

CABINET MEETING: 2 APRIL 2015

**CONTRACT AWARD IN RELATION TO THE SUPPORTED LIVING
PROVISION FOR ADULTS WITH A LEARNING DISABILITY**

REPORT OF DIRECTOR OF HEALTH AND SOCIAL CARE

AGENDA ITEM: 8

**PORTFOLIO: HEALTH, HOUSING & WELLBEING (COUNCILLOR SUSAN
ELSMORE)**

Appendices 2a & 2b to this report are not for publication as they contain exempt information of the description in paragraph(s) 14 of Part 4 and paragraph 21 of Part 5 of Schedule 12A of the Local Government Act 1972

Reason for This Report

1. The Health & Social Care Directorate reported on this matter to Cabinet on 9 October 2014, and Cabinet authorised the support model for supported living provision for adults with a learning disability and the commencement of a procurement process to secure the supported living provision. The authorised procurement process has now been undertaken. This report advises on the outcome of the procurement process and requires authorisation to award the contracts.

Background

2. On 9 October 2014 the Cabinet delegated authority to the Director Health & Social Care, in consultation with the Cabinet Member (Health, Housing & Well-Being), the Council's Section 151 Officer, the County Solicitor and the Council's Monitoring Officer to determine all aspects of the procurement process and the model (including approving the evaluation criteria to be used, and authorising the award of the contracts) and all ancillary matters relating to the procurement.
3. In order to implement the supported living model, offering citizens choice and control over their lives in the community, the Health & Social Care Directorate has undertaken a full programme of consultation and engagement with citizens, families and the social care provider market to ensure that the provider market can meet identified needs and deliver high quality provision.

4. The Health & Social Care Directorate has developed, implemented and evaluated a range of models of supported living. The agreed model of support has been tailored to the needs, wishes and interests of citizens, utilising a block contract for a fixed term of three years with the option to extend for a further period or periods equating to no more than two years provided that the contract does not extend beyond 31 July 2020. The Directorate has engaged and worked with providers in the market to deliver a sustainable supported living model which is outcome-focussed, represents value for money and offers citizens more choice, control and independence.
5. At the commencement of the contract the number of citizens who use services will be known. However, over the term of the contract this is likely to fluctuate and may increase. We anticipate that further schemes will be developed over the term of the contract and these will need to be incorporated via variation mechanisms which are set out in the draft contract terms and conditions, subject to budget.
6. The Council will continue to review the implementation of the Social Services & Well Being (Wales) Act 2014; the Welsh Government changes to Supporting People Guidance including grant funding changes and the impact this will have on the delivery on the future services.
7. Whilst the services fall within Part B, the Public Contract Regulations 2006 (“the 2006 Regulations”) only apply in part, (for example, there is no mandatory requirement to advertise the procurement in OJEU nor to comply with the procurement procedures set out in the procurement regulations). Nonetheless, the Directorate chose to issue a voluntary OJEU notice in the interests of being open and transparent, and to undertake the procurement using the Restricted Procedure in line with the minimum timescales set out in the procurement regulations. An Official Journal European Union (OJEU) notice for this procurement was published via the Sell2Wales website on October 24th 2014.
8. Following the publication of the OJEU notice, a bidder’s forum was held in conjunction with Business Wales for suppliers who had expressed an interest in delivering this service. At this event information regarding the Pre Qualification Questionnaire (PQQ) stage of the procurement was presented to the market place. A question and answer session provided suppliers with the opportunity to ask questions and provide feedback to the Council regarding the PQQ documentation. The Directorate received positive feedback from providers about this process via Business Wales. Further, Business Wales supported bidders to complete the Invitation to Tender (ITT).
9. It should be noted that the proposed start date of the proposed new contracts is 1st August 2015. The proposal is to award two contracts per locality, one for the provision of personal domiciliary care and one for the provision of housing related support (the latter funded by Supporting People Grant).

