



Title/Subject: Support at Home (Home Support and Supported Living) Contract
Meeting: Integration Joint Board
Date: 06 April 2018
Submitted By: Head of Procurement and Housing Property
Action: For Noting

1. INTRODUCTION

- 1.1 The purpose of this report is to provide an update on the outcome of the Support at Home (Home Support and Supported Living) contract.

2. RECOMMENDATION

The Integration Joint Board is asked to:

- 2.1 note the outcome of the tendering process for the Support at Home (Home Support and Supported Living) contract and contract operating principles.

3. BACKGROUND

- 3.1 In line with the contract strategy agreed by the Board in October 2017, a tender for Support at Home (Home Support and Supported Living) Services was advertised via the Public Contracts Scotland Portal as an open tender process on 31st October 2017. Subsequently, 82 providers expressed an interest in tendering.
- 3.2 The framework covers 7 separate lots, as detailed in Appendix 1.
- 3.3 The contract commenced on 1st April 2018 for a period of 2 years to 31st March 2020, with an option to extend for up to a further 24 months.
- 3.4 The framework will provide for all new support at home and supported living services commissioned by homecare and community care teams. It is intended that all existing support arrangements will remain in place and will not be affected by this framework, except in those circumstances where Service Users or either contracting party wish to make alternative arrangements.

4. TENDER SUBMISSIONS

- 4.1 A total of 55 bids were received electronically by the deadline date of 7th December 2017 and opened in accordance with section 11.2 of Falkirk

Council's Contract Standing Orders. The total number of bids received per lot was as follows:

Lot	No. of Bids Received
1. Home Support (East Locality)	26
1. Home Support (West Locality)	31
1. Home Support (Central Locality)	29
2. Support Living (Physical Disability)	34
3. Supported Living (Learning Disability)	41
4. Supported Living (Mental Health)	29
5. Supported Living (Older People)	33
6. Supported Living (Criminal Justice)	11

4.2 Tenderers could bid for one, some or all lots.

5. TENDER EVALUATION

5.1 The evaluation of the bids was based on a weighting of 60% for quality and 40% for price. Evaluation of the qualitative element of each tender submission was carried out independently to the pricing evaluation. The qualitative element of the tender involved evaluating responses to 4 questions relating to key award criteria (detailed below) and a case study (per lot):

- Service Development;
- Leadership and Management;
- Quality Assurance;
- Fair Working Practices (including payment of the Scottish Living Wage).

5.2 All bidders have confirmed that they will pay care staff the Scottish Living Wage.

5.3 The separate scoring of the tendered price took place following the conclusion of the quality evaluation. The lowest priced bid for each lot was allocated the 40% cost ratio. All other bids were scored on a pro-rata basis against the lowest bid.

- 5.4 Only after both quality and price evaluations were separately concluded were the scores added together to allow a ranking of bidders for each lot.
- 5.5 In accordance with Falkirk Council's Contract Standing Orders, tenders submitted by those providers set out in Appendix 2 were accepted.
- 5.6 The call-off methodology to be adopted in awarding referrals through the contract will be based on:
- Initial engagement with the 3 highest ranked providers for each lot and thereby allocated to the provider who has indicated they have capacity and are ranked highest. In the case of Lot 1 (Home Support), the ranked selection process will apply to those providers within the relevant locality, i.e. East, Central or West.
 - If a referral cannot be awarded to a provider within the top 3 highest ranked providers, the referral will be directed to all providers within the lot, with referral priority accorded to the highest ranked provider.
 - Where the 10 appointed providers in each lot are unable to be awarded the referral, providers on lot 7 will be given the opportunity to be awarded the referral based on their ranking.

