Equality Impact Assessment Screening Tool

Equality Impact Assessments help the Council to comply with its public sector duty under the Equality Act 2010 to have due regard to equality implications. EIAs also help services to be customer focused, leading to improved service delivery and customer satisfaction.

The Council understands that whilst its equalities duty applies to all services, it is going to be more relevant to some decisions than others. We need to ensure that the detail of Equality Impact Assessments (EIAs) are proportionate to the impact of decisions on the equality duty, and that in some cases a full EIA is not necessary.

This tool assists services in determining whether plans and decisions will require a full EIA. It should be used on all new policies, projects, functions, staff restructuring, major development or planning applications, or when revising them.

Full guidance on the Council's duties and EIAs and the full EIA template is available at Equality Impact Assessments.

Proposal/Project/Policy Title	The provision of a Framework of Providers that can provide Supported Living	
Service Area	Disability and Mental Health Services	
Officer completing the EIA Screening Tool	Jackie Fisher & Elizabeth Kitto	
Head of Service	Clare Brutton	
Date	10/01/2023	
Brief Summary of the Proposal/Project/Policy Include main aims, proposed outcomes, recommendations/ decisions sought.	To put in place a framework contract to deliver Supported Living for residents known to the Disability and Mental Health services. Supported Living is a statutory service offering residential placements and care to individuals unable to currently live independently. The goal of the service is to equip residents with skills to improve their physical, social, mental and economic wellbeing and build towards a more independent life.	
Protected characteristic	Impact	Description
Age	Positive impact (L)	This service aims to develop and maintain independence of individuals in a safe home setting.

Disability	Positive impact (L)	The framework contract will have a wide range of providers that can meet the individual needs of service users known to the disability and mental health teams. We will be considering the age and individuals needs as part of the tendering process ensuring we are able to provide these services for all ages. There is no average age in Supported Living facilities, our residents currently range from 19-80. The framework will also include provisions for 16+ service users which will require OFSTED registration but will enable a smooth transition from children to adult social care. Using the Framework model will provide greater opportunities to offer bespoke accommodate to a wide range of service users known to the disability and mental health teams. The residential units are catered to specific needs with ceiling hoists and wet rooms available in some residential placements. Staff are training to high standards to work with individuals with specific needs and 1:1 care is available for all those who need it at each facility. Individuals with known disabilities will be highly positively impacted by this service which will instill independent skills and provide care.
Gender re-assignment	Not applicable (N/A)	No perceived negative impact on this protected characteristic
		The service is provided where there are people eligible for LD and MH care. Individuals who are going through gender re-assignment will have equal access to the service as those who identify as their birth assigned gender.
Marriage and civil partnership	Not applicable (N/A)	No perceived negative impact on this protected characteristic
		The service is provided where there is eligible social care need for people

		with LD and MH needs. Individuals who are married or in civil partnerships will be offered the same as unmarried users.
Pregnancy and maternity	Not applicable (N/A)	No perceived negative impact on this protected characteristic The service is provided where there is eligible social care need for people with LD and MH needs. It is not restricted. Those with maternity needs or who are pregnant will be offered the same service as those who are do not/are not.
Race	Not applicable (N/A)	LBBD has a responsibility to support all those with eligible Social Care needs regardless of the race of the individual with the need. The current demographic data indicates that more than half of the residents in supported living are White British (53 percent). 11 percent of users are Black African. The final 36 percent of users represent 15 other ethnic backgrounds. This indicates that users are from a wide spectrum of races and cultures. Individuals are housed regarding a best fit scenario and cultural background is taken into account when placing individuals in residential care.
Religion	Not applicable (N/A)	We continue to be culturally sensitive to the needs of service users. It is important to recognise and meet cultural needs and build links with relevant community groups. This will be mapped and monitored to ensure that cultural awareness training is provided to all staff to educate individuals around religious and cultural needs.
Sex	Not applicable (N/A)	The service is open to both men and women. It is for anyone who has eligible needs. The service currently

		has mare man than waman in the
		has more men than women in the residential care.
Sexual orientation	Not applicable (N/A)	Services will be delivered appropriately and equally with no changes in care or service as a result of sexual orientation. We will encourage providers to offer anti discrimination training on this issue. This will be mapped and monitored to ensure that equality training is provided to all staff to educate individuals around sex, gender and sexual orientation
Socio-Economic Disadvantage ¹	Not applicable (N/A)	Services will be delivered appropriately according to need rather than economic ability. The service is means tested but efforts are made to ensure good quality care to all who require this service as it is statutory. The service has no digital aspects.
How visible is this service/policy/project/proposal to the general public?		Low visibility to the general public
		The supported living environments are not highly public spaces and support residents with mental health issues and learning difficulties. The level of visibility is low. Policy documents will be submitted to the local council and available to the public but in keeping with GDPR, information around specific residents will not be in the public domain.
What is the potential risk to the Council's		Low risk to repuation (L)
reputation? Consider the following impacts – legal, financial, political, media, public perception etc		There is low reputational risk to the council around the creation of a framework model for the supported living service. There is limited visibility and as such limited public perception of the service. In keeping with the Care Act of 2014, we have a legal need to create services bespoke to the needs of service users which a framework will allow. This is a statutory service ergo its recommissioning is unlikely to cause any political upset. The service

¹ Socio-Economic Disadvantage is not a protected characteristic under the Equality Act. London Borough of Barking and Dagenham has chosen to include Socio-Economic Disadvantage as best practice.

	has no links to the media and finances for the service are controlled by independent assessments of care giver needs and supplied by LBBD as required.
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If your answers are mostly H and/or M = Full EIA to be completed

If after completing the EIA screening process you determine that a full EIA is not relevant for this service/function/policy/project you must provide explanation and evidence below.

This is an EIA for the framework contract for residents known to the disability and mental health service who require Supported Living services. The aim of the tender is to provide a wider range of providers that can deliver one or both types of service for all ages and abilities. This will give a great continuity of care across these all-age services; it will also give greater choice and control over the services they wish to access.

We will be looking for local providers to diversify the support they can offer and to give residents a greater opportunity to live life to the full with the support they need and to maintain links to their local community. In keeping with instructions above- there does not appear to be a need for a full EIA due to the lack of H/M outcomes in the answers.