Pre Qualification Questionnaire Stage

10. The PQQ represented the first part of the two-stage selection and award tender process. The threshold score for the PQQ stage was 50%. Suppliers who failed to meet the threshold score of 50% were not invited to tender.
11. The evaluation of the PQQ was undertaken by a staff team from the Council including Health & Social Care, Commissioning and Procurement, Finance, Health and Safety and Abertawe Bro Morgannwg University (ABMU) Health Board as well as an officer from Cardiff Third Sector Council (C3SC) using the predetermined evaluation criteria. Each PQQ submission was assessed independently by officers who then met as a team to moderate, verify their scoring and identified those organisations who passed the PQQ evaluation threshold.
12. Of the 34 PQQ submissions, 30 organisations were successful in passing the PQQ minimum threshold and formal approval was given by the Director Health & Social Care to shortlist 30 successful organisations and to issue them with Invitation to Tender documentation.

Evaluation Criteria & Weightings

13. Following the PQQ stage, of the 30 organisations invited to tender: 15 organisations submitted tenders. Submissions were evaluated on the basis of the “most economically advantageous tender” (known as MEAT) using quality and price criteria. The overarching evaluation weighting between quality and price was 50% and 50% respectively as previously approved by Cabinet.
14. The quality sub-criteria was broken down as follows for evaluation purposes (see overleaf):

Template Evaluation Criteria		Weighting %
Service Delivery		
Personal Domiciliary Care Delivery	10%	20%
Housing Related Support	5%	
Transition and Implementation	5%	
Person-Centred Outcomes		
Choice and Control	20%	30%
Values & Principles	10%	
Safeguarding		
Compliance	5%	10%
Risk Assessment & Management	5%	
Staffing and Management		
Organisational Resources	5%	10%
Organisational Procedures	5%	
Partnership Working		
Partnership Working	10%	10%

Performance Management		
Governance & Quality Assurance	5%	10%
Data Management	5%	
Delivering Outcomes (Presentation to Service Users)		10%
Total		100%

15. The Supported Living Service was divided into 6 geographical localities across the city in order to encourage smaller and medium sized providers to participate in the procurement. For the purposes of the procurement process localities were referred to as 'lots'. Tenderers were able to bid for more than one lot, but no one bidder would be awarded more than two lots. It was for tenderer's to determine if they wish to bid for one or more lots.

Pricing Schedule and Combined Lot Bids

16. As part of their tender submission tenderers were required to complete a Pricing Schedule.
17. In respect of Personal Domiciliary Care element, tenderers were required to clearly set out the annual price for the provision of the service over each of the five years of the contract. To ensure tenderers were able to submit an informed price, the tender documentation provided details about the level of personal domiciliary care support required for all current service users currently living in each locality. This was also supported by a pen picture of need for each individual in each supported housing scheme.
18. The tenderers were also given the opportunity to offer two combined lot bids where they believed a bid for two combined lots could deliver greater efficiencies. Any combined lot bids were restricted to a combination of two lots and providers were required to submit details of the five year price for each lot.
19. The pricing schedule also indicated the level of Supporting People grant funding for the tenderers to deliver housing related support. It was explained that the price for housing related support has been set for the first year, but with a caveat that that the Supporting People grant may reduce over the period of the contract. Tenderers were required to confirm that they accepted these costs for the Housing Related Support Services.

Evaluation Methodology

20. Bids for each lot were evaluated using the pre-disclosed evaluation criteria and weightings. The quality score for each tenderer was determined in accordance with the evaluation criteria and weightings set out above. The evaluation considered the tenderer's written submission and two presentations. Tenderers presented to one evaluation team consisting of Health & Social Care officers and Family carers/parents of service users in respect of how they would deliver person centred

outcomes. Another evaluation team consisting of service users currently living in Supported Accommodation were given a presentation in terms of how providers would support them 'to live their lives'. This evaluation team was facilitated by Cardiff People First advocacy service. Both evaluation teams were moderated by Commissioning & Procurement officers.