6. FINANCIAL IMPLICATIONS

- 6.1 Bidders were asked to submit a price which would be fixed for 12 months from the commencement date of the contract.
- 6.2 The total estimated annual value of the contract for all lots is £25m. The estimated value over the 4 years (including extension period) is therefore estimated at £100m.
- 6.3 The contract aims to promote continuity of care. Where a provider is unsuccessful for lots 1 to 6, but appointed to lot 7, existing packages of care could be continued at the new tendered rates. The contract is clear, however, that the transfer of work on new tendered rates could not be guaranteed in all circumstances.
- 6.4 Maximising continuity of care by transferring all current packages of care at new tendered rates, is estimated to increase current costs by around 5.5%. The 2018/19 budget has allowed for an increase of 3.3%.
- 6.5 In order to help mitigate the budgetary impact, negotiations will be undertaken with those providers where their new rates are in excess of the average levels per lot. These negotiations will seek to reduce the level of rate increase, with the proviso that if negotiations are unsuccessful, re-provisioning of existing care may be required.

7. CONTRACT OPERATING PRINCIPLES

7.1 The new contract provides an opportunity to work collaboratively with a smaller number of providers. This will enable stronger processes for contract and performance management to be developed.

7.2 The objectives of enhanced collaboration are to:

- Increase provider capacity, reducing delays in provision of care packages;
- Support locality planning;
- Implement operational efficiencies, reducing service delivery costs;
- Ensure levels of care are reviewed to deliver personalisation and improved outcomes.

7.3 The above objectives will, however, only be realised if:

- Providers develop a stronger and more focused geographical presence;
- Providers have more assurance over the stability of work so they can recruit and retain staff;
- There is a regular programme of reviews to evidence and ensure the services being delivered promote independence and are outcome focused and respectful.

7.4 Through the implementation of regular Provider Forums/Panels, structured around the specialist lots, the aim is to lessen competition across providers. This will encourage more openness and support more collaboration between and across providers. Regular panel meetings and wider events will also enable consultation with service users, families and carers.

7.5 This approach will also enable Commissioners to develop stronger partnership working with the providers, to build more effective relationships. This will play a key role in increasing an understanding of the influences on service delivery, help to identify training needs and mobilise new and improved operating procedures. It will also enable new technology to be more efficiently implemented.

8. CONCLUSIONS

8.1 The tendering process has been successful in generating a good level of competition, with high quality and competitively priced bids received. In mobilising and operating the contract, regular Provider Forums/Panels will be established to enhance collaboration with and between providers. The contract will be operated to ensure those in receipt of support receive services that are:

- Outcome focused, flexible and of the highest quality;
- Person centred and offering choice and control;
- Promoting independence, health and wellbeing;

- Responsive and respectful;
- Based upon effective collaboration.

Resource Implications

The total annual spend across the contracted services is estimated at c£25m. The framework value over the potential 4 year contract period is estimated at £100m. Maximising continuity of care by transferring all current packages of care at new tendered rates, is estimated to increase current costs by around 5.5%. The 2018/19 budget has allowed for an increase of 3.3%. Negotiations will be undertaken with identified providers to reduce the level of rate increase, whilst seeking to maintain continuity of care.

Impact on IJB Outcomes and Priorities

The contracts will be structured to support the HSC Partnership's agreed vision and the 5 agreed local outcomes.

Legal & Risk Implications

Compliance with Falkirk Council's Contract Standing Orders will minimise risks inherent with high value complex public procurement projects. Other risks will be managed through the development and maintenance of an appropriate risk register.

Consultation

Consultation has taken place across teams in Adult Services, with Scottish Care and the private, independent and voluntary sectors. Further consultation with these groups and with service users will be undertaken as necessary.

Equalities Assessment

For the purposes of the Equality Act 2010, an equalities impact assessment has been completed with no issues identified.

Approved for submission by: Patricia Cassidy, Chief Officer, Falkirk Health and Social Care Partnership

Author – David McGhee, Head of Procurement and Housing Property

Date: 8 March 2018

List of Background Papers:

Report to Integration Joint Board 3 February 2017 – Homecare and Community Care Contract

Report to Integration Joint Board August 2017 – Homecare and Community Care Contract

Report to Integration Joint Board 6 October 2017 – Homecare and Community Care Contract Strategy

Appendix 1

Lot 1 – Home Support (split into East, West and Central Localities)

The service covers both long and short term support needs and may include personal care, domestic support, social and emotional support, as well as providing support to families and carers. In line with re-ablement practices, the service aims to help people sustain, recover or manage their health, skills and abilities to lead independent and fulfilling lives within their local communities.

