1. Proposal Summary Information

EAA Title	Procurement of a Dynamic Purchasing system (DPS) for adults and children's domiciliary care, extra care, adult day opportunities and adult floating support services.
Please describe your proposal?	Function
Is it HR Related?	Yes □ No □✓
Corporate Purpose	Cabinet report decision

1. What is the Function looking to achieve? Who will be affected?

The proposal is to procure of a Dynamic Purchasing system (DPS) that will provide a contractual vehicle for adults and children's social care to purchase domiciliary care, adult extra-care, adult day opportunities, and adult floating support services.

Adults and children's social care have a statutory duty to provide support for vulnerable children, young people, adults and carers where needs have been assessed and they meet the criteria for support under the Care Act 2014. In the first half of 2023-24 approximately 2,250 adults and children were supported with domiciliary care, 75 residents supported within extra care, 230 adults supported with day opportunities and 429 adults with floating support services.

The DPS will include the following categories:

- 1. Adults domiciliary care: standard care, complex care
- 2. Adults extra-care
- 3. Children's domiciliary care: standard care, complex care
- 4. Adult day opportunities: building based and community-based day activities.
- 5. Floating support services

<u>Domiciliary care services</u>: Domiciliary care services are provided within an individual's home by regulated service providers. Domiciliary care agencies offer support with personal care such as washing, dressing, going to the toilet or taking medication. These agencies are regulated by the Care Quality Commission (CQC) and must meet a minimum quality threshold in order to maintain their CQC registration. There are currently 150 agencies registered on the DPS and all new care packages are placed with care agencies rated either Good or Outstanding by the CQC.

<u>Extra care housing</u>: is a cost-effective alternative to residential care and offers individuals housing with care and support, which means they can retain their independence while being assisted with personal care tasks such as washing, dressing, going to the toilet or taking medication. There are two extra care housing schemes in the borough:

- Turnberry Court: Located in Southall comprises 40 self-contained units with 38 one-bedroom flats and two two-bedroom flats. The building is managed by Housing 21.
- Moorlands Court: Located in Northolt comprises 35 self-contained units. The building is owned and managed by Anchor Housing Association.

<u>Day opportunities</u>: This supports vulnerable adults to participate in a range of social and leisure activities within the community to help maintain their health, well-being and independence. These activities offer vulnerable adults' the opportunity to engage in activities in a safe and secure environment. Activities can take place within a day centre or be delivered in the community as outreach provision. There are currently circa 20 external providers operating in the adult day opportunities sector, most of which are not-for-profit and / or charitable organisations.

<u>Floating support services</u>: Floating support services are provided to a range of vulnerable individuals including older adults, people with a learning disability, mental health need or physical disability, as well as vulnerable young people. This type of support is offered to people who may need help with various aspects of their lives who prefer to remain in their own homes rather than move to institutional settings. There are currently seven floating support schemes in operation across the borough that are directly commissioned by the council. Floating support services are non-statutory services and typically provided by non-regulated providers to vulnerable adults who reside in their own accommodation. The focus is on providing housing related support and support that is tailored to the specific needs of each individual, which can include assistance with daily living activities, managing personal finances, accessing community resources, and more to support vulnerable individuals.

2. What will the impact of your proposal be?

Current domiciliary care services are procured by a DPS that was established in 2017. The contract was initially for four years and was extended by a further 2 + 2 years. The DPS was varied in 2021 to include children's domiciliary care. There are no further options to extend the contract which is due to expire to 31 March 2025.

The development of the current DPS has helped stimulate the setting-up of new local domiciliary care businesses, in addition to attracting more established regional and national providers. The DPS has ensured that 99% of council funded care packages are procured via a formal contractual arrangement. It has achieved a level of sufficiency that has been significant enough to allow the council (since 2020) to move to a quality-based approach whereby all new care packages are only placed with care agencies rated either Good or Outstanding by the Care Quality Commission (CQC).

The consolidating of the children's care categories within the Ealing Homecare DPS has significantly improved the sufficiency of support available to children's services, with over 40 care agencies now registered with CQC to support children aged 0-18 years old. By including categories for adult day opportunities and floating support services we expect a similarly positive impact on quality and sufficiency in this sector.

