

Equality & Human Rights Impact Assessment (EHRIA)

This Equality and Human Rights Impact Assessment (EHRIA) will enable you to assess the **new**, **proposed or significantly changed** policy/ practice/ procedure/ function/ service** for equality and human rights implications.

Undertaking this assessment will help you to identify whether or not this policy/practice/ procedure/ function/ service** may have an adverse impact on a particular community or group of people. It will ultimately ensure that as an Authority we do not discriminate and we are able to promote equality, diversity and human rights.

Before completing this form please refer to the EHRIA <u>guidance</u>, for further information about undertaking and completing the assessment. For further advice and guidance, please contact your <u>Departmental Equalities Group</u> or <u>equality@leics.gov.uk</u>

**Please note: The term 'policy' will be used throughout this assessment as shorthand for policy, practice, procedure, function or service.

Key	y Details
Name of policy being assessed:	Prevention Services – Social Groups including Lunch Clubs Monday Club, Stroke Clubs Albert Street Artists Next Generation
Department and section:	Strategic Planning and Commissioning
Name of lead officer/ job title and others completing this assessment:	Amanda Price Carin Davies
	Martin Hall
Contact telephone numbers:	0116 3057364 0116 3050365 0116 3053623
Name of officer/s responsible for implementing this policy:	Strategic Planning & Commissioning Officers; Ian Mellor, Carin Davies, Louise Melbourne, Martin Hall and Amisha Chauhan
Date EHRIA assessment started:	EHRIA process started: 26th February 2014 Reviewed following consultation: 14th July 2014

5th August 2014

Section 1: Defining the policy

Section 1: Defining the policy

You should begin this assessment by defining and outlining the scope of this policy. You should consider the impact or likely impact of the policy in relation to all areas of equality, diversity and human rights, as outlined in Leicestershire County Council's Equality Strategy.

1 What is new or changed in this policy? What has changed and why?

Background

The Strategic Planning and Commissioning Team have led on a review of the Adults and Communities Department's prevention services, with assistance from the Department's Market Development and Compliance teams (henceforth known as 'the review team'). Services included in the review were defined as 'early intervention and prevention services' in a report to Cabinet in June 2013. All of the contracts for these services were extended up to a maximum of 30th September 2015 in order to allow sufficient time for the prevention review and to ensure an overarching 'prevention offer'. Delivery of this prevention model is also set against savings targets set in the Medium Term Financial Strategy (MTFS) 2014-2018. It is important to note that current service provision under these contracts will cease in 2015 and be replaced by a new prevention offer (as described below).

Details of the proposed prevention offer were submitted to Cabinet in April 2014 and permission granted by Cabinet to consult on future commissioning options. Accordingly, a formal public consultation exercise on this prevention offer was carried out 14th April – 13th July 2014. The findings of the consultation have been used to further inform the prevention offer and specific commissioning options for individual service groupings that fall within this wider prevention offer. This EHRIA forms one of a series, each dealing with the impacts of these individual service groupings (e.g. older people, other vulnerable people and so on). Each EHRIA will provide detail on proposed changes to service delivery for each of the main service groups included within the review and will explore the impacts of these changes in relation to the Human Rights Act and Equalities Act. They will also reflect on how proposed elements of service delivery will contribute to the overall prevention model. All of the EHRIAs will be published in conjunction with a further Cabinet report in September 2014 which will provide members with the findings of the prevention review and public consultation and will make recommendations about the future of the prevention offer.

As stated above, the prevention review includes a wide range of services, including services broadly grouped as Social Groups such as Lunch clubs f primarily for older

people, The Monday Club, Stroke clubs, Albert Street Artist's and Next Generation. It is this cohort of service users accessing these services, as well as those who may choose to use them in the future that is the focus of this EHRIA.

Monday Club (1 club)

Aims to provide a supportive social environment for People with Asperger's aged 18 to 64 to meet in mainstream settings and participate in community activities.

Lunch clubs (Approximately 59 clubs)

Lunch Clubs provide a central location for social interaction and a low cost nutritional meal for older people. The aim of Lunch Clubs is to prevent loneliness and encourage friendships. Conduit for a wide range of health & Social Care information.

Stroke Clubs (4 clubs)

Provide a social club service for those who are suffering from the effects of a stroke, to enable them to socialise and participate in light activities.

Albert Street Artist's (1 club)

Set up as a self-help group for people with a mental health condition. ASAS themselves set out their aims and objectives as follows: to provide self-initiated study; a supportive environment; commitment to the local community and improvement of the perceived notions of mental health issues.

These services have a number of shared outcomes:

- Targeted information and advice
- Prevention of isolation / loneliness
- Improved quality of life
- Peer support
- Facilitate recreational activities
- Addressing social exclusion
- Promoting independence
- Break for carers

Next Generation (1 group)

Supporting young people (Hard to reach younger people) into employment the service conducts self-esteem building, CV writing and support with employment matters.

It should be noted for the majority of these services there is very limited contract monitoring data available, which is not necessarily the fault of the provider (for instance, it may reflect contract monitoring procedure permitted by the Department). This can make assessing the service in terms of equalities and human rights difficult. We have taken steps to gather as much monitoring data that is available and this has been enhanced with local and national research. The funding arrangements, which can relate to the quantity and quality requirements for monitoring data, are particularly complex and in relation to Lunch Clubs, for example, and this is were much of our attention has been focused. We have a variety of commissioned and non-commissioned providers providing a range of services

Countywide.

Prior to giving specific information about the proposed commissioning for Social Groups it is important to provide summary of the overall secondary prevention offer. This will provide some context for the proposed changes to current service delivery for the Adults and Communities prevention services as a whole and changes to service delivery for other vulnerable people.

The development of a new secondary prevention offer reflects a longer-term strategic vision, with an emphasis upon aligning services to need and a move towards a robust outcomes framework underlying all commissioning activity. It also reflects savings required against prevention services as set out in the MTFS, 2014-2018. The main focus of the prevention offer is 'secondary prevention' as defined by Public Health (2012): "aimed at identifying people at risk and halting or slowing down any deterioration. Interventions are aimed at identifying people at risk of specific health conditions or events (such as strokes or falls) or those that have existing low level social care needs". Full details of the prevention offer can be found in the April Cabinet report –

http://politics.leics.gov.uk/ieListDocuments.aspx?Cld=135&Mld=3989&Ver=4

Proposed Changes

The core focus of this element is the provision of social groups (offering a safe environment in which to meet, receive and provide peer support, information and advice, and address social isolation). This is reflective of the consultation feedback, with people valuing highly the current support they receive. The proposal also incorporates social groups for carers, people with dementia (i.e. memory cafes) and adults with mental health needs all of which have been subject to separate reviews, but form part of this element of the secondary prevention offer.