21. In addition to the pen picture of need, a universal specification for Learning Disability Services, Supported Living and a specification for Housing Related Support was published to give information to tenders about the quality and service delivery standards the Council requires. Tender method statements were developed in line with the specifications and allocated weightings for the tender evaluation were applied. The tenders responded to the method statements in their submissions and these were evaluated by the team
22. The written submission was evaluated by ABMU Health Board and staff from the Council's Health & Social Care Learning Disability Service, Human Resources, Finance team, Health & Safety and Supporting People. During the procurement process support has been provided by Legal Service and Commissioning and Procurement officers.
23. The tenderer with the highest quality score was awarded the maximum available score (50%) and all other tenderers were then awarded a score relative to the highest quality score. The price score was determined by comparing the total five year price in single and combined lots submitted by the tenderers. Within each lot the tenderer that submitted the lowest cost bid was awarded the maximum available score (50%) and all other tenderers were awarded a score relative to the lowest cost bid.
24. Based on the tenderers combined price and quality score, tenderers were ranked within each single and combined lot. In addition the evaluation team also considered whether the single and combined lot bids submitted were the most economically advantageous for the Council. The Council has reserved the right to ensure lots are awarded based on the overall best value combination.
25. The Health & Social Care Directorate would like to acknowledge the preparation and the evaluation methodology of this tender as an excellent example of partnership working between citizens who live in Supported Accommodation in Cardiff, the 3rd sector, family carers/parents, Abertawe Bro Morgannwg University (ABMU) Health Board staff, the Council's Health & Social Care, Commissioning & Procurement, Supporting People Team, Finance, Legal, Human Resources and Health & Safety Teams.
26. The proposed timetable for this next stage of the procurement and proposed award is detailed below together with details of those stages which have already been completed:

Stage	Date(s)/time
Issue of Invitation to Tender	18 th December 2014 - completed
Deadline for clarification questions	12 th January 2015 - completed
Closing date for submission of Tenders	26 th January 2015 - completed
Evaluation of Tenders	27 th January – 24 th February 2015 - completed
Tenderer interviews/ presentations	w/c 2 nd & 9 th February 2015 - completed
CASSC paper submission	25 th February 2015 - completed
CASSC Committee	3 rd March 2015
Cabinet paper submission	26 th February 2015 - completed
Cabinet	2 nd April 2015
Expected date of award of Contract(s)	2 nd April
Standstill and Call in period	6 th published 7 th - 16 th April 2015
Expected date of award of Contract(s)	17 th April 2015
Transition period	17 th April 2015 to 31 st July 2015
Sign off Contracts	17 th April 2015 to 31 st July 2015
Contract commencement	1 st August 2015

Preferred Bidders

27. Following completion of the evaluation process to determine the Most Economically Advantageous Tenders using the predetermined evaluation criteria the table below contains the details of the successful bidders for each locality / lot:

Locality / Lot	1	2	3	4	5	6
Preferred Bidder	Dimensions Cymru	Dimensions Cymru	Innovate Trust	Innovate Trust	Mirus Cymru	Mirus Cymru

The detailed evaluation matrix, scoring and pricing information are contained in Appendix 2a and 2b.

Issues and Risks

28. The Cabinet Report of 9th October 2014 indicated that over the period of the contract, schedules the number of service users may vary, fluctuation in numbers of assessed hours of care required and an affordability threshold would need to be applied on each locality based on the number of schemes and assessed need. Although no overall affordability threshold has been set, guidance was provided to tenderers on a locality basis in relation to the picture and definition of need which informed their submissions. The Health & Social Care Directorate proposes the award of contract based on quality and price which has also delivered the best overall value for the Council. (See Appendix 2a and 2b).

29. The Directorate indicated to tenderers that account needed to be taken of the 'Esperon and Whittlestone judgement' on sleep-in provision terms and conditions. This was highlighted in the ITT documentation and tenderers were advised to take account of this when making their submissions.
30. If the proposed recommendation is approved, the procurement process may give rise to the Transfer of Undertakings (Protection of Employment) Regulations (TUPE) between providers. Anonymised TUPE Information was provided as part of the tender documentation and both the existing block contracts and the draft contract terms and conditions for the new contract contained TUPE provisions. Regarding transition for existing service users, it is acknowledged that service users may be concerned if staff choose not to transfer to new providers. The proposed contract award will mitigate this further and the transition phase will assist to manage any anxieties.
31. It is important to note implications continue in relation to Supporting People Grant made available from the Welsh Government and the potential for changes in the grant funding levels over the life of the contract. However, Tenderers were asked to take this into account in their submissions. The draft contract terms and conditions for the housing related support services, which were included in the tender pack, reflected the uncertainty with regard to the level of grant funding over the term of the contract and reserved a right for the Council to vary the contract payment should the level of grant funding vary.
32. During consultation, stakeholders reported that to undertake a competitive tender process at this time would de-stabilise the provision and continuity of care across the sector. However there is a requirement to competitively tender the service and the Health & Social Care Directorate in conjunction with citizens and families will ensure that disruption to individuals is minimised. A consideration remains the potential change of care staff; however the Transfer of Undertakings (Protection of Employment) Regulations may apply between current and awarded providers for those staff working in the service.