The re-procurement of a DPS will assist in achieving for all service categories as described above:

- a) A bank of quality assured providers (by service category)
- b) A clear choice of approved providers enabling control for the individual customer over their day-to-day life.
- c) Best market value in terms of cost and quality of service.
- d) A competitive electronic process for running mini competitions.
- e) Improved business processes for both the council and providers.

The aim is to have a new DPS in place by April 2025.

2. Impact on Groups having a Protected Characteristic

Updated November 2019

AGE: A person of a particular age or being within an age group.

State whether the impact is positive, negative, a combination of both, or neutral:

Describe the Impact: Positive

The age profile of current social care service users (snapshot February 2024) as identified on Mosaic for the following services are:

Domiciliary care:

Adults: 18-64: 25% 65-74: 16% 75-84: 27% 85+: 32%

Children:

4 and under: 1% Age 5-9: 25% Age 10-14: 46% Age 15-19: 28%

Extra care:

18-64:27%65-74:12%75-84:39%85+:21%

Day opportunities: 18-64: 46% 65-74: 1% 75-84: 36% Not known: 17%

Floating support: Data currently unavailable.

The population of Ealing by age groups is: Age 0-14: 18% Age 15-64: 70% Age 65+: 12%

Census data indicates that the population of Ealing is aging with a significant increase in the 50+ age groups and this trend is projected to continue. There has been an increase (since the last census) of 22.8% of people aged 65 and over, an increase of 7.5% in people aged 15 to 64 years and an increase of 3.8% in children aged under 15 years. Between 2001 and 2020, Ealing's population of 0– 15-year-olds increased by 24.8%

The data shows that there were more people than ever before in the older age groups, the proportion of the population who were aged 65 years and over was 18.6% (compared to 16.4% in 2011). There are also variations in the number of older adults across wards in the borough with areas such as Acton, Southall and Greenford having higher numbers.

People aged 65+ are overrepresented amongst those with a disability. Whilst constituting 11% of the borough's total population, they comprise nearly half (47%, 10,000 people approx) of those whose activities were limited a lot by a long-term illness or disability. Of the total number of care packages commissioned by adult social care teams the largest proportion was by the Older Adults Team (Accommodation for adults with eligible care needs, Altair report 2023).

The overall impact on both the older age and children's age groups is likely to be positive. The data shows that the older population is increasing and the need for these services is likely to increase. A recent service user provider satisfaction survey indicated that 92% were satisfied with their care provider. The DPS will help to continue to ensure that the council procures good quality services for both the older and younger population groups in need of support.

The provision of these services enables both age groups to be supported to live independently within the community and within their own homes. Provision of social care within an individual's own home prevents admission into long term residential care and has been shown to have better outcomes for the health and well-being of those supported.

Alternatives and mitigating actions which have been considered in order to reduce negative effect:

Describe the Mitigating Action

There are currently some gaps in the recording of data in particular for floating support services. The inclusion of these services within the new DPS brings them in to a formal contractual framework consistent with the approach used for other services. This will help address quality and safety issues and improve data recording. All packages/placements will be purchased via Mosaic and therefore demographic information will be consistently recorded and monitored.

It is proposed to use a zoning approach for the purchasing of domiciliary care packages. In developing this approach consideration will be given to the variations in age profiles across wards in the borough to ensure needs are being met.

Services will be monitored throughout the duration of the contract to ensure they meet needs. This will include undertaking satisfaction surveys. Service user input will also be gathered to support the development of service specifications.

DISABILITY: A person has a disability if s/he has a physical, mental or sensory impairment which has a substantial and long term adverse effect on their ability to carry out normal day to day activities¹.

State whether the impact is positive, negative, a combination of both, or neutral:

Describe the Impact: Positive

¹ Due regard to meeting the needs of people with disabilities involves taking steps to take account of their disabilities and may involve making reasonable adjustments and prioritizing certain groups of disabled people on the basis that they are particularly affected by the proposal.

All recipients of social care services have a disability or limiting long-term health condition. This could be a physical, sensory, learning disability, mental health need etc. The type of disability is identified on Mosaic by primary support need.

