | | |

| | |
|---|------------|
| 17. Are there any positive impacts for all or any of the protected groups as a result of the activity that you are doing? Answer: Yes/No | Yes |
|---|------------|

18. Please give details of Positive Impacts

To improve the experience of the people supported through the current contract, their carers and families. People that we support include those from protected characteristics groups including: Age; Disability; Religion; Race; and Carers.

To stabilise and ensure there is a sustainable day opportunities market going forward that can support vulnerable people in Kent.

Although the recommission of this service will sustain the service to individuals with learning disabilities and/or individuals living with a physical disability, the savings currently identified for people over 26 may result in a change of opportunities sessions available through the contract. It is proposed to mitigate some of this risk through the procurement, by requesting flexible fees depending on the activity / support delivered and to work with providers and people we support through utilising various methods of payment through a self-directed support approach, such as direct payments and individual service funds.

Negative Impacts and Mitigating Actions
 The questions in this section help to think through positive and negative impacts for people affected by your activity. Please use the Evidence you have referred to in Section B and explain the data as part of your answer.

19. Negative Impacts and Mitigating actions for Age

| | |
|---|--|
| a) Are there negative impacts for age? Answer: Yes/No (If yes, please also complete sections b, c, and d). | No, the recommission of this service will sustain the service to individuals . |
| b) Details of Negative Impacts for Age | |
| c) Mitigating Actions for age | |
| d) Responsible Officer for Mitigating Actions - Age | |

20. Negative Impacts and Mitigating actions for Disability

| | |
|--|--|
| a) Are there negative impacts for Disability? Answer: Yes/No (If yes, please also complete sections b, c, and d). | No, the recommission of this service will sustain the service to individuals |
| b) Details of Negative Impacts for Disability | |
| c) Mitigating Actions for Disability | |
| d) Responsible Officer for Mitigating Actions - Disability | |

21. Negative Impacts and Mitigating actions for Sex

| | |
|---|---|
| a) Are there negative impacts for Sex? Answer: Yes/No (If yes, please also complete sections b, c, and d). | No, the recommission of this service will sustain the service to individuals with disabilities of either sex. |
| b) Details of Negative Impacts for Sex | |
| c) Mitigating Actions for Sex | |
| d) Responsible Officer for Mitigating Actions - Sex | |

22. Negative Impacts and Mitigating actions for Gender identity/transgender

| | |
|---|---|
| a) Are there negative impacts for Gender identity/transgender? Answer: Yes/No (If yes, please also complete sections b, c, and d). | No, the recommission of this service will sustain the service to individuals. |
| b) Details of Negative Impacts for Gender identity/transgender | |
| c) Mitigating actions for Gender identity/transgender | |
| d) Responsible Officer for Mitigating Actions - Gender identity/transgender | |

23. Negative Impacts and Mitigating actions for Race

| | |
|---|---|
| a) Are there negative impacts for Race? Answer: Yes/No | No, the recommission of this service will sustain the |
|---|---|

| | |
|---|--|
| <i>(If yes, please also complete sections b, c, and d).</i> | service to individuals. |
| b) Details of Negative Impacts for Race | |
| c) Mitigating Actions for Race | |
| d) Responsible Officer for Mitigating Actions - Race | |
| 24. Negative Impacts and Mitigating actions for Religion and belief | |
| a) Are there negative impacts for Religion and Belief? <i>Answer: Yes/No (If yes, please also complete sections b, c, and d).</i> | No, the recommission of this service will sustain the service to individuals. |
| b) Details of Negative Impacts for Religion and belief | |
| c) Mitigating Actions for Religion and belief | |
| d) Responsible Officer for Mitigating Actions - Religion and belief | |
| 25. Negative Impacts and Mitigating actions for Sexual Orientation | |
| a) Are there negative impacts for sexual orientation. <i>Answer: Yes/No (If yes, please also complete sections b, c, and d).</i> | No, the recommission of this service will sustain the service to individuals. |
| b) Details of Negative Impacts for Sexual Orientation | |
| c) Mitigating Actions for Sexual Orientation | |
| d) Responsible Officer for Mitigating Actions - Sexual Orientation | |
| 26. Negative Impacts and Mitigating actions for Pregnancy and Maternity | |
| a) Are there negative impacts for Pregnancy and Maternity? <i>Answer: Yes/No (If yes, please also complete sections b, c, and d).</i> | No, the recommission of this service will sustain the service to individuals. |
| b) Details of Negative Impacts for Pregnancy and Maternity | |
| c) Mitigating Actions for Pregnancy and Maternity | |
| d) Responsible Officer for Mitigating Actions - Pregnancy and Maternity | |
| 27. Negative Impacts and Mitigating actions for marriage and civil partnerships | |
| a) Are there negative impacts for Marriage and Civil Partnerships? <i>Answer: Yes/No (If yes, please also complete sections b, c, and d).</i> | No, the recommission of this service will sustain the service to individuals. |
| b) Details of Negative Impacts for Marriage and Civil Partnerships | |
| c) Mitigating Actions for Marriage and Civil Partnerships | |
| d) Responsible Officer for Mitigating Actions - Marriage and Civil Partnerships | |
| 28. Negative Impacts and Mitigating actions for Carer's responsibilities | |
| a) Are there negative impacts for Carer's responsibilities? <i>Answer: Yes/No (If yes, please also complete sections b, c, and d).</i> | No, the recommission of this service will sustain the service to individuals . |
| b) Details of Negative Impacts for Carer's Responsibilities | |
| c) Mitigating Actions for Carer's responsibilities | |
| d) Responsible Officer for Mitigating Actions - Carer's Responsibilities | |