To ensure a consistent approach to the allocation of new business within Lot 1, Falkirk Council will be divided into three geographical areas which represent the localities (East, Central and West) identified by Falkirk Health and Social Care Partnership for strategic planning purposes.

Lot 2 – Supported Living for People with Physical Disabilities

Services for People with Physical Disabilities should fulfil an enabling role, supporting people to regain confidence and motivation, maximising their potential and supporting them to live as independently as possible.

Lot 3 – Supported Living for People with Learning Disabilities

Service Users affected by Learning Disability exhibit an impairment of their intellectual, adaptive and social functioning. Service Users with Learning Disabilities may have particular communication support needs requiring the use of communication support systems such as Talking Mats, Makaton as well as other augmentative and alternative communication aids, for example, picture and symbol communication boards, electronic communication devices etc. Service Users with Learning Disabilities may also require support to interact with others and their environment ensuring that any risks posed, by or to the individual, are managed appropriately.

Lot 4 – Supported Living for People with Mental Health Difficulties

Service Users within this category are typically individuals who have been diagnosed as having a severe and enduring mental illness, such as Schizophrenia or Severe Affective Disorder. Service Users affected by Mental Health difficulties may require support because they are acutely unwell or have long term mental illness which significantly impacts their functioning and motivation to care independently for themselves and also their ability to sustain relationships. Service Users may also lead chaotic lifestyles leading to recurring crises requiring the need for mental health support from a variety of services. Service Users may also present significant risk to their own safety or that of others.

Lot 5 – Supported Living for Older People

Service Users within this category are typically Older People with higher levels of support needs due to physical frailty, ill health and/or dementia. Service Users will require support to be delivered on a flexible basis in recognition that their needs and presentation may change. It is important that Service Users with Dementia are supported in a way which promotes their independence whilst balancing risks.

Lot 6 – Supported Living for People who are or have been subject to the Criminal Justice System

Service Users who are, or have been, subject to the Criminal Justice System may at times require support in order to live in their community. Support may be required due to the risks associated with the individual's offending behaviour or may arise from disability or mental health issues. Service Users who require support via the Support at Home (Home Support and Supported Living) Framework will be those requiring lengthy periods of supervision at a high level of intensity, particularly in the early periods after release from custody, typically with a history of multiple sexual or violent offences. Staff undertaking this activity will be well trained, have professional support, access to a reliable lone worker safety service, or access the council lone worker system, reliable and able to balance restrictions with promotion of constructive activities.

Lot 7 – Supplementary Providers List

All suppliers that meet the minimum requirements shall be included in a Supplementary Providers List (Lot 7). The Supplementary Providers List shall be made available to Service Users opting to choose and direct their own care within Self Directed Support Options 1, 2 or 4. Providers included within Lot 7 may also be required to deliver services if there is insufficient capacity within the Framework, within lots 1-6, to meet service requirements.

Appendix 2

Lot 1 Home Support (East Locality)	
Name of Organisation	Registered Location
Rainbow Services (UK) Ltd	Ayr
HRM Homecare Services Ltd	Kilmarnock
Loretto Care	Glasgow
Barony Housing Association Ltd	Glasgow
Real Life Options	Knottingley
ION Care and Support Services Ltd	Bathgate
Call In Homecare Ltd	Edinburgh
Hazelhead Homecare Ltd	Lanarkshire
1 st Homecare Ltd	Falkirk
Ailsa Care Services Ltd	Glasgow

Lot 1 Home Support (Central Locality)	
Name of Organisation	Registered Location
Rainbow Services (UK) Ltd	Ayr
HRM Homecare Services Ltd	Kilmarnock
Barony Housing Association Ltd	Glasgow
Loretto Care	Glasgow
Real Life Options	Knottingley
ION Care and Support Services Ltd	Bathgate
Call In Homecare Ltd	Edinburgh
Hazelhead Homecare Ltd	Lanarkshire
1 st Homecare Ltd	Falkirk
Ailsa Care Services Ltd	Glasgow