Domiciliary care by primary support need:

Adults: Physical support: 82% Mental health: 9% Learning disability: 5% Memory and cognition: 3% Other: 0.3%

Children:

All children's care packages are raised by the children's with disabilities team. Where recorded the majority of packages relate to physical support.

Extra care: Primary support need of residents within extra care; Learning disability: 12% Mental health: 7% Physical support: 75% Memory and cognition: 6%

<u>Day opportunities</u>: Learning disability: 55% Memory and cognition: 45%

Floating support: Data currently unavailable.

Census data 2011 indicates: 14% of the population have a limiting long-term illness. There are variations across the borough between wards with the highest proportions of people with limiting long-term health problems and disabilities compared to those with the lowest. At the two extremes there are 2,210 people in Dormers Wells (14.2%) compared to 1,542 people in Southfield (9.4%) (Source: Census 2021)

The overall impact on this group is likely to be positive as these services are designed and procured to specifically meet the needs of this group. A recent service user satisfaction survey indicated that 92% were satisfied with their care provider. The DPS will help to continue to ensure that the council procures good quality services for all social care users with a disability or long-term health condition in need of support. The provision of these services enables this group to be supported to live independently within the community and within their own homes. Provision of social care within an individual's own homes prevents admission into long term residential care and has been shown to have better outcomes for the health and well-being of those supported.

Alternatives and mitigating actions which have been considered in order to reduce negative effect:

Describe the Mitigating Action

There are currently some gaps in the recording of data in particular for floating support services. The inclusion of these services within the new DPS brings them in to a formal contractual framework

consistent with the approach used for other services. This will help address quality and safety issues and improve data recording. All packages/placements will be purchased via Mosaic and therefore demographic information will be consistently recorded and monitored.

It is proposed to use a zoning approach for the purchasing of domiciliary care packages. In developing this approach consideration will be given to the variations across the borough between wards to ensure needs are being met.

Services will be monitored throughout the duration of the contract to ensure they meet needs. This will include undertaking satisfaction surveys. Service user input will also be undertaken to support the development of service specifications.

GENDER REASSIGNMENT: This is the process of transitioning from one sex to another. This includes persons who consider themselves to be trans, transgender and transsexual.

State whether the impact is positive, negative, a combination of both, or neutral: Describe the Impact: Neutral

Data currently unavailable for all service areas.

The impact on this group is unknown as there is currently no data available. The provision of services to be provided under the new DPS is likely however to have a positive impact as these services respond to individual assessed need using a person-centered approach for assessment and delivery of services. These services are designed to enable individuals to be supported to live independently within the community and within their own homes. Provision of social care within an individual's own homes prevents admission into long term residential care and has been shown to have better outcomes for the health and well-being of those supported.

Alternatives and mitigating actions which have been considered in order to reduce negative effect:

Describe the Mitigating Action

There is a need to improve the capture and recording of data for this group. Current processes will be reviewed with all teams to make improvements in this area.

Service specifications will be developed for all service categories under the DPS. Service specifications will set out requirements for providers to ensure equity of access for all groups taking in to account their specific needs.

Providers will be expected to have relevant policies and procedures in place to ensure residents are treated with respect and dignity. This includes an Equal Opportunities policy and Privacy and Dignity policy. Service monitoring will ensure that providers are acting in accordance with these policies to ensure the needs of all groups with a protected characteristic are met.

RACE: A group of people defined by their colour, nationality (including citizenship), ethnic or national origins or race.

State whether the impact is positive, negative, a combination of both, or neutral:

Describe the Impact: Positive

The profile of current social care service users as identified on Mosaic are:

Domiciliary care:

Adults

Asian or Asian British	29%
Black or Black British	17%
Mixed	2%
Not Stated	1%
Other	4%
White	47%

Childrens

Asian or Asian British	37%
Black or Black British	31%
Mixed	10%
Other	8%
White	14%

Extra care:

Asian or Asian British	21%
Black or Black British	6%
Mixed	15%
Other	8%
White	50%

Day opportunities:

Asian or Asian British: 45% Black or Black British: 16% Mixed: 2% Other: 3% White: 24% Not known: 10%

Floating support: Data currently unavailable.