Communication

33. The Supported Living Project including the tender exercise has been managed using the PQA governance framework within the Council.
34. The Directorate has worked with the Corporate Communications team to develop a communication and engagement plan to ensure that all citizens and stakeholders are made aware of decisions being made. This is a live document and regularly updated.

Equality and Diversity

35. A full Equality Impact Assessment has been developed for the Supported Living Services tender see Appendix 1.

Reason for Recommendations

36. To enable the award of the Supported Living Services contracts to the successful tenderers

Legal Implications

37. The proposed recommendation is to award the Supported Living Services contracts to the successful tenderers named in the table, set out under paragraph 27 of the report, with such contracts to commence on 1 August 2015.
38. This is a relatively substantial procurement and the proposed contracts are of a significant high value. To that end, previous legal advice was given to the effect that whilst the services being procured fall within Part B of the Public Contract Regulations 2006, as amended, (“the 2006 Regulations”), and thus are not subject to the full ambit of the 2006 Regulations, nonetheless in order to comply with the EC Treaty based principles of transparency, equal treatment, non discrimination, and proportionality (such principles applying to Part B services) it is recommended that the contract notice is advertised in the OJEU, that the minimum timescales referred to in the procurement regulations are adhered to, that the procurement process is carried out in an open and transparent manner and that all bidders are treated equally. It is understood that this has been done.
39. Full legal advice has been provided with regard to the procurement process and in relation to the drafting of the draft terms and conditions of contract.
40. In line with good practice, if the recommendation is approved, then it is proposed that the successful and unsuccessful bidders will be notified of the outcome of the evaluation along with their scores, the winning score and feedback from the evaluation panel. The decision to award the contracts, if given, will be subject to the Council’s “call-in” period together with a voluntary standstill period. Accordingly the letters to be sent to the bidders notifying them of the outcome of the procurement will be made strictly subject to the Council’s call-in period and the voluntary standstill period. What this means is that the contracts cannot be formally concluded until the call-in period and the standstill period have expired.
41. It is noted that reference is made in the body of the report to the Esparon and Whittlestone judgements. Put simply, these judgements confirmed that where a carer’s presence at a premises is part of his/her work, the hours spent at the premises are classed as working time for the purposes of the National Minimum Wage legislation, irrespective of the level of activity – that is whether or not the carer is called upon to assist the service user during the sleep in shift. There was a concern that bidders may not take these judgements into account when submitting their bids, in particular with reference to calculating their bid prices. Accordingly Legal Services had previously advised that a caveat was inserted into the tender documentation along the lines that bidders were to note that their

bid prices will be deemed to have taken account of their tender bids complying with all relevant legislation and case-law, including, without limitation the Esparon and Whittlestone cases. It is understood that this caveat was inserted into the tender documentation which was issued to bidders.

42. In considering this matter the decision maker must have regard to the Council's duties under the Equality Act 2010. Pursuant to these legal duties Councils must, in making decisions, have due regard to the need to (1) eliminate unlawful discrimination, (2) advance equality of opportunity and (3) foster good relations on the basis of protected characteristics. Protected characteristics are: (a). Age, (b) Gender reassignment(c) Sex (d) Race – including ethnic or national origin, colour or nationality, (e) Disability, (f) Pregnancy and maternity, (g) Marriage and civil partnership, (h)Sexual orientation (i)Religion or belief – including lack of belief. The report identifies that an Equality Impact Assessment has been carried out and is appended at Appendix 1. The purpose of the Equality Impact Assessment is to ensure that the Council has understood the potential impacts of the proposal in terms of equality so that it can ensure that it is making proportionate and rational decisions having due regard to its public sector equality duty. The decision maker must have due regard to the Equality Impact Assessment in making its decision.