Lot 1 Home Support (West Locality)	
Name of Organisation	Registered Location
Rainbow Services (UK) Ltd	Ayr
HRM Homecare Services Ltd	Kilmarnock
Loretto Care	Glasgow
Barony Housing Association Ltd	Glasgow
Real Life Options	Knottingley
ION Care and Support Services Ltd	Bathgate
Call In Homecare Ltd	Edinburgh
Hazelhead Homecare Ltd	Kilmarnock
1 st Homecare Ltd	Falkirk
Mears Care (Scotland) Ltd, (trading as ILS)	Alva

Appendix 2 (cont.)

Lot 2 Supported Living for People with Physical Disabilities	
Name of Organisation	Registered Location
Key Housing Association	Glasgow
Loretto Care	Glasgow
Barony Housing Association Ltd	Glasgow
HRM Homecare Services Ltd	Kilmarnock
Enable Scotland	Lanarkshire
C Change	Glasgow
Kingdom Support and Care CIC	Glenrothes
Sense Scotland	Glasgow
Ailsa Care Services Ltd	Glasgow
ION Care and Support Services Ltd	Bathgate

Lot 3 Supported Living for People with Learning Disabilities	
Name of Organisation	Registered Location
Key Housing Association	Glasgow
Sense Scotland	Glasgow
Loretto Care	Glasgow
Barony Housing Association Ltd	Glasgow
HRM Homecare Services Ltd	Kilmarnock
Ark Housing Association	Edinburgh
Kingdom Support and Care CIC	Glenrothes
Thera (Scotland)	Edinburgh
Ailsa Care Services Ltd	Glasgow
Voyage Care	Staffordshire

Lot 4 Supported Living for People affected by Mental Health	
Name of Organisation	Registered Location
Key Housing Association	Glasgow
Loretto Care	Glasgow
Barony Housing Association Ltd	Glasgow
The Richmond Fellowship	Glasgow
Kingdom Support and Care CIC	Glenrothes
The Action Group	Glasgow
Scottish Association for Mental Health	Glasgow
Carr Gomm	Edinburgh
Living Ambitions	London
Penumbra	Edinburgh

Appendix 2 (cont.)

Lot 5 Supported Living for Older People	
Name of Organisation	Registered Location
Key Housing Association	Glasgow
Loretto Care	Glasgow
Barony Housing Association Ltd	Glasgow
Call In Homecare Ltd	Edinburgh
HRM Homecare Services Ltd	Kilmarnock
Ailsa Care Services Ltd	Glasgow
ION Care and Support Services Ltd	Bathgate
Hazelhead Homecare Ltd	Lanarkshire
Carr Gomm	Edinburgh
Real Life Options	Knottingley

Lot 6 Supported Living for People who are or have been subject to Criminal Justice System	
Name of Organisation	Registered Location
The Richmond Fellowship Scotland	Glasgow
Kingdom Support and Care CIC	Glenrothes
Ailsa Care Services Ltd	Glasgow
Loretto Care	Glasgow
Barony Housing Association Ltd	Glasgow
Real Life Options	Knottingley
The Action Group	Edinburgh
1 st Homecare Ltd	Falkirk
Sacro	Edinburgh
Mears Care (Scotland) Ltd (trading as ILS)	Alva

Appendix 2 (continued)