Census data 2011 shows that the ethnicity breakdown for the general population is: White 49% Mixed 4.5% Asian or Asian British 29.7% Black or Black British 10.9% Arab or other 6%

At the time of the Census over half (50.8%) of the usual residents of Ealing were born outside of the UK. There has been a notable increase in people born in Europe but outside of the EU (up by 69%, those from the Middle East and Asia (19%) the Americas and the Caribbean (10%). The most common main languages in Ealing, other than English, were Punjabi (4.9%), Polish (4.4%) and Arabic (2.5%).

The ethnicity of school children in Ealing indicates 84.4% of pupils are classified as being of minority ethnic origin. This breaks down as 28% White; 30% Asian or Asian British; 13.9% Black or Black British; 9.1% Mixed; 16% other. The profile of children accessing domiciliary care reflects the ethnicity within the general population for the White and Asian groups however there is a greater proportion of Black children compared to the proportion within the general population.

Current users of adult domiciliary care services broadly reflect the proportions within the general population. There are higher proportions from the Asian/Asian British group accessing day opportunities compared to the general population.

The overall impact on this group is likely to be positive. Current service users represent a wide crosssection of the community and satisfaction surveys and user consultation feedback indicates high levels of satisfaction with the care received. The procurement of the new DPS will take into account service user feedback and this will be used to inform the development of service specifications across all categories.

The provision of services to be provided within the DPS enables this group to be supported to live independently within the community and within their own homes. Provision of social care within an individual's own homes prevents admission into long term residential care and has been shown to have better outcomes for the health and well-being of those supported.

Alternatives and mitigating actions which have been considered in order to reduce negative effect:

Describe the Mitigating Action

There are currently some gaps in the recording of data in particular for floating support services. The inclusion of these services within the new DPS brings them in to a formal contractual framework consistent with the approach used for other services. This will help address quality and safety issues and improve data recording. All packages/placements will be purchased via Mosaic and therefore demographic information will be consistently recorded and monitored.

Service specifications for all services will be drafted and will set out requirements that providers address the diverse needs of Ealing's population including cultural, religious and language needs. Providers will be expected to understand and respond to the diversity of Ealing at both borough-wide and ward level.

The proposal to adopt a zoning approach to this procurement will take in to account the variations at ward level to ensure there is equity of access to services.

RELIGION & BELIEF: Religion means any religion. Belief includes religious and philosophical beliefs including lack of belief (for example, Atheism). Generally, a belief should affect a person's life choices or the way you live for it to be included.

State whether the impact is positive, negative, a combination of both, or neutral:
Describe the Impact: Neutral

Domiciliary care: Adults: Christian: 24% Hindu: 5% Muslim: 10% Sikh: 8% Not known: 52%

Children: Data currently unavailable.

Extra care: Christian: 39% Hindu: 3% Muslim: 0% Sikh: 2% No religion: 6% Other: 1% Not known: 48%

Day opportunities: Data currently unavailable.

Floating support: Data currently unavailable.

Census data indicates that Christianity remains the most common religion in Ealing (37.8%). 'No religion' was the second most common response (38%) The next largest group described themselves as Muslim, an increase of 30% on 2011 figures, making up 18.8% of Ealing's total population. Both Sikh and Hindu categories each make up nearly 8% of residents. 1.1% and 0.3% of residents described their religion as 'Buddhist' and 'Jewish' respectively, having seen a decline in proportion over 10 years.

There are significant gaps in recorded data for this protected characteristic across all service categories therefore the impact on this group is unknown. Whilst data for this group is incomplete it is anticipated that the overall impact on this group is likely to be positive as the provision of these services are designed around the needs of users using a person-centered approach and assessment of individual need. These services enable all groups to be supported to live independently within the community and within their own homes. Provision of social care within an individual's own homes prevents admission into long term residential care and has been shown to have better outcomes for the health and well-being of those supported.