Financial Implications

43. The contracts for supported living services for adults with learning disabilities, as outlined in this report, represent a significant proportion of Health & Social Care expenditure. The overall current cost of this service, when combined with housing related support, which also formed part of the tender process is £16.450 million. The sum of the bids offered by the successful organisations for the supported living and housing related support contracts in each locality shows a total cost over the potential five-year life of the contract of £77.992 million. This is based on annual contract sums including some slight increases towards the latter part of the contract term. It is anticipated that this can be funded from within the existing resources available to this service after taking into account the proposed budget saving of £431,000 in 2015/16 and further proposed savings in future years. The availability of Supporting People funding to support the housing related support element of the contract may also be subject to reductions in future years. The possibility of this was referred to in the pricing schedules and any reductions in funding will have to be managed in conjunction with the providers.
44. The contract is not due to commence until 1st August 2015 and therefore there will only be a part year effect in relation to costs and savings in 2015/16. Overall, costs are anticipated to reduce by £653,000 in 2015/16 which after taking into account the proposed budget saving of £431,000 in that year provides an additional saving to the directorate of £222,000. Further savings also arise when the additional resources made available to meet the new responsibilities in relation to sleeping in arrangements are taken into account. The report notes that potential bidders were

informed of the need to take account of recent judgements in relation to terms and conditions affecting 'sleep-ins' and it is assumed that tenderers took account of this when making their submissions. The additional resources relating to these contract arrangements are estimated to be £350,000. These savings will support the directorate in achieving its overall budget saving target for 2015/16. This includes the proposed saving of £1.926 million which is based on improving efficiencies in strategic commissioning across all service areas within the Directorate.

Human Resources Implications

45. The recommendation in this report applies to a contract award to external providers and therefore there are no Human Resource issues for the Council. There may be Transfer of Undertakings (protection of Employment) Regulations implications where there is any change of provider. This will be between the outgoing and incoming providers which will be managed by them and there are no implications for Council staff.

RECOMMENDATIONS

The Cabinet is recommended to authorise the award of the Supported Living Services contracts to the successful tenderers named in the table set out under paragraph 27 of the report in respect of the relevant localities, with such contracts to commence on 1 August 2015.

SIÂN WALKER

Director

27 March 2015

The following Appendices are attached

Appendix 1 – Equality Impact Assessment

Appendix 2a & 2b – Evaluation matrix and scoring information (*confidential*)



EQUALITY IMPACT ASSESSMENT

Policy/Strategy/Project/Procedure/Service/Function Title: External supported living services for people with learning disabilities
New/Existing/Updating/Amending: Existing

Who is responsible for developing and implementing the Policy / Strategy / Project / Procedure / Service / Function?	
Name: Amanda Phillips	Job Title: Operational Manager LD
Service Team: Health & Social Care	Service Area: Health & Social Care
Assessment Date: 23/02/2015	

1. What are the objectives of the Policy / Strategy / Project / Procedure / Service / Function?

<p>The external Supported Living Services (SLS) project will:</p> <ul style="list-style-type: none"> • Re-commission and procure Cardiff's supported living service. This service is provided by independent sector providers to 257 people with a learning disability. This project includes the re-commissioning of both domiciliary care and Housing Related Support services. • Manage a competitive tender process for the replacement of the existing arrangements. To be concluded 31st July 2015. The new contracts will start on 1st August 2015. • Develop a supported living service which has taken into account the comments received through consultation opportunities. • Develop a supported living model which is flexible enabling service users to have choice and control over their own lives. • Develop a supported living service which secures best value for money for the Council whilst providing a high quality of service for the service users.
--

2. Please provide background information on the Policy / Strategy / Project / Procedure / Service / Function and any research done [e.g. service users data against demographic statistics, similar EIAs done etc.]