Lot 7 Supplementary Providers List	
Name of Organisation	Name of Organisation
1st Homecare Ltd	Key Housing Association
Able Healthcare Scotland Ltd	Kingdom Support and Care CIC
Acasa Care	Living Ambitions
Action In Mind	Loretto Care
Active Healthcare Services Ltd	Mears Care (Scotland) Ltd (Trading as ILS)
Advanced Care Services	Margarot Forrest Care Management
Ailsa Care Services Ltd	Montana Home Care Ltd
Ark Housing Association	Nestor Primecare Services Ltd (Trading as Allied Healthcare)
Avenue Care Services	Penumbra
Barony Housing Association	Plus Homecare Ltd
Braes Home Care Ltd	Potters Healthcare Ltd
Caledonia Social Care Ltd	Quarriers
Call-In Homecare Ltd	Raeburn Group Ltd
Careline Home Support	Rainbow Services (UK) Ltd
Carr Gomm	Real Life Options
C Change Scotland	Sacro
Christies Care Ltd	Scottish Association for Mental Health
Community Integrated Care	Scottish Autism
Craegmoor Supporting You Ltd	Sense Scotland
Crossroads Caring Scotland	SRS Partnership
Dalriada Homecare Ltd	Step Up (Housing, Employability and Community Support Services)
Denovan Homecare	Stoneywood Care Services
Enable Scotland	Sue Ryder
Extended Personal Care Ltd	The Action Group
Grangemouth Carers Ltd	The Richmond Fellowship (Scotland)
Hazelhead Homecare Ltd	Thera (Scotland)
HRM Homecare Ltd	Voyage 1 Ltd (Trading as Voyage Care)
ION Care and Support Services Ltd	

Equality & Poverty Impact Assessment

SECTION ONE: ESSENTIAL INFORMATION

Service & Division:	Corporate & Housing Services	Lead Officer: Name	William McQuillian	
		Team:	Procurement & Commissioning Unit	
		Tel:	01324 590810	
		Email:	william.mcquillian@falkirk.gov.uk	
Proposal:	<p>Tender for the Provision of Support at Home (Home Support and Supported Living) Services.</p> <p>The tender is to establish a Framework Agreement with external providers to deliver a high quality Support at Home service (Home Support and Supported Living) for older people and people with physical disabilities, learning disabilities, mental health difficulties and people who are or have been subject to the criminal justice system.</p> <p>Falkirk Council is committed to personalisation and improving outcomes for people who use our services, their carers and families. In order to improve outcomes services should be responsive, supportive, empowering and must reflect the needs and aspirations of both current and future service users, their carers and families.</p> <p>Falkirk Council through the Health and Social Care Partnership (H&SCP) has embarked on a journey to transform the way we commission and deliver support to people in their own homes. This new framework will support us and seeks, through a partnership approach with people using our services and partner providers, to operate a reablement and outcome based approach to the purchase and provision of care and support at home.</p>		Reference No. (if applicable):	

What is the Proposal?	Budget & Other Financial Decision		Policy (New or Change)		HR Policy & Practice	Change to Service Delivery / Service Design
	Yes		No		No	Yes
Who Does the Proposal Affect?	Service Users	Members of the Public	Employees	Job Applicants	Other, please specify:	
	Yes	No	Yes	No		
Identify the main aims and projected outcome of this proposal (please add date of each update):						
	During the lifetime of this framework it is envisaged that the council will fully implement the legislative requirements of self directed support.					
	During the lifetime of this framework it is envisaged that the council will develop outcome based service delivery arrangements.					
	During the lifetime of this framework it is envisaged that the council will apply a more robust reablement approach than that adopted to date.					
	During the lifetime of this framework it is envisaged that the council will initiate service costings through individual service user budgets.					
	<p>The H&SCP has identified three locality areas for service planning purposes. This is a legal requirement but will also better allow services to plan and to meet local needs and be adept to local circumstances. From 2018 it is envisaged that support at home services will, over time, be more closely linked to the 3 geographical areas shown below.</p> <ul style="list-style-type: none"> Falkirk Town (Central) Bo'ness, Grangemouth and Braes (East) Denny, Bonnybridge, Larbert and Stenhousemuir (West) 					

SECTION TWO: FINANCIAL INFORMATION

For budget changes ONLY please include information below:			Benchmark, e.g. Scottish Average
Current spend on this Service (£'000s):	Total:		
Reduction to this service budget (£'000s)	Per Annum:		
Increase to this service budget (£'000s)	Per Annum:		
If this is a change to a charge or concession please complete.	Current Annual Income Total:		
	Expected Annual Income Total:		
If this is a budget decision, when will the saving be achieved?	Start Date:		
	End Date (if any):		

SECTION THREE: EVIDENCE Please include any evidence or relevant information that has influenced the decisions contained in this EPIA. (This could include demographic profiles; audits; research; health needs assessments; national guidance or legislative requirements and how this relates to the protected characteristic groups)

A - Quantitative Evidence: This is evidence which is numerical and should include the number people who use the service and the number of people from the protected characteristic groups who might be affected by changes to the service.