The review has focussed on lunch clubs and social groups for people specific conditions e.g. Stroke clubs. It is proposed to re-invest £100,000 in social groups. It is proposed to ring fence part of the budget for specialist social groups; this protection of funding for specialist provision reflects consultation feedback received from providers regarding the loss of specialist support.

It is proposed to establish a Social Group fund utilising a grant approach, awarding grants on a two year cycle. The fund will complement the Departments existing Innovation Fund and the Councils Shire Grants. The key difference between the Social Group fund and the other fund is the focus on secondary prevention; existing social groups can apply for funding as well as new group .The key outcomes groups need to address are:

- Preventing or reducing the need for social care support
- Reducing the risks of social isolation
- Facilitating the provision of peer support
- Facilitating or providing information and advice
- Encouraging community connections and social networks within the group and outside the group.

It is recommend that the Department manages the fund to ensure that we maximise the use and therefore value of the fund particularly in relation to the Innovation fund and Shire Grants and that there is equitable and where required targeted provision and to avoid duplication of provision.

Whilst there is re-investment in social groups this is a reduction in funding and therefore there will be an impact on some existing groups. The grant criteria will be one of the key ways of addressing the short fall. For example it is not possible or equitable to sustain the current meal subsidy therefore this will not form part of the grant criteria. This will have an impact on people currently attending social groups. Consultation on the Meal Services review has run in parallel to the prevention review however changes regarding Lunch clubs have been addressed through this review.

The review team will work with existing groups/ providers supporting those that wish to continue to make an application and for groups that no longer wish to continue to advice and information regarding alternative provision and support.

Does this relate to any other policy within your department, the Council or with other partner organisations? *If yes, please reference the relevant policy or EHRIA. If unknown, further investigation may be required.*

The development of the Adults and Communities Secondary Prevention offer forms part of a wider unified prevention offer for Leicestershire's Communities that has been developed as part of the Better Care Fund. The Better Care Fund (formerly the Integration Transformation Fund) is a single pooled budget to support health and social care services to work more closely together in local areas. It forms an important element of strategic planning in both health and social care. In Leicestershire part of the Better Care Fund will be invested in a unified prevention offer, including funding for Local Area Coordination. The intention is that by 2018 there will be a comprehensive offer for community-based prevention for the citizens of Leicestershire, bringing together all the resources available to Local Councils and the NHS. Commissioning options arising out of the prevention review and departmental prevention offer have been developed to be aligned with and form part of this unified prevention offer, in particular Local Area Coordination.

Throughout the review process it has been recognised that the scale of the proposed changes has the potential to impact on a range of services commissioned or offered by the department (both adult social care and communities and wellbeing). These impacts could be varied, including:

- If successful, the secondary prevention offer could lead to a reduction in demand and future pressure on budgets and services such as residential and domiciliary care and carer's services.
- It has been identified that a number of existing housing related support services need to be aligned with the care pathway as the individuals currently

accessing the services are eligible for adult social care support.

The development of a new secondary prevention offer is also accepted to have implications for partners. Indeed, the contribution of partner agencies and organisations, either directly or indirectly through their own commissioning activity is considered essential to the success of the Departmental and wider unified prevention offer. Discussions with partner organisations have therefore been essential during the review process and public consultation to establish a partnership approach to the development of commissioning options for the Departmental prevention offer.

Community meals are meals services provided to individuals through lunch clubs and day services. Commissioned meals are meals services provided directly to individuals as part of their adult social care services.

The charges for some non-residential care services (i.e. community meals and Commissioned meals) are currently subsidised by the County Council whilst other services (i.e. personal budgets and home care) are not subsidised. People subject to Section 117 of the Mental Health Act 1983 are not currently asked to contribute towards meals services. The Council needs to review its charges in order to ensure that the charging policy continues to be applied fairly and equitably. Community meals charges should be exempted from a means test which is justified because meals are different from other care services. All people, irrespective of whether they need care and support require meals, and can reasonably be expected to make a full contribution towards the cost of the meal; this includes people subject to Section 117 of the Mental Health Act 1983. The financial impact of removing the subsidy for all meals services is included in the MTFS 2014/15–2015/16.

Consultation on the Meal Services review has run in parallel to the prevention review however changes regarding Lunch clubs have been considered through the prevention review. There will be further development of the grant criteria, however given the reduction in funding and the proposed removal of the current meal subsidy meals costs will not form part of the grant criteria. The majority of people currently accessing lunch clubs that participated in the prevention consultation said they did not want the cost of meals to go up.

However this does not mean that Lunch Clubs will not be able to provide food just that with the removal of the meal subsidy will potentially increase cost per person. Groups can find alternative options regarding the provision of food. If services provided by LCC are chargeable Service Users are subject to a Fairer Charging Assessment. This means that no one would be expected to contribute more than they can afford and specific disregards ensure that remaining income levels exceed national figures based on what the law allows people to live on.

Who are the people/ groups (target groups) affected and what is the intended change or outcome for them?

The secondary prevention review and commissioning options for the Departmental prevention offer have the potential to affect anybody living in Leicestershire aged 18 years or over (i.e. of adult age). This is true of the whole review and specific options

for Social Groups

As described above, the purpose of the review was to develop a Departmental secondary prevention offer with an emphasis upon aligning services to need and a move towards a robust outcomes framework for all commissioning activity. This strategic shift is also set against the MTFS – the scale of required savings means that commissioning in a different way and at a reduced level of investment. Inevitably, this has the potential to impact upon on all individuals who currently access or would potential access prevention services.

Whilst there is a re-investment in social groups this is a reduction in funding and therefore there may be an impact on existing groups and thus on specific the people who currently access them, particularly for those with disabilities However there will be a transition plan to minimise the potential impact. The grant approach provides a fair and equitable way of managing the budget whilst addressing the reduction in funding. All applications will need to demonstrate that they are cost effective, sustainable, potentially self-sustaining and maximise community resources.

It is anticipated that some groups will take up the opportunity to bid for funding, some groups may choose not to bid and others may seek alternative sources of funding or make other arrangements. The review team will work with all existing groups either supporting them with the bidding process, supporting them if they no longer wish to continue or wish to seek alternative arrangements and with developing a transition plan for the group and individuals accessing the groups .The review team will also work with new organisations who may choose to bid although it is acknowledged that this may have an impact of the funding for existing groups. It may not though have an impact of the overall provision of social groups and people accessing current groups could also access new groups.