Alternatives and mitigating actions which have been considered in order to reduce negative effect:

Describe the Mitigating Action

There are currently some gaps in the recording of data for this group. There is a need to improve the capture and recording of data for this group. Current processes will be reviewed with all teams to

make improvements in this area. The inclusion of day opportunities and floating support services within the new DPS brings them in to a formal contractual framework consistent with the approach used for other services. This will help address quality and safety issues and improve data recording. All packages/placements will be purchased via Mosaic and therefore demographic information will be consistently recorded and monitored.

Service specifications for all services will require providers to address the diverse needs of Ealing's population including cultural, religious and language needs. Providers will be expected to understand and respond to the diversity of Ealing at both borough-wide and ward level. Services will be monitored throughout the duration of the contract including on how well they meet the needs of service users.

The proposal to adopt a zoning approach to this procurement will take in to account the variations at ward level to ensure there is equity of access to services.

SEX: Someone being a man or a woman.

State whether the impact is positive, negative, a combination of both, or neutral:

Describe the Impact: Positive

Current Mosaic data on the sex of individuals receiving the following services is as follows:

Domiciliary care: Adults: Male 47%; Female 53% Children: Male 70%; Female 30%

<u>Extra care</u>: Male 48%; Female 52%

Day opportunities (both in-house and external provision): Male 41%; Female 52%; Unknown 7%

Floating support: Data currently unavailable.

Census data 2021 indicates that women make up 51% of the overall population and 49% are men.

Ealing's life expectancy has increased for both male and females but the disability-free life expectancy for females has not increased, suggesting women are living longer but with a greater proportion of their lives with a disability.

The proportion of male and female service users across each adult category is broadly reflective of the general population. There is a higher proportion of male children in receipt of domiciliary care than the numbers in the general population.

The overall impact on this group is likely to be positive as the provision of these services enables both males and females to be supported to live independently within the community and within their own homes. Provision of social care within an individual's own homes prevents admission into long term

residential care and has been shown to have better outcomes for the health and well-being of those supported.

Alternatives and mitigating actions which have been considered in order to reduce negative effect:

Describe the Mitigating Action

There are currently some gaps in the recording of data in particular for floating support services. The inclusion of these services within the new DPS brings them in to a formal contractual framework consistent with the approach used for other services. This will help address quality and safety issues and improve data recording. All packages/placements will be purchased via Mosaic and therefore demographic information will be consistently recorded and monitored.

Service specifications will be developed for all services and will set out requirements on providers to address the diverse needs of Ealing's population. Providers will be expected to understand and respond to the diversity of Ealing at both borough-wide and ward level.

The proposal to adopt a zoning approach to this procurement will take in to account the variations at ward level to ensure there is equity of access to services.

SEXUAL ORIENTATION: A person's sexual attraction towards his or her own sex, the opposite sex or to both sexes, covering including all LGBTQ+ groups.

State whether the impact is positive, negative, a combination of both, or neutral:

Describe the Impact: Neutral

Data currently unavailable for all service areas.

The impact on this group is unknown as there is currently no data available. The provision of services to be provided under the new DPS is likely however to have a positive impact as provision of services is based on individual assessed need using a person-centered approach. These services enable all groups to be supported to live independently within the community and within their own homes. Provision of social care within an individual's own homes prevents admission into long term residential care and has been shown to have better outcomes for the health and well-being of those supported.

Alternatives and mitigating actions which have been considered in order to reduce negative effect:

Describe the Mitigating Action

There is a need to improve the capture and recording of data for this group. Current processes will be reviewed with all teams to make improvements in this area.

Service specifications will be developed for all service categories under the DPS. Service specifications will set out requirements for providers to ensure equity of access for all groups taking in to account their specific needs.

Providers will be expected to have relevant policies and procedures in place to ensure residents are treated with respect and dignity. This includes an Equal Opportunities policy and Privacy and Dignity policy. Service monitoring will ensure that providers are acting in accordance with these policies to ensure the needs of all groups with a protected characteristic are met.

PREGNANCY & MATERNITY: Description: Pregnancy: Being pregnant. Maternity: The period after giving birth - linked to maternity leave in the employment context. In the non-work context, protection against maternity discrimination is for 26 weeks after giving birth, including as a result of breastfeeding.

