

Equality Impact and Needs Assessment Form

A) General Information

Name of service, function, policy (or other) being assessed

Award of independent advocacy service for adults contract

Directorate or organisation responsible (and service, if it is a policy)

Adults and Wellbeing

Date of assessment

2nd May 2017

Names and/or job titles of people carrying out the assessment

Ewen Archibald, Strategic wellbeing and housing manager

Accountable person

Martin Samuels, Director Adults and Wellbeing

B) Describe in summary the aims, objectives and purpose of the proposal, including desired outcomes:

The current contract for the provision of independent advocacy for adults is due to expire on the 31st July 2017 with no further opportunity for extension. The need for a continued provision of an independent advocacy service for adults has been agreed with no deviation to the current budget.

A competitive tender process has been undertaken to identify a provider to supply the independent advocacy service in Herefordshire for 3 years (+1 year extension if required) from the 1st August 2017. Consideration to the bidders approach to equality has been scored as part of this process. The tender process has completed and the successful and unsuccessful bidders have been informed of the outcome.

Whilst there have not been any significant areas of concern in respect of the current service, the recommissioning process has provided opportunity for reflection and

development of the service specification, for example in respect of engaging with those who utilise the independent advocacy service.

Awarding the contract for the provision of the independent advocacy service for adults will ensure the council meets the statutory responsibility to ensure the availability of the following services for vulnerable adults:

- a. Independent Mental Health Advocate (IMHA) under the Mental Health Act 2007.
- b. Independent Mental Capacity Advocate (IMCA) under the Mental Capacity Act 2005 (including DoLS provision).
- c. Independent advocate under the Care Act 2014.
- d. NHS complaints advocacy service (formerly Independent Complaints Advocacy Service ICAS) is a requirement of the Health and Social Care Act 2012.

In addition to the statutory obligations the award of independent advocacy service for adults contract will capture the spirit of the Care Act by enabling the provision of generic advocacy to support adults who are not able to express their views and preferences.

These services will be delivered to adults in Herefordshire who meet the relevant eligibility criteria, this may include a person with anyone of the protected characteristics. The most common characteristics likely to engage with this service are in relation to age and disability.

C) Context - describe, in summary;

The number of people and/or providers that may be affected by the proposal.	Service Users There were 708 referrals for advocacy support across all aspects of advocacy in the last fully reported year. This included adults from a variety of client groups, with a variety of impairments relating to their cognitive function. Support Provider The contract is currently delivered by Onside Independent Advocacy and the successful bidder is Onside Independent Advocacy.
What are the values of the contract(s) affected by the proposal? (If appropriate).	Contract Start Date: 1 st August 2017 Contract End Date: 31 st July 2020 Contract Value: The total annual amount/funding is £195,000
What are the	The service serves all eligible adults who are in need of

geographical locations	advocacy across the county.
of those that might be	
affected by the	
proposal?	

D) Who are the main stakeholders in relation to the proposal?

- a. Herefordshire Council's Adult Wellbeing Directorate
- b. Health services (e.g. CCG, Wye Valley Healthcare Trust)
- c. Adult Mental health services (currently provided by 2gether mental Health Trust)
- d. Current and future adults who require an independent advocate

E) What are the anticipated impacts of the proposal?

Positive impacts.

Opportunity to review how engagement with those who use the advocacy service will be developed as part of the recommissioned advocacy service.

Volunteers will help to meet the service demand and ensure its sustainability now and in the future.

Negative impacts

There are no identified negative impacts foreseen as the service has been running effectively and there are no proposed reductions to the funding of delivery of the service. There will be minimal, if any, impact of service delivery as part of the mobilisation as the current provider is the successful bidder.

Legislative changes may bring unforeseen changes and challenges that will be addressed as and when they arise in consultation with those who use the service.

F) With regard to the stakeholders identified and the diversity groups set out below;

	Is there any potential for (positive or negative) differential impact?	Could this lead to adverse impact and if so what?	Can this adverse impact be justified on the grounds of promoting equality of opportunity for one group, or for any other reason?	Please detail what measures or changes you will put in place to remedy any identified adverse impact.
Age	No	The changes in contract should not adversely affect people of different ages, they will still be able to access the service and there will be minimal, if any, disruption in mobilisation.	N/A	People of all ages will still be able to access the service and this will be monitored through contract monitoring.
Disability	No	The service will continue to be provided to anybody who meets the eligibility criteria for each type of advocacy.	N/A	This will be monitored through contract monitoring processes to ensure equitable access to services.
Race	No	No. The composition of adults who utilised this service in the last full contract monitored year is 98.5% white. According to this equality strand this is not broadly reflective of local demographics in Herefordshire generally (6% of the population describe	The service has eligibility criteria relating to the legislation governing each advocacy strand. Adults who use the advocacy service are likely to also use adult social care services and the ethnicity of those who utilise the advocacy service is the same as the those who use adult social care services.	Ethnicity will continue to be monitored through contract monitoring arrangements.

	themselves as not White British). However, this is reflective of the ethnicity of adult social care users as recorded on the case management system for the same period, which is 98.5% White British.		
Gender	No data available to allow analysis		
Sexual Orientation	No data available to allow analysis		
Religion/ Belief / Non Belief	No data available to allow analysis		
Pregnancy / maternity	No data available to allow analysis		
Marital Status	No data available to allow analysis		
Gender Reassignment	No data available to allow analysis		

G) Consultation

Please summarise the consultation(s) undertaken with stakeholders regarding this proposal

Regular meetings, phone calls and emails to the current Provider. These will continue as part of the mobilisation of the new service.

Communications have been made with the health commissioners and operational practitioners who refer to the advocacy service and work with adults who utilise this service.

H) Additional information and / or research

Include here any references or other sources of data that you have used to inform this assessment.

Are there any gaps in your evidence or conclusions that make it difficult for you to quantify the potential adverse impact(s) of this proposal? If yes, please list them here

If you have identified gaps in your evidence or conclusions, how will you explore the proposal in greater depth? Or, if no further action is required, please explain why.

Information and research used:

Contract monitoring and performance data.