Officers conducted a comprehensive review of the current framework using data from a number of sources which fed directly into an options and needs analysis. This analysis then informed consultation with stakeholders and the options concerned were developed from the outcome of these discussions. The data and information analysed as part of this review was sourced from:

Local & National Policy

Integration of Health and Social Care – The Public Bodies (Joint Working) (Scotland) Act 2014

Scottish Government 2020 Vision

National Care Standards

Scottish Government Guidance on the Procurement of Care and Support Services 2016

Self Directed Support – A National Strategy for Scotland & Social Care (Self Directed Support) (Scotland) Act 2013

Scotland's National Dementia Strategy 2016-19

Keys to Life

Procurement Reform (Scotland) Act 2014

Public Contracts (Scotland) Regulations 2015

Falkirk HSC Partnership Strategic Plan 2016-19

Spend Analysis

Spend information taken from Abacus and Integra

Market Analysis

Benchmarking with Other Local Authorities

Locality Profiles

Comparison Care Inspectorate Grades

Domiciliary Care Market Report 2015

Service Characteristics

Locality/Provider Breakdown

Community Care/Service user Breakdown

Locality Profiles

Service Specification Considerations

B - Qualitative Evidence: This is data which describes the effect or impact of a change on a group of people, e.g. some information provided as part of performance reporting.

Social - case studies; personal /group feedback / other:

There is a wide range of stakeholders in both Home Care and Community Care services. Extensive engagement with stakeholders was a strong feature of the procurement process.

To ensure that the requirements of stakeholders were met and maximum compliance achieved, a multi-disciplinary project team was established. The team comprised representatives from Procurement and Commissioning, Home Care, Falkirk Learning Disability Team, Occupational Therapy and the Community Care Teams.

To provide an early opportunity to engage with providers, a Prior Information Notice (PIN) was published inviting interested providers to meet with Falkirk Council to discuss the scope of the services at a series of workshops.

The project team met regularly to discuss the operation of the contract and to consider the options for the future of the contract (including feedback from the workshops) and gauge views about future requirements. Key messages from the workshops and team meetings that were discussed included:

- locality planning;
- fair working practices;
- purchase of block hours and commitment to minimum hours;
- support aligned to outcomes;
- use of technology to manage contract performance and to support service users;
- support the commissioning of Self Directed Support (SDS) options 1,2,3 and 4;
- nutrition
- policies including moving and handling and medication (administration);
- care inspectorate grades;
- notice periods for ending a package of care;
- national care standards;
- payment terms including unplanned absence;
- training;
- in-house delivery and its key responsibilities

The feedback from providers was positive with most confirming they would be interested in participating in a future arrangement. Key messages from the workshops included the:

- need for greater flexibility and creativity;
- importance of having clear processes;
- importance of early engagement to optimise opportunities for coproduction leading to effective support arrangements;
- acknowledgment that the complexity of service users' needs is increasing and this needs to be recognised;
- need to consider how the contract will respond to future changes i.e. Living Wage

Consultation with carers of people using care at home services was facilitated by the Falkirk and Clackmannanshire Carers Centre through a survey and officers attendance at a Carers Forum. Feedback highlighted a number of factors that are important to Carers such as;

- involvement in service review arrangements;
- to be notified of service changes;
- ensuring avoidance of short notice service cancellations where carer breaks were scheduled;
- ensuring as far as practical continuity of care and support staff.

