

Equality Impact Assessment

Title of proposal (include forward plan reference if available)	Retender and Consultation on Advocacy Services and Retender
Directorate and Service Area	Prevention & Protection Directorate
Name and title of Lead Officer completing this EIA	Beverley Stevens – Commissioning Officer Justin Haywood, Operations Manager
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Names and titles of other officers involved in completing this EIA	Helen Green, Commissioning Manager Beverley Stevens, Commissioning Officer
Partners involved with the EIA where jointly completed	None
Date EIA completed	4 August 2020
Date EIA signed off or agreed by Director or Executive Director	
Name of Director or Executive Director signing off EIA	Neil Cox - Director of Prevention & Protection
Date EIA considered by Cabinet Member	

See [Equality Impact Assessment Guidance](#) for key prompts that must be addressed for all questions

**1. The purpose of the proposal or decision required
(Please provide as much information as possible)**

1. Approve the commencement of a consultation with the service users and other stakeholders of Generic advocacy in Sandwell. The proposal will be to tighten access criteria for this advocacy to release capacity for statutory advocacy. This consultation will also include current staff who refer service users to these services.
2. Requests a further report be presented to Cabinet, to agree the future plans for generic advocacy in Sandwell, following completion of the consultation.
3. Requests approval to retender for –

A contract for statutory advocacy services (IMCA, IMHA, Care Act and NHS Complaints) for 2 years with a 1 year extension– with a team of advocates who are trained to deliver all forms of advocacy. A contract for Generic Advocacy for 1 year starting April 2021, to enable findings of consultation to be reported and recommendations implemented.

2. Evidence used/considered

There are 5 advocacy contracts in Sandwell – 4 need to be retendered as they expire in March 2021, the other has been re-procured in 2020.

All 4 contracts involve statutory services and generic advocacy which is non statutory. The services are for vulnerable residents in Sandwell (or those legally entitled to the advocacy because Sandwell are paying for their care or they are detained in a hospital in Sandwell) with the overall aim of ensuring that these people access support to get their views heard on issues and decisions that affect their lives. The services are described in Appendix 1 of the Cabinet Report.

Analysis of take up of the advocacy services since the start of current contracts in April 2016 have been analysed to demonstrate current and

future capacity, movement and expected demand across the services, in terms of the protected characteristics in the Equality Act 2010.

Discussions with relevant staff, partners and contractors about the advocacy contracts have been recorded and considered, including any issues raised by casework, and their views about the impact of the introduction of LPS and Coronavirus Act, and lockdown on advocacy.

3. Consultation

Commissioners have identified individuals and groups who will be consulted if approval is given to do so. These will include:

Stakeholders who refer or use the services
Staff who refer to the services
Service users

Approval is sought for a 12-week consultation period. Further paper will be presented to Cabinet outlining the findings of the consultation, and further proposals for advocacy.

4. Assess likely impact

At this stage of consultation we expect the impact to be limited, but there may be an impact on the service users who are concerned about the possibility of change or reductions in advocacy services, and where they will access support in future.

The consultation will include maintenance and updating of the EIA to provide a breakdown of stakeholders by protected characteristics. The protected characteristics most likely to impact on the service users are age, parental responsibility and disability.

Please complete the table below at 4a to identify the likely impact on specific protected characteristics

4a. Use the table to show:

- Where you think that the strategy, project or policy could have a negative impact on any of the equality strands (protected characteristics), that is it could disadvantage them or if there is no impact, please note the evidence and/or reasons for this.
- Where you think that the strategy, project or policy could have a positive impact on any of the groups or contribute to promoting equality, equal opportunities or improving relationships within equality characteristics.

Protected Characteristic	Positive Impact	Negative Impact	No Impact	Reason and evidence (Provide details of specific groups affected even for no impact and where negative impact has been identified what mitigating actions can we take?)
	✓	✓	✓	
Age	✓			Many of the service users of non-statutory services are older adults, and they will be given opportunity to comment on the proposals, and how they can be supported.
Disability	✓			Most of the service users of non-statutory and statutory advocacy have some form of disability, and they will given the opportunity to comment on the proposals and how they can be supported.

Gender reassignment			✓	Generic advocacy and inpatient mental health advocacy does not cover support specifically around this, but may deliver this in response to related issues that are presented eg communication issues as a result of gender reassignment.
Marriage and civil partnership			✓	Generic advocacy and inpatient mental health advocacy does not cover support to personal relationships, but may deliver this in response to related issues that are presented – eg housing issues as a result of relationship breakdown.
Pregnancy and maternity	✓			About a third of the non- statutory Generic Advocate time is taken up by parents with learning disabilities and/or mental health issues who are undergoing child protection processes. These parents are in high need of advocacy support and the consultation, while causing uncertainty in the short term, will offer these parents an opportunity to express their needs and how they can be most effectively supported. Many but not all of the parents are mothers.
Race			✓	Many of the service users of non statutory services are black and minority ethnic groups, and they will be given opportunity to comment on the proposals, and how they can be supported.

Religion or belief			✓	Community advocacy and inpatient mental health advocacy does not cover support specifically around this, but may provide support around related issues. eg religious prejudice and hate crime
Sex			✓	<p>Many of the service users of non- statutory advocacy are women, including mothers whose children may be removed due to child protection proceedings. They will be given opportunity to say how they can be best supported.</p> <p>The IMHA and inpatient mental health services are delivered in mental health units in Sandwell – some are specifically for men and thus there are relatively higher numbers of male service users in these services who may benefit from the changes proposed.</p>
Sexual orientation			✓	Generic advocacy and inpatient mental health advocacy does not cover support specifically around this – but may provide support around related issues eg discrimination at work.
Other	✓			Adults who are assessed as lacking mental capacity, or with mental health condition and needing to be detained, or as having a substantial difficulty in engaging with social care processes, use IMCA, IMHA, Care Act advocacy may benefit from the proposed changes, which will increase capacity to deliver these services. These people may have dementia, head injury or complex needs which affect their need for these services.

Does this EIA require a full impact assessment? Yes No

Full EIA is not required at this time, however a full EIA will be undertaken in due course.

If there are no adverse impacts or any issues of concern or you can adequately explain or justify them, then you do not need to go any further. You have completed the screening stage. You must, however, complete sections 7 and 9 and publish the EIA as it stands.

If you have answered yes to the above, please complete the questions below referring to the guidance document.

5. What actions can be taken to mitigate any adverse impacts?

Not applicable. There is the possibility of uncertainty arising from the consultation and stress about changes or reductions to services but this will be managed by careful management of the key messages.

6. As a result of the EIA what decision or actions are being proposed in relation to the original proposals?

7. Monitoring arrangements

The Project Group overseeing the consultation, will report into the Commissioning team, who will have full governance of the project.

Milestones will be agreed with the Group and will be monitored and reported on as required.

8. Action planning

You may wish to use the action plan template below

9. Publish the EIA

Where can I get additional information, advice and guidance?

In the first instance, please consult the accompanying guide “Equality Impact Assessment Guidance”

Practical advice, guidance and support

Help and advice on undertaking an EIA or receiving training related to equalities legislation and EIAs is available to **all managers** across the council from officers within Service Improvement. The officers within Service Improvement will also provide overview quality assurance checks on completed EIA documents.

Please contact:

Kashmir Singh - 0121 569 3828