Will this policy meet the Equality Act 2010 requirements to have due regard to the need to meet any of the following aspects? (Please tick and explain how)

	Yes	No	How?
Eliminate unlawful discrimination, harassment and victimisation	X		The review process (including the strategic review of existing service provision, formal public consultation and discussions with stakeholders and partner organisations) has enabled a good overview of preventative services – in terms of determinants, interventions that help aid recovery, and to establish what service provision is most likely to benefit the people of Leicestershire in a way that is cost-effective to the department. It has also enabled identification of those groups and individuals who are likely to benefit from the proposed commissioning intentions. Conversely, it has also allowed consideration of any groups or individuals who might be adversely affected by the proposals and to

		establish what mitigating actions are
		required to enable them to access other support and services.
Advance equality of opportunity between different groups	Х	As above. There will be clear grant criteria for the social care fund with transparent and fair awarding processes. In addition the new funding mechanism will include the opportunity for different groups to be supported appropriately in the completion of the new funding applications.
Foster good relations between different groups	X	As above. In addition, the review process has also sought to establish community opportunities for those experiencing problems and using the services to access preventative services alongside other community-based/universal services. This has the potential to encourage community cohesion and develop relations between different groups. There will be clear grant criteria for the social care fund with transparent and fair awarding processes. In addition the new funding mechanism will include the opportunity for different groups to be supported appropriately in the completion of the new funding applications. Where there are opportunities for partnerships and joint working these will be supported

Section 2: Equality and Human Rights Impact Assessment (EHRIA) Screening

Section 2: Equality and Human Rights Impact Assessment Screening

The purpose of this section of the assessment is to help you decide if a full EHRIA is required.

If you have already identified that a full EHRIA is needed for this policy/ practice/ procedure/ function/ service, either via service planning processes or other means, then please go straight to Section 3 on Page 7 of this document.

Section 2

A: Research and Consultation

5.	Have the target groups been consulted about the following?	Yes	No*
	a) their current needs and aspirations and what is important to them;	х	
	b) any potential impact of this change on them (positive and	Х	
	negative, intended and unintended);	×	
	c) potential barriers they may face		
6.	If the target groups have not been consulted directly, have representatives been consulted or research explored (e.g. Equality Mapping)?	A formal public consultation exercise was conducted (April to July 2014). The consultation documents (including information sheet and questionnaire) were accessible to the target groups (including current customers), the general public, providers and stakeholders. Specific events were also held with customers, providers and stakeholders as part of the review process and the consultation period. In addition, research into prevention services and the role of preventative services has been undertaken throughout the review process to inform decision making and commissioning proposals. The consultation process was subject to the Department's Research Governance Framework (RGF) to ensure that the process was carried out to high standards in line with national guidance on health and social care research as set out by the Department of Health (2010)	
7.	Have other stakeholder groups/	()	

secondary groups (e.g. carers of service users) been explored in terms of potential unintended impacts?	Х
The state of the s	

*If you answered 'no' to the question above, please use the space below to outline what consultation you are planning to undertake, or why you do not consider it to be necessary.

Provider workshops were held in January and February 2014. Providers were also asked to complete a questionnaire to seek further contractual information. In addition, providers were given the opportunity to have a one to one with Commissioning Officers. Results of the consultations/workshop assisted Commissioning Officers to shape the future of the Prevention model, and what services shall be required in the future.

Officers of the Council shall also be carrying out Public Consultation from Mid April to Mid July 2014, to give them opportunity to comment on the proposed models. The consultation will inform final commissioning options for the future of preventative services in the County.

There has been a local Social Return On Investment evaluation of community meals which included lunch clubs. This was undertaken by Leicestershire County Councils Research and insight team. Lunch club attendees were engaged through a number of small focus groups. This allowed users to discuss various aspects of the service. In total 10 people were involved in answering questions around the value of the service.

All of these previous consultations have been taken in to account as part of the prevention review process and production of this EHRIA.

9.	Are there systems set up to:	Yes	No
	 a) monitor impact (positive and negative, intended and unintended) for different groups; b) enable open feedback and suggestions from different communities 		Monitoring data for these groups has historically been poor due to adhoc contract extensions/changes over a long period of time. The new mode going forward would standardise the monitoring data for these groups and include the appropriate data required

Note: If no to Question 8, you will need to ensure that monitoring systems are established to check for impact on the protected characteristics.

Section 2

C: Potential Impact

10.

Use the table below to specify if any individuals or community groups who identify with any of the 'protected characteristics' may potentially be affected by this policy and describe any positive and negative impacts, including any barriers.

	Vaa	NIA	Comments
	Yes	No	Comments
Age	X		Currently the 3 stroke clubs and Albert Street Artists are open to all age groups; as it is commissioned by the Adults and Communities department this means all adults aged 18 and above. The existing services do not therefore discriminate against adults by age. This is confirmed by most recently available contract monitoring data for Stroke Clubs (from Quarter 3, 2013/14) which show a range of ages accessing the service (ranging from 18-85years). There is no robust contract monitoring data available for Albert Street
			Artists and therefore it is not possible to comment on the age of people accessing this service. However, the annual report for the service indicates membership across a range of ages. The Mental Health Foundations report, The
			Fundamental Facts, reports that mental ill health can affect individuals across all ages . This tells us that different groups accessing this provision could be any age, therefore it will be important not to have age restrictions . The funding going forward, in line with Adults and Communities, should be 18+.
			http://www.mentalhealth.org.uk/content/as sets/PDF/publications/fundamental facts 20 07.pdf?view=Standard
			Statistics available on POPPI confirm that the largest age range affected by stroke is 75 + .This tells us that any provision in the future should not have any age restrictions.
			http://www.poppi.org.uk/index.php?pageNo

=336&PHPSESSID=pprjfv73a8624bhhght0oo mdg6&sc=1&loc=8266&np=1

The Monday club is commissioned to support adults between 18- 64 age bands. Therefore there is some element of discrimination for adults aged 64+ This is confirmed by most recently available contract monitoring data for the service (from Quarter 2, 2013/14) which shows a range of ages accessing the service (ranging from 18-64years).

The age limit at 64 is not supported by the most recent evidence, on PANSI, which states that Autistic Spectrum Disorders are present across all age Ranges. The recent National Autistic Society's campaign "Autism and Ageing" highlights the under diagnosis of adults 65+ who may have not had access to diagnosis in earlier life.

http://www.pansi.org.uk/index.php?pageNo =392&PHPSESSID=pprjfv73a8624bhhght0oo mdg6&sc=1&loc=8266&np=1

http://www.autism.org.uk/ageing

This evidence tells us that any funding of Social Groups for adults with Autism/Asperger's Syndrome should be open to adults 18+ and with particular reference to the older age groups.