State whether the impact is positive, negative, a combination of both, or neutral:

Describe the Impact: Neutral

Data currently unavailable for all service areas.

The impact on this group is unknown as there is currently no data available. The provision of services to be provided under the new DPS is however likely to have a positive impact as the provision of services is based on individual assessed need using a person-centered approach. These services enable all groups to be supported to live independently within the community and within their own homes. Provision of social care within an individual's own homes prevents admission into long term residential care and has been shown to have better outcomes for the health and well-being of those supported.

Alternatives and mitigating actions which have been considered in order to reduce negative effect:

Describe the Mitigating Action

There is a need to improve the capture and recording of data for this group. Current processes will be reviewed with all teams to make improvements in this area.

Service specifications will be developed for all service categories under the DPS. Service specifications will set out requirements for providers to ensure equity of access for all groups taking in to account their specific needs.

Providers will be expected to have relevant policies and procedures in place to ensure residents are treated with respect and dignity. This includes an Equal Opportunities policy and Privacy and Dignity policy. Service monitoring will ensure that providers are acting in accordance with these policies to ensure the needs of all groups with a protected characteristic are met.

MARRIAGE & CIVIL PARTNERSHIP: *Marriage: A union between a man and a woman. or of the same sex, which is legally recognised in the UK as a marriage*

Civil partnership: Civil partners must be treated the same as married couples on a range of legal matters.

State whether the impact is positive, negative, a combination of both, or neutral:

Describe the Impact: Neutral

Data currently unavailable for all service areas.

The impact on this group is unknown as there is currently no data available. The provision of services to be provided under the new DPS is likely however to be positive as the provision of these services is based on individual assessed need using a person-centered approach. These services enable this group to be supported to live independently within the community and within their own homes.

Provision of social care within an individual's own homes prevents admission into long term residential care and has been shown to have better outcomes for the health and well-being of those supported.

Alternatives and mitigating actions which have been considered in order to reduce negative effect:

Describe the Mitigating Action

There is a need to improve the capture and recording of data for this group. Current processes will be reviewed with all teams to make improvements in this area.

Service specifications will be developed for all service categories under the DPS. Service specifications will set out requirements for providers to ensure equity of access for all groups taking in to account their specific needs.

Providers will be expected to have relevant policies and procedures in place to ensure residents are treated with respect and dignity. This includes an Equal Opportunities policy and Privacy and Dignity policy. Service monitoring will ensure that providers are acting in accordance with these policies to ensure the needs of all groups with a protected characteristic are met.

3. Human Rights²

4a. Does your proposal impact on Human Rights as defined by the Human Rights Act 1998?

 $\mathsf{Yes} \Box \checkmark \mathsf{No} \Box$

These proposals support human rights as defined by the Human Rights Act 1998 including article 8 right to respect for private and family life and article 14 prohibition of discrimination.

4b. Does your proposal impact on the rights of children as defined by the UN Convention on the Rights of the Child?

Yes □✓ No □

These proposals support the rights of children as defined by the UN convention on the rights of the child. In particular article 23 – children with disabilities. Children who have any kind of disability have the right to special care and support, as well as the rights in the Convention, so that they can live full and independent lives.

4c. Does your proposal impact on the rights of persons with disabilities as defined by the UN Convention on the rights of persons with disabilities?

Yes $\Box \checkmark$ No \Box

These proposals support the rights of persons with disabilities as defined by the UN convention on the rights of persons with disabilities. Including article 10 that persons with disabilities enjoy their inherent right to life on an equal basis with others.

4. Conclusion

² For further guidance please refer to the Human Rights & URNC Guidance on the Council Equalities web page.

The overall impact of these proposals is likely to be positive for the protected characteristics age (both older and younger groups), disability, race and sex. The overall impact for the protected characteristics gender reassignment, religion and belief, sexual orientation, pregnancy and maternity and marriage and civil partnerships is unknown as there are gaps in the data available to assess impact.