Service user feedback was drawn from surveys carried out by home care and community care providers. Findings from that process highlighted;

- improved service information, including complaints information;
- the importance of continuity of care;
- improved adherence to service delivery times;
- improved and timely notification of service and support worker changes

Best Judgement:

Has best judgement been used in place of data / research / evidence?	No
Who provided the best judgement and what was this based on?	
What gaps in data / information were identified?	
Is further research necessary?	No
If NO, please state why.	Comprehensive research and consultation undertaken

SECTION FOUR: ENGAGEMENT Engagement with individuals or organisations affected by the policy or proposal

Has the proposal / policy / project been subject to engagement?	Yes	
If YES, please state who was engagement with.	Internal stakeholders Care Providers Carers / Service Users	
Engagement with users of service / stakeholders should take place. If NO engagement has been conducted, please state why.		
How was the engagement carried out?	What were the results from the engagement? Please list...	
Focus Group	Yes / No	Early engagement to optimise opportunities for coproduction leading to effective support arrangements.
Survey	Yes / No	Service user involvement in service review arrangements.
Display / Exhibitions	Yes / No	
User Panels	Yes / No	
Public Event	Yes / No	
Other: please specify		
Has the proposal / policy / project been reviewed / changed as a result of the engagement?	The specification has been strengthened	
Have the results of the engagement been fed back to the consultees?	Yes	
Is further engagement recommended?	On-going engagement throughout the duration of the Framework Agreement.	

SECTION FIVE: ASSESSING THE IMPACT

Engagement with individuals or organisations affected by the policy or proposal

Equality Protected Characteristics: What will the impact of implementing this proposal be on people who share characteristics protected by the Equality Act 2010 or are likely to be affected by the proposal / policy / project? This section allows you to consider other impacts, e.g. poverty, health inequalities, community justice, public protection etc.

Protected Characteristic	Neutral Impact	Positive Impact	Negative Impact	Please provide evidence of the impact on this protected characteristic.
Age		It is anticipated that the enhanced service specification will provide a positive impact for all individuals receiving support. Please refer to the evidence section for further details.		There is no change to the scope of services being commissioned through the new HBC contracts. Any individual deemed eligible by the council and CCGs for support will continue to receive HBC funded services.
Disability				
Sex				The enhanced specification empowers providers to move from “task” to “outcomes” based commissioning, promoting greater personalisation, independence and outcomes focused approach for individuals. <ul style="list-style-type: none"> • Transparency and management of missed and late calls – providers will know in real time if service delivery is late or to be missed – with consequences for poor performance • More flexible services as total time allocated can be managed more proactively • Individuals will have a copy of a easy read specification based on the outcomes individuals should expect from the service • More responsive “pick up” times of packages, especially for hospital discharge, means packages should commence sooner • Putting requirement on providers to engage individuals in their communities, in support of Family, Friends and Community Support agenda • The council will publish their "qualified providers" to assist self funders' when independently selecting a care provider.
Ethnicity				
Religion / Belief / non-Belief				
Sexual Orientation				
Transgender				
Pregnancy / Maternity				
Marriage / Civil Partnership				
Other, socio-economic status, e.g. Poverty		Fair Working Practices are embedded into the contract evaluation and award process.		With a well-motivated, well led and skilled workforce our care providers will be better placed to support people to live safely in their homes and communities.
Other				

Public Sector Equality Duty: Scottish Public Authorities must have ‘due regard’ to the need to eliminate unlawful discrimination, advance quality of opportunity and foster good relations. Scottish specific duties include:

duty to report progress on mainstreaming the equality duty; duty to publish equality outcomes and report progress; duty to assess and review policies and practices; duty to gather and use employee information; duty to publish gender pay gap information; duty to publish statements on equal pay, etc; duty to consider award criteria and conditions in relation to public procurement; duty to publish in a manner that is accessible, etc.; duty to consider other matters; and, duty of the Scottish Ministers to publish proposals to enable better performance.