Next Generation support younger people therefore there is superficially some element of discrimination for older adults. However, this reflects service provision aimed at meeting the needs of a specific age group (i.e. younger people) and the extra support which younger people need to access work.

http://www.ons.gov.uk/ons/rel/lms/labourmarket-statistics/august-2014/statisticalbulletin.html#tab-12--Young-People-in-the-Labour-Market

This report has evidence which supports the disproportionate amount of young people

		unemployed within the overall unemployment figures However Lunch Clubs are aimed primarily at older people therefore there maybe superficially some element of discrimination for younger adults. However, this reflects service provision aimed at meeting the needs of a specific age group (i.e. older people). The proposed new model will prioritise those Social Groups which are designed for our target population , i.e. Older People 65+ , although as many are existing clubs they may well have members who are younger .The existing Specialist provision , which has a greater age range , would be able to bid for extra funding to recognise there speciality.
Disability	X	Social Groups are open to all, regardless of any disability. The Monday Club, Stroke Clubs and Albert Street Artists group focus on specific disabilities, but do not preclude other disabilities as, for example, adults may have co-morbid conditions such as anxiety and depression. The Monday Club supports people with Asperger's Syndrome; Albert Street Artist's supports people with a mental health condition. The existing services do not therefore discriminate against adults by disability. There is some evidence from the very limited contract data of attendance of social groups by people with other disabilities than the primary disability of the social group. Next Generation support younger adults some of which are identified as having a disability, it should be noted that there is very limited contract monitoring data. The proposed new model will allow for those clubs which are condition specific to bid, as well as new providers to establish new groups. This is particularly important as evidence

		shows that demand will remain in the future and potentially increase in Autism/Asperger's Syndrome http://www.pansi.org.uk/index.php?page=392&PHPSESSID=pprjfv73a8624bhhght0 mdg6≻=1&loc=8266&np=1 Stroke http://www.poppi.org.uk/index.php?page	<u>≥No</u> 000
		=336&PHPSESSID=pprjfv73a8624bhhght0 mdg6≻=1&loc=8266&np=1 Mental Health http://www.pansi.org.uk/index.php?page =402&PHPSESSID=pprjfv73a8624bhhght0 mdg6≻=1&loc=8266&np=1	<u>000</u>
Gender Reassignment	X	Current contract monitoring data (collecter as client records) for the service does not include detail about gender reassignment. However, it is accepted that there is the potential for some people accessing the service to have been through gender reassignment and that a person's decision access the service might be affected by the sexual orientation Consideration would not be given, in respect of the proposed nemodel, about this group. Consideration would need to be given in respect of low levels of funding and the need for robust monitoring data.	n to neir eed
Marriage and Civil Partnership	X	Current contract monitoring data (collected as client records) for the service does not include detail about marriage and civil partnership. However, it is accepted that some service users accessing the service is married or in a civil partnership and the person's decision to access the service mide affected by whether they are married in a civil partnership (such as social exclusion a feeling of being stigmatised).	may nat a ight or

		Overall it is acknowledged that the proposed reduction in funding for Social Groups (a 54% reduction to £100,000 on previous spend may mean a reduction in the number Social Groups across the County. This in turn may limit the numbers of people able to access this form of support, regardless of their status in relation to the protected characteristics. Consideration will need to be given to ways to mitigate against this potential reduction in capacity such as signposting to other provision.
Pregnancy and Maternity	X	Current contract monitoring data (collected as client records) for the service does not include detail about pregnancy and maternity. However, it is accepted that some service users accessing the service may be pregnant or have recently had a baby and that a person's decision to access the service might be affected by whether they are pregnant or have recently had a baby. Overall it is acknowledged that the proposed reduction in funding for Social Groups (a 54% reduction to £100,000 on previous spend) is likely to mean a reduction in the number Social Groups across the County. This in turn may limit the numbers of people able to access this form of support, regardless of their status in relation to the protected characteristics. Consideration will need to be given to ways to mitigate against this potential reduction in capacity such as signposting to other provision.
Race	X	Social groups are open to all people; regardless of their race. There are 7 lunch clubs specifically for Asian elders, Chinese elders and Jewish elders. The existing services do not discriminate against adults by race. There is some evidence from the most recent contract monitoring data for the Monday club of people from other racial backgrounds other than white British. It will be important to gather information as part of the new procurement to establish robust

		monitoring around race.
		The review process will not impact on people accessing the current service nor affect access to the service by race. However, during the review process, attention will be paid to any evidence of interest to the review and service development process will be to determine whether there are any issues with accessing preventative services in respect of
		different racial groups and the methodology adopted will take in to account these issues and specific needs. If issues are identified then service modelling will aim to resolve this issues and ensure continued and (if required) more equitable access to such services.
Religion or Belief	X	Current contract monitoring data for the service does not include detail about the religion or beliefs of service users. However, it is accepted that a person's decision to access the service might be affected by religion or beliefs.
Sex	X	Social groups are open to both sexes. The existing services do not discriminate against adults by age. This is confirmed by the most recently contract monitoring data where available. It is worth considering that evidence shows that a stroke is more likely to effect males than females
		http://www.poppi.org.uk/index.php?pageNo =336&PHPSESSID=crrlm5eglned5f58h3hd51 mf51≻=1&loc=8266&np=1
		Also that the most recent studies show that diagnosis rates for Autism/Asperger's Syndrome are males 1.8 % of the population whilst females is 0.2%.
		http://www.pansi.org.uk/index.php?pageNo =392&PHPSESSID=crrlm5egIned5f58h3hd51 mf51≻=1&loc=8266&np=1
		Overall it is acknowledged that the proposed reduction in funding for Social Groups (a 54% reduction to £100,000 on previous spend) is

		likely to mean a reduction in the number Social Groups across the County. This in turn may limit the numbers of people able to access this form of support, regardless of their status in relation to the protected characteristics. Consideration will need to be given to ways to mitigate against this potential reduction in capacity such as signposting to other provision.
Sexual Orientation	X	Current contract monitoring data (collected as client records) for the service does not include detail about the sexual orientation of service users. However, it is accepted that a person's decision to access the service might be affected by their sexual orientation (such as social exclusion). Overall it is acknowledged that the proposed reduction in funding for Social Groups (a 54% reduction to £100,000 on previous spend) is likely to mean a reduction in the number Social Groups across the County. This in turn may limit the numbers of people able to access this form of support, regardless of their status in relation to the protected characteristics. Consideration will need to be given to ways to mitigate against this potential reduction in capacity such as signposting to other provision.
Other groups e.g. rural isolation, deprivation, health inequality, carers, asylum seeker and refugee communities, looked after children, deprived or disadvantaged communities	X	The services within the preventative review cover a number of services. Some of these services are specific to these groups for instance refugee communities, rural isolation, deprived or disadvantage communities. As part of the service development process attempts will be made to determine whether there are any issues with accessing the new services. If such issues are identified then service modelling will aim to resolve these issues and ensure continued and (if required) more equitable access to these services. It should be noted that whilst the review and service development process will consider