The following mitigation actions have been identified:

- 1. Social care to review current processes to improve the capture and recording of data for the protected characteristics identified above.
- 2. To undertake service user engagement to help inform the development of service specifications to reflect the needs of all groups.
- 3. To develop service specifications for all categories that set out requirements on providers to ensure equity of access for all groups taking in to account their specific needs.
- 4. Entry criteria on to the DPS will set out requirements for providers to have relevant policies and procedures in place to ensure residents are treated with respect and dignity.
- 5. Undertake service monitoring to ensure that providers are acting in accordance with these policies and ensure the needs of all groups with a protected characteristic are met.

4a. What evidence, data sources and intelligence did you use to assess the potential impact/effect of your proposal? Please note the systems/processes you used to collect the data that has helped inform your proposal. Please list the file paths and/or relevant web links to the information you have described.

Data from Mosaic Census data 2021 Ealing Homecare DPS service provider satisfaction survey 2022-23 Accommodation for adults with eligible care needs, Altair report 2023 Learning Disability strategy and EAA 2023 Ealing JSNA 2021 population characteristics

5. Action Planning: (What are the next steps for the proposal please list i.e. when it comes into effect, when mitigating actions linked to the protected characteristics above will take place, how you will measure impact etc.)

Action	Outcomes	Success Measures	Timescales/ Milestones	Lead Officer (Contact Details)
Report to Cabinet	Approval to procure DPS	Cabinet approval received.	6 March 2024	Kashmir Takhar
Undertake service user engagement	Gather feedback to inform service specifications	Number of service users engaged	March-April 2024	Kashmir Takhar Gordon Crighton Emmanuel Anatsui Elijah Collins
Development of service specifications, entry	Service specifications developed for all service categories.	Clear, comprehensive specifications developed	June 2024	As above

tender documents				
Issue ITT	ITT published	Applications to join the DPS	September 2024	As above Craig McDowell
Evaluation of tenders	Completion of evaluations	Evaluations completed within timeframe	Oct-Nov 2024	As above
Inform applicants of outcome	Tenderers notified of outcome of application	Notifications send out within timeframe	December 2024	As above
Start of contract	Contract starts	Contract start date met.	April 2025	As above
Review data capture and recording with teams	Data recording improved	Improved demographic data recording	April 2025 onwards	Heads of service / Team Managers
Service monitoring	Monitoring of service outcomes	Completion of service monitoring	April 2025 onwards	Gordon Crighton

6. Sign off: (All EAA's must be signed off once completed)

Completing Officer Sign Off:	Service Director Sign Off:	HR related proposal (Signed off by directorate HR officer)
Signed: Kaslmir Takhar	Signed:	Signed:
		Name (Block Capitals):
Name (Block Capitals):		
Kashmir Takhar	Name (Block Capitals):	
	Kerry Stevens	Date:
Date: 20 February 2024		
	Date: 20 February 2024	
For EAA's relating to Cabinet deci	isions: received by Committee S	Section for publication by (date):

Appendix 1: Legal obligations under Section 149 of the Equality Act 2010:

- As a public authority we must have due regard to the need to:
 - a) Eliminate discrimination, harassment, victimisation and any other conduct that is prohibited by or under this Act;
 - b) Advance equality of opportunity between persons who share a relevant protected characteristic and persons who do not share it;
 - c) Foster good relations between persons who share a relevant protected characteristic and persons who do not share it.
- The protected characteristics are: AGE, DISABILITY, GENDER REASSIGNMENT, RACE, RELIGION & BELIEF, SEX, SEXUAL ORIENTATION, PREGNANCY & MATERNITY, MARRIAGE & CIVIL PARTNERSHIP
- Having due regard to advancing equality of opportunity between those who share a protected characteristic and those who do not, involves considering the need to:
 - a) Remove or minimising disadvantages suffered by persons who share a relevant protected characteristic that are connected to that characteristic
 - b) Take steps to meet the needs of persons who share a relevant characteristic that are different from the needs of the persons who do not share it.
 - c) Encourage persons who share a relevant protected characteristic to participate in public life or in any other activity in which participation by such persons is disproportionately low.
- Having due regard to fostering good relations between persons who share a relevant protected characteristic and persons who do not, involves showing that you are tackling prejudice and promoting understanding.
- Complying with the duties may involve treating some people more favourably than others; but this should not be taken as permitting conduct that would be otherwise prohibited under the Act.