	Evidence of Due Regard	Negative Impact
Eliminate Unlawful Discrimination (harassment, victimisation and other prohibited conduct):	Specification requires Providers to have policies on: <ul style="list-style-type: none"> • Equal Opportunity • Recruitment & Selection Terms and Conditions require compliance with Equality and Human Right legislation	
Advance Equality of Opportunity:	Specification requires Providers to have policies on: <ul style="list-style-type: none"> • Staff Supervision including Appraisal • Staffing and Training Fair Working Practices are embedded into the contract evaluation and award process.	
Foster Good Relations (promoting understanding and reducing prejudice):	On-going engagement with Providers through quarterly meetings will promote fair work practices and equal opportunities.	

SECTION SIX: PARTNERS / OTHER STAKEHOLDERS

Which sectors are likely to have an interest in or be affected by the proposal / policy / project?		Describe the interest / affect.
Business	Yes	Private Sector Care Providers will be interested in participating in the Framework Agreement.
Councils	Yes	Other Local Authorities will be interested in learning more about the approach we have taken.
Education Sector	No	
Fire	No	
NHS	Yes	The NHS is represented in the IJB which is responsible for planning, resourcing and the operational oversight of a wide range of health and social care services.
IJB (Integration Joint Board)	Yes	The IJB has responsibility for budgets and services being delivered in accordance with the Falkirk Health & Social Care Partnership Strategic Plan
Police	No	
Third Sector	Yes	Third Sector Care Providers will be interested in participating in the Framework Agreement.
Other(s): please list and describe the nature of the relationship / impact		

SECTION SEVEN: ACTION PLANNING

Mitigating Actions: As a result of performing this assessment, what actions are proposed to remove or reduce any risks of adverse outcomes identified on employees, service users or other people who share characteristics protected by the Equality Act

Identified Impact	To Who	Recommendation to address the issues raised	Lead Officer	Evaluation and Review Date	Strategic Reference to Corporate Plan / Service Plan / Quality Outcomes
The EPIA demonstrates the proposal is robust; there is no potential for discrimination and opportunities to promote equality have been taken. All priorities, outcomes and actions contained within the tender documents are designed to contribute towards improving the services to people requiring support at home.					

No Mitigating Actions

Where a negative impact on diverse communities has been identified what is the justification for continuing with the proposal / policy / project and why the recommendation cannot be implemented?

Are actions being reported to Members?

If yes when and how?

Yes.

Executive

February

2018

IJB

April 2018

SECTION EIGHT: ASSESSMENT OUTCOME

Only one of following statements best matches your assessment of this proposal / policy / project. Please select on and provide your reasons.		
No major change required	Yes	Overall the tender for Support at Home Services is designed to benefit all protected characteristics and it is anticipated there will be neutral and positive impacts for the protected characteristics listed above.
The proposal has to be adjusted to reduce impact on protected characteristic groups		
Continue with the proposal but it is not possible to remove all the risk to protected characteristic groups		
Stop the proposal as this is potentially in breach of equality legislation		

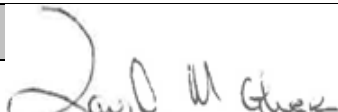
SECTION NINE: LEAD OFFICER SIGN OFF

Lead Officer:			
Signature:		Date:	

SECTION TEN: EPIA TASK GROUP USE ONLY

OVERALL ASSESSMENT OF EPIA: Has the EPIA demonstrated the use of data, appropriate engagement, identified mitigating actions as well as ownership and appropriate review of actions to confidently demonstrate compliance with the general and public sector equality duties?		Yes / No
ASSESSMENT FINDINGS		
<p>If YES, use this box to highlight evidence in support of the assessment of the EPIA</p> <p>If NO, use this box to highlight actions needed to improve the EPIA</p>		
Where adverse impact on diverse communities has been identified and it is intended to continue with the proposal / policy / project, has justification for continuing <u>without making changes been made</u> ?	Yes / No	If YES, please describe:
LEVEL OF IMPACT: The EPIA Task Group has agreed the following level of impact on the protected characteristic groups highlighted within the EPIA:		
LEVEL	COMMENTS	
HIGH	Yes / No	
MEDIUM	Yes / No	
LOW	Yes / No	

SECTION ELEVEN: CHIEF OFFICER SIGN OFF

Director / Head of Service:			
Signature:		Date:	8 March 2018