		this group there is no intention to access to services from this group seeks to improve these services are outcomes for customers. As part procurement process Market Devivill be able to identify any gaps the be addressed within future service addition, the eligibility criteria shadetermined / detailed within the especification for each of the procuservices.	, rather it nd of the elopment lat need to es. In II be contract
Community Cohesion	Х	It is anticipated that the proposed model will result in a positive important community cohesion. It will be proposed that some of the new services will provided in community settings are by community volunteers via the I Coordinator. It is considered that proposed model provides opportunity work more closely with community will be explored further as the specific for the service is developed.	act on oposed be nd even ran cocal Area the inities to ies and this

<u>11.</u>

Are the human rights of individuals <u>potentially</u> affected by this proposal? Could there be an impact on human rights for any of the protected characteristics? **(Please tick)**

Explain why you consider that any particular <u>article in the Human Rights Act</u> may apply to your policy/ practice/ function or procedure and how the human rights of individuals are likely to be affected below: [NB. Include positive and negative impacts as well as barriers in benefiting from the above proposal]

	Yes	No	Comments		
Part 1: The Convention- Rights and Freedoms					
Article 2: Right to life	Х		All services are expected to identify any risks to service users and professionals and to have Health & Safety and safeguarding policies and procedures in place.		
Article 3: Right not to be tortured or treated in an inhuman or degrading way	Х		This article is relevant to the existing preventative services because these services offer accommodation and/or support to a variety number of individuals with various needs. As part of service delivery there is an expectation that the provider will report any safeguarding concerns and have suitable		

			policies and procedures in respect of
			safeguarding, whistle-blowing.
Article 4: Right not to be subjected to slavery/ forced labour		Х	n/a
Article 5: Right to liberty and security		Х	n/a
Article 6: Right to a fair trial		Х	n/a
Article 7: No punishment without law		Х	n/a
Article 8: Right to respect for private and family life	X		Current accommodation based preventation services already state within the welcompacks the right for clients to have choin around having contact with family/friends. The article may also apply in respect of the individuals who attend a support group may be sufficient for them to maintain the independence.
Article 9: Right to freedom of thought, conscience and religion		Х	n/a
Article 10: Right to freedom of expression		Х	N/a
Article 11: Right to freedom of assembly and association		Х	n/a
Article 12: Right to marry		Х	n/a
Article 14: Right not to be discriminated against	Х		This article is relevant to the existing preventative services because these services offer support to individuals with various need such as mental health, learning disabilities, physical disabilities, sensory impairment etc. The new services are expected to be delivered without discrimination of any kind to service users and staff

	Article 1: Protection of property/ peaceful enjoyment		х		Does not apply		
	Article 2: Right to education		Х	Does not apply		not apply	
	Article 3: Right to free elections		Х		Does r	not apply	
Secti D: De	on 2 ecision						
12.	Is there evidence other reason to so	•	Yes		No	Unknown	
	that:	could have	X				
	a) this policy could have a different affect or adverse impact on any section of the community;		X				
	b) any section community barriers in from the pi	may face benefiting					
13.							
		Positi Ne ve Impa ct	eutral		gative Impac pact Unknow		
Note: If the decision is 'Negative Impact' or 'Impact Not Known' an EHRIA Report is required.							
14.	Is an EHRIA report required?	ort	Yes [X	No [

Section 2: Completion of EHRIA Screening

Upon completion of the screening section of this assessment, you should have identified whether an EHRIA Report is required for further investigation of the impacts of this policy.

Option 1: If you identified that an EHRIA Report <u>is required</u>, continue to <u>Section 3</u> on Page 7 of this document to complete.

Option 2: If there are <u>no</u> equality, diversity or human rights impacts identified and an EHRIA report <u>is not required</u>, continue to <u>Section 4</u> on Page 14 of this document to complete.

Section 3: Equality and Human Rights Impact Assessment (EHRIA) Report

Section 3: Equality and Human Rights Impact Assessment Report

This part of the assessment will help you to think thoroughly about the impact of this policy and to critically examine whether it is likely to have a positive or negative impact on different groups within our diverse community. It is also to identify any barriers that may detrimentally affect under-represented communities or groups, who may be disadvantaged by the way in which we carry out our business.

Using the information gathered either within the EHRIA Screening or independently of this process, this EHRIA Report should be used to consider the impact or likely impact of the policy in relation to all areas of equality, diversity and human rights as outlined in Leicestershire County Council's Equality Strategy.

Section 3

A: Research and Consultation

When considering the target groups it is important to think about whether new data needs to be collected or whether there is any existing research that can be utilised.

- **15.** Based on the gaps identified either in the EHRIA Screening or independently of this process, <u>how</u> have you now explored the following and <u>what</u> does this information/data tell you about each of the diverse groups?
 - a) current needs and aspirations and what is important to individuals and community groups (including human rights);
 - b) likely impacts (positive and negative, intended and unintended) to individuals and community groups (including human rights);
 - c) likely barriers that individuals and community groups may face (including human rights)

Throughout the strategic review process, contract monitoring data for Lunch Clubs and Specialist support groups was analysed to better understand existing service provision. This information was sufficient in respect of the number and locations of Lunch Clubs however further information was required to understand the potential impact on people accessing current provision. In addition to the wider public consultation, the review team organised two workshops specifically for social groups, one for current providers and one for people accessing current social groups. The review team also visited eight social groups. Information sheets and

questionnaires were distributed at meetings.

Provider MeetingsConsultation has taken place with a variety of Organisations and Individuals who organise and operate Lunch Clubs and Specialist support groups. These meetings extended our understanding of each Organisation and groups in respect of current needs and aspirations, what their current issues were and how they might continue in the future. We discussed the proposal of a grant funding model in the future and how Organisations, Providers and Individuals could engage in the process. These discussions shaped the the grant funding model. Barriers identified included forms and information only being available on-line and extensive application and monitoring information needed for low levels of funding.

Two of the Specialists groups also raised the issues of matching funding which they receive from other organisations which would be affected by any change to their funding and how a specific specialist provisions needed appropriate funding to appoint a leader/co-ordinator.

Summary of key feedback from current providers of social groups :

- Volunteers are key to supporting social groups
- Recruiting volunteers and the coordination of volunteers is a challenge
- We need stability of funding, to plan and develop effectively
- Recognised that people enjoy the sharing of a meal and are likely to be unhappy with the loss of meals subsidy
- Preferred the Department to manage the budget (grant model approach)
- Need to make approach for funding simple and straight forward including monitoring requirements
- Need infrastructure/ support that effectively supports a grants based approach

Visits to Lunch Clubs and Stroke Clubs

Over the consultation period we visited a number of different models of Lunch Club and Specialist Support groups. This gave us the opportunity to speak to the volunteers who run the groups and the people who attend. The attendees described the role that the clubs have in reducing isolation and loneliness. We were also able to understand the volunteers role and what support they received by the host organisation.

The purpose of these consultation and engagement events was to better understand the role of the Lunch Clubs for Older People in reducing isolation and loneliness, providing a hot meal on a regular basis, maintaining friendships and receiving information and advice. The Specialist groups also reduced isolation and loneliness and provided condition specific advice and information as well as activities which broadly promote independence.

This consultation also included the online and paper questionnaires which asked questions about the Prevention Review as a whole and the proposed spread of funding across identified groupings.

Summary of key feedback from people accessing social groups, people said that the groups provide:

- Companionship and friendship
- Access to a range of informal support people wouldn't have had otherwise
- Advice and information (including specialist advice and information)
- For some people volunteers provided free care and support

- Increased social opportunities and experiences
- Most people were not in favour of the removal of a meal subsidy
- For some people transport was critical and they would not be able to attend without it.
- Summary of key feedback from volunteers supporting social groups, people said volunteering:
- Provides a sense of purpose
- Feeling of making a valued contribution
- Provides work experience opportunities including people with disabilities
- It is difficult to find affordable, suitable room hire
- It is difficult to recruit volunteers and time consuming to coordinate them
- There is too much bureaucracy and paperwork
- Need to make approach for funding simple and straight forward including monitoring requirements

It is anticipated that some groups will take up the opportunity to bid for funding, some groups may choose not to bid and others may seek alternative sources of funding or make other arrangements. The review team will work with all existing groups either supporting them with the bidding process, supporting them if they no longer wish to continue or wish to seek alternative arrangements and with developing a transition plan.

Is any further research, data collection or evidence required to fill any gaps in your understanding of the potential or known affects of the policy on target groups?

Throughout the strategic review process and formal consultation exercise research, data collection and evidence gathering has taken place from a variety of sources:

- Online and other published resources
- Contract monitoring data
- Information received from providers, customers and stakeholders
- Benchmarking information from other local authorities and commissioning organisations
- Results from consultation exercise (including responses from customers, providers, stakeholders, and the general public)

As described above, this research and data gathering has allowed a relatively comprehensive assessment of risks and impacts and those specific to the Equalities Act and Human Rights have been described above (see Section 2).

As grant criteria are developed, further information will be sought from these sources. Particular work will take place with stakeholders to ensure that the grant model being proposed will be suitable for its purpose.

The current priority is to continue to look at all the data which we hold on lunch clubs with specific reference to

- Many clubs have some level of transport which is provided by or funded by LCC. This
 information is being looked at to gain a more detailed picture of how the reductions in
 funding will have an impact
- The end of the meal subsidy will have an impact at the same time as the Prevention Review outcomes are being adopted
- The application of the grant model will be inclusive of the findings of this EHRIa.

When considering who is affected by this proposed policy, it is important to think about

consulting with and involving a range of service users, staff or other stakeholders who may be affected as part of the proposal.

17. Based on the gaps identified either in the EHRIA Screening or independently of this process, <u>how</u> have you further consulted with those affected on the likely impact and <u>what</u> does this consultation tell you about each of the diverse groups?

The formal consultation exercise for the prevention review was undertaken in order to engage as fully as possible with customers, providers and stakeholders and the general public in order to both understand people's regarding existing and proposed service revisions and risks and impacts associated with the proposed changes.

The formal consultation exercise ran from 14th April until 13th July 2014. As part of the consultation exercise, the following were undertaken in respect of other vulnerable people (including victims of domestic abuse):

- Series of provider workshops (including providers running existing services for other vulnerable people)
- Meetings with stakeholders (including the Royal Voluntary Service, Age UK, The Stroke Association and The Monday Club)
- Series or workshops for members of the general public and customers
- Online and hard-copy questionnaires and consultation information sheets available for all
- Support from providers to assist customers to have their say on the consultation either through completing questionnaires or events held by providers with their customers to gather comments

In response, 917 completed questionnaires were received (917 hard-copy responses and 175 online responses).

18. Is any further consultation required to fill any gaps in your understanding of the potential or known effects of the policy on target groups?

No – the consultation undertaken already is considered appropriate. As specified previously, some further engagement will occur with providers and stakeholders in the development of the grant model for funding.

Staff within Market Development and Compliance will, once the grant model is finalised, work with existing and potentially new providers to look at the way that clubs can be supported to continue, if appropriate.

Section 3 B: Recognised Impact 19. Based on any evid

Based on any evidence and findings, use the table below to specify if any individuals or community groups who identify with any 'protected characteristics' are <u>likely</u> be affected by this policy. Describe any positive and negative impacts, including what barriers these individuals or groups may face.

	Comments
Age	There will be no disproportionate impact on age
	as the Specialist clubs and Lunch Clubs are

		available for any adult 18+ and have no upper age limit. The attendees are more likely to be defined by vulnerability and/or condition than age.
	Disability	The Specialist Clubs such as Albert Street Artists, The Monday Club and Stroke Association could be affected more as the proposals may result in a higher funding reduction although the percentage reductions across all clubs will be the same. Although the model of grant funding could increase provision across the County if new providers bid and are successful.
G	ender Reassignment	There will be no disproportionate impact relating to gender reassignment. The major barrier overall may be the reduced level of investment leading to a reduction in Social Groups available across the County.
Marriage a	and Civil Partnership	There will be no disproportionate impact relating to marriage and civil partnerships. The major barrier overall may be the reduced level of investment leading to a reduction in Social Groups available across the County.
Preg	gnancy and Maternity	There will be no disproportionate impact relating to pregnancy and maternity. The major barrier overall may be the reduced level of investment leading to a reduction in Social Groups available across the County.
	Race	A number of Lunch Clubs are for a specific race/religious groups such as the Chinese Elders Group, Jewish Lunch Club and Sathi Group. The grant model does not currently prioritise these groups above any others but the second stage of grant funding, were additional funds can be requested, maybe a way of recognising any additional needs/requirements. This may also encourage new provision to the market.
	Religion or Belief	A number of Lunch Clubs are for a specific race/religious groups such as the Chinese Elders Group, Jewish Lunch Club and Sathi Group. The grant model does not currently prioritise these groups above any others but the second stage of grant funding, were additional funds can be requested, maybe a way of recognising any

	additional needs/requirements.
Se	There will be no disproportionate impact relating
	to sex.
	The major barrier overall may be the reduced
	level of investment leading to a reduction in
Sexual Orientatio	Social Groups available across the County.
Sexual Orientatio	There will be no disproportionate impact relating to sexual orientation.
	The major barrier overall may be the reduced
	level of investment leading to a reduction in
	Social Groups available across the County.
Other group	
e.g. rural isolation, deprivation	
health inequality, carers asylum seeker and refuge	The state of the s
communities, looked after	
children, deprived o	
disadvantaged communitie	s
Community Cohesio	n There will be no disproportionate impact relating
	to community cohesion.
	The major barrier overall may be the reduced
	level of investment leading to a reduction in
	Social Groups available across the County.

20.	Based on any evidence and findings, use the table below to specify if any particular Articles in the Human Rights Act are <u>likely</u> apply to your policy. Are the human rights of any individuals or community groups affected by this proposal? Is there an impact on human rights for any of the protected characteristics?				
	Comments				
Part 1: The Convention- Rights and Freedoms					
	Article 2: Right to life	Risks to service users and suitable policies relating			
		to Health and Safety and safeguarding adults will be requirements of the new commissioned/grant			
		model under these proposals.			
	Article 3: Right not to be	When the grant model is developed particular			
	tortured or treated in an	reference will need to be given to training and			

Article 4: Right not to be subjected to slavery/ forced labour Article 5: Right to liberty and security Article 6: Right to a fair trial	supporting volunteers to deliver a good service as well as a robust requirement for safeguarding of vulnerable adults. This can be included in the Information/guidance packs n/a n/a
subjected to slavery/ forced labour Article 5: Right to liberty and security	·
security	n/a
Article 6: Right to a fair trial	
	n/a
Article 7: No punishment without law	n/a
Article 8: Right to respect for	Social group members will have the opportunity
private and family life	to receive Peer Support within the groups but
•	acknowledging their rights to have a choice
	around friendships and support
Article 9: Right to freedom of	When the grant model is developed particular
thought, conscience and	reference will need to be given to
religion	Those groups which have a
	cultural/religious/ethnic focus that they
	acknowledge diversity within the group
	Robust safeguarding policy , and Nybistlable wing a plicy cores all funded.
	Whistleblowing policy ,across all funded
	groups to protect individuals in respect of this article
Article 10: Right to freedom of	When the grant model is developed particular
expression	reference will need to be given to this article to
	support individual's rights to choice and to be
	heard.
Article 11: Right to freedom of	n/a
assembly and association	· ·
Article 12: Right to marry	n/a
Article 14: Right not to be	Any new or existing service funded in the future
discriminated against	will need to promote anti-discriminatory practice
	as part of its constitution.
Part 2: The First Protocol	
Article 1: Protection of property peaceful enjoyment	n/a
Article 2: Right to education	n/a
Article 3: Right to free elections	n/a

Section 3

C: Mitigating and Assessing the Impact

Taking into account the research, data, consultation and information you have reviewed and/or carried out as part of this EHRIA, it is now essential to assess the impact of the policy.

21. If you consider there to be actual or potential adverse impact or discrimination, please outline this below. State whether it is justifiable or legitimate and give reasons.

As discussed above (Section 2), the principal impact of the proposed changes as result of the review will be a reduction in the level of investment which will lead to a potential reduction in the number of clubs that exist.

This could impact upon the availability of Peer Support and result in an increase in loneliness and isolation. This is a concern given that these kinds of groups are both effective and seen to be relatively good value for money.

There is the potential that certain groups i.e. Age, Disability, Race and/or religion could be affected and it is the intention that by continue to provide funding, at a reduced level, and the support which will be provided for groups to apply will provide some mitigation against the likely impact. The overall view therefore is that the impact will not disproportionately affect any one protected characteristic or article considering the extra support available. In the context of the savings that the Council has to make, this is a legitimate impact and in so much as it will not adversely affect any particular group (rather it will have an impact to all) and will not directly impact on the Department's statutory responsibilities.

N.B.

- i) If you have identified adverse impact or discrimination that is <u>illegal</u>, you are required to take action to remedy this immediately.
- ii) If you have identified adverse impact or discrimination that is <u>justifiable or legitimate</u>, you will need to consider what actions can be taken to mitigate its effect on those groups of people.
- Where there are potential barriers, negative impacts identified and/or barriers or impacts are unknown, please outline how you propose to minimise all negative impact or discrimination.
 - a) include any relevant research and consultations findings which highlight the best way in which to minimise negative impact or discrimination
 - b) consider what barriers you can remove, whether reasonable adjustments may be necessary, and how any unmet needs that you have identified can be addressed
 - c) if you are not addressing any negative impacts (including human rights) or potential barriers identified for a particular group, please explain why

There are a number of ways in which the negative impact of these proposals will be mitigated against, as follows

Promotion of the Innovation Fund and Shire Grant to encourage providers to look at a

new model of Lunch Club / Peer Support to fill any potential gaps

- Setting the base grant model fund at an amount which will cover basic costs
- Two levels of funding
- Working with the two existing providers i.e. Royal Voluntary Service and Age UK to explore the continuation of the existing Provider supported clubs
- Dedicating workers time to engage with independent run clubs to explain implications and work through application process
- Design of the application process and monitoring required to reflect the low level of funding
- The allocation of funding initial for a 2 year period
- Guide/Information packs for all groups to assist in set up and sustainability
- Transition arrangements, facilitated by the Market Development Team, will provide advice and support to those clubs/organisations which may not be successful

Section 3

D: Making a decision

23. Summarise your findings and give an overview as to whether the policy will meet Leicestershire County Council's responsibilities in relation to equality, diversity, community cohesion and human rights.

It is considered that, despite the negative impact across all groups of potential customers, the Council will still meet its responsibilities in relation to equality, diversity, community cohesion and human rights, subject to satisfactory implementation of the Equality Improvement Plan contained in Section 3. The level of savings to be made against all prevention services, including support for Lunch Clubs and Specialist Support Groups, means that there is likely to be reduction in service provision across the County.

Section 3

E: Monitoring, evaluation & review of your policy

24. Are there processes in place to review the findings of this EHRIA and make appropriate changes? In particular, how will you monitor potential barriers and any positive/ negative impact?

New Social Groups will, once a proportionate monitoring regime has been established, be subject to contract monitoring procedures (carried out by the Department's non-regulated compliance team). In addition, after the first six months of service delivery, a review of the clubs will be undertaken in order to establish how effective the service is. As part of that review, monitoring data will be considered and any equalities issues addressed with new providers. If required, an up-date will be provided to the Departmental Equality Group (DEG) after this review.

25. How will the recommendations of this assessment be built into wider planning and review processes?

e.g. policy reviews, annual plans and use of performance management systems

One of the key issues facing the review of existing service provision is a lack of robust monitoring data. In particular, existing data does not capture a lot of data in respect of equalities and human rights (for instance, information on many of the protected characteristics is not currently collected). As part of new service design and delivery, more robust monitoring will be introduced. This will need to be considered alongside the amount of information which can be gathered taking into consideration the low level of

funding which will be available. Due regard will need to be given to the proportion of monitoring data which can be gathered as part of the contractual arrangements in the future.

As stated above, once a proportionate monitoring regime has been established new services will be subject to contract monitoring procedures (carried out by the Department's non-regulated compliance team). In addition, after the first six months of service delivery, a review of the clubs will be undertaken in order to establish how effective the service is. As part of that review, monitoring data will be considered and any equalities issues addressed with new providers. If required, an up-date will be provided to the Departmental Equality Group (DEG) after this review.

Section 3:

F: Equality and human rights improvement plan

Please list all the equality objectives, actions and targets that result from the Equality and Human Rights Impact Assessment (EHRIA) (continue on separate sheets as necessary). These now need to be included in the relevant service plan for mainstreaming and performance management purposes.

Equality Objective	Action	Target	Officer Responsible	By when
Develop clear grant criteria , outcomes , application process and support information	Both the information and the application forms need to be available in different formats, hard copies/online, and be proportionate to the level of funding available.	To have the information produced in the timescales specified.	Strategic Planning and Commissioning , Market Development (Procurement) and Compliance Officers	By January 2015 – completion of specification for new service ahead of formal procurement process commencing. Throughout the life of the contract (contract monitoring).
Ensure that the new grant model of funding has clear outcomes which are proportionate to the level of funding available.	The monitoring requirements will need to reflect both the low level of funding and the requirements to provide usable monitoring data	That we are able to gather monitoring data from all clubs that we an use to shape future provision and demonstrate evidence of equalities	Strategic Planning and Commissioning , Market Development (Procurement) and Compliance Officers	By January 2015 – completion of specification for new service ahead of formal procurement process commencing. Throughout the life of the contract (contract monitoring).

Ensure that the new model of funding encourages new developments in the market	Once the information and application forms are completed the market is made aware of the opportunities. This will be done via Bidder Workshops and a Bidders Toolkit .Also to promote the use of the Innovation Fund to look at designing and implementing a "new" model of Lunch Club/Peer Support.	For Providers to bid to the Innovation Fund to pilot new models of Lunch Club/Peer Support for Older People.	Strategic Planning and Commissioning , Market Development (Procurement) and Compliance Officers	By January 2015 – completion of specification for new service ahead of formal procurement process commencing. Throughout the life of the contract (contract monitoring).
Ensure existing groups are aware of the range of options open to them	Develop information sheet explaining options including support and resources	To encourage as many current organisations and new ones to bid	Strategic Planning and Commissioning , Market Development (Procurement) and Compliance Officers	By January 2015 — completion of specification for new service ahead of formal procurement process commencing. Throughout the life of the contract (contract monitoring).
Ensure that attendees of Lunch Clubs which close are aware of the LCC assessment criteria for support, if appropriate, and our signposted to other	In the process of Transition from old model of service delivery to new that vulnerable people are identified and are either offered the opportunity of	All providers are aware of the Transition arrangements and engage to make sure that vulnerable people are identified when appropriate.	Strategic Planning and Commissioning , Market Development (Procurement) and Compliance Officers	By January 2015 – completion of specification for new service ahead of formal procurement process commencing.

provision, if available. Also to consider any implications on Carers.	an assessment or signposted to other provision. Design a customer and carer information resource			Throughout the life of the contract (contract monitoring).
Ensure that new service provision is equality compliant	The service specification for the service will clearly state equality requirements (including reference to required policies and procedures around health and safety, safeguarding etc. (see above, Section 2). This will be tested through the procurement process and monitored during the life of the contract.	The commissioned service will be compliant with the Council's equality priorities.	Strategic Planning and Commissioning , Market Development (Procurement) and Compliance Officers	By January 2015 – completion of specification for new service ahead of formal procurement process commencing. Throughout the life of the contract (contract monitoring).
Ensure that there is equity of access to new service provision without discrimination to any groups, such as protected characteristics, as identified in Section 2 (above), particularly in relation to disability, race, religion and belief.	The service specification for the service will clearly state equality requirements (including expected non-discriminatory access to the service. This will be tested through the procurement process and monitored during the life of the contract.	The commissioned service will be compliant with the Council's equality priorities and reflect the need to support identified people to reduce loneliness and isolation.	Strategic Planning and Commissioning , Market Development (Procurement) and Compliance Officers	By January 2015 – completion of specification for new service ahead of formal procurement process commencing. Throughout the life of the contract (contract monitoring).

Ensure that where possible,	The service specification for	Opportunities for other	Strategic Planning and	By January 2015 –
customers are able to	the service will clearly state	sources of support and	Commissioning , Market	completion of specification
access other support	equality requirements for	community integration will	Development	for new service ahead of
(whether specialist of	linking to other support	be fully explore within new	(Procurement) and	formal procurement process
community based),	services and agencies but	service provision. The	Compliance Officers	commencing.
including other elements of	will also be mindful of other	service will be		
the wider Unified	elements of the Unified	commissioned with the		Throughout the life of the
Prevention Offer	Prevention Offer for	wider Unified Prevention		contract (contract
	Leicestershire (such as Local	Offer for Leicestershire		monitoring).
	Area Coordination)	borne in mind.		

Section 4: Sign off and scrutiny

Upon completion, the Lead Officer completing this assessment is required to sign the document in the section below.

It is required that this Equality and Human Rights Impact Assessment (EHRIA) is scrutinised by your <u>Departmental Equalities Group</u> and signed off by the Chair of the Group.

Once scrutiny and sign off has taken place, a depersonalised version of this EHRIA should be published on Leicestershire County Council's website.

Section 4 A: Sign Off and Scrutiny
Confirm, as appropriate, which elements of the EHRIA have been completed and are required for sign off and scrutiny.
Equality and Human Rights Assessment Screening
Equality and Human Rights Assessment Report
1 st Authorised Signature (EHRIA Lead Officer):
Date:
2 nd Authorised Signature (DEG Chair):
SmAlle.
Date:02/09/2014