<p>Background</p> <p>The aim of supported living is to achieve choice, control and community inclusion for adults with a Learning Disability to ensure their individual needs are met. The main principles of supported living are that people with learning disabilities own or rent their home and have control over the support they get, who they live with (if anyone) and how they live their lives through the support from externally commissioned domiciliary care and housing related support services.</p> <p>Supported living assumes that all people with learning disabilities, regardless of the level or type of disability, are able to make choices about how to live their lives even if the person does not make choices in conventional ways. Supporting people to have their own home choice and control and a decent income are enabling factors offering people with a learning disability citizenship and social inclusion.</p> <p>Supported living models in Cardiff include:</p> <ul style="list-style-type: none"> • living in a rented or owned property and getting an individual support package
--

- sharing with others in a rented property (most Registered Social Landlord) and each person getting an individual support package
- extra care or sheltered housing
- lodging in someone else's home and getting an individual support package (Adult Placement/ Shared Lives)
- living in an extension to a family home and getting an individual support package
- living in a network of houses or flats and supporting others as well as getting support (core & cluster accommodation & support)
- Residential care provision

As with housing, a mixed range of support options need to be available that can be tailored to meet individual need. With the introduction of direct payment and direct payments for people not deemed to have mental capacity, it is already becoming evident that people are opting for a range of flexible and natural support options rather than buying into services with fixed levels of support. There is no one housing and no one support option that works for everybody.

Demand Analysis

See the LD Commissioning Strategy 2012 – 2017 for an overview of the general population data.

As set out in the strategy the demographic indicate about 40 young people move into the service area each year at the age of 18 years as they move through transition from Children's Services. We have also found that the life expectancy of adults with LD is improving which has an impact on LD provision. Our service users are living longer lives and with this can come a range of issues that may impact on individuals as they age for example there are a significant number of service users with learning disability on the dementia pathway.

A further consideration for the service area in this project is the number of people presenting with needs such as autism, challenging behaviour and complex needs as the development of supported living will need to take into account these specialist requirements within the provision of the supported living service.

There are currently 257 service users living in supported living schemes receiving a service from an external provider. There are over one hundred service users identified as requiring the provision of supported living from now to the next 5 years.

There are block contracts in place with 4 external supported living providers to cover the 6 locality areas of Cardiff. There are some spot contracts in place which fall outside the 4 provider block contract framework. Housing Related Support is provided through the Supporting People programme.

The outcome of the extensive service area consultation work with stakeholders indicates a high satisfaction rate with supported living and a call for a greater number of core and cluster schemes.

The core and cluster service model supports a (**core**) accommodation for people living together and a (**cluster**) support service to other people in nearby properties. The core flat provides 24-hour Housing and Social Care support, 7 days per week x 52 weeks per year. Cluster tenants receive flexible hours of Housing support as agreed in their individual support plan. Rent for accommodation is covered by Housing Benefit.

Procurement of Supported Living Contract

The Health and Social Care Directorate has sought to secure the future supported living service from 1st August 2015 via a procurement process.

- On 9 October 2014 the Cabinet delegated authority to the Director Health & Social Care, in consultation with the Cabinet Member (Health, Housing & Well-Being), the Council's Section 151 Officer, the County Solicitor and the Council's Monitoring Officer to determine all aspects of the procurement process and the model (including approving the evaluation criteria to be used, and authorising the award of the contracts) and all ancillary matters relating to the procurement.
- At the start of the new contract on 1st August 2015, there will be two contracts commencing; one for the provision of personal domiciliary care and one for the provision of housing related support (the latter being funded by Supporting People Grant).
- Health & Social Care directorate undertook the tender process in two stage selection and award tender process. The detail of which is in the attached Cabinet Report Appendix 1.
- Following the PQQ stage, 15 organisations submitted tenders. These were evaluated on the basis of the "most economically advantageous tender" (known as MEAT) using quality and price criteria. The overarching evaluation weighting between quality and price was 50% and 50% respectively and this was previously approved by Cabinet.
- Bids for each lot were evaluated using the pre-disclosed evaluation criteria and weightings. Tenderers presented to one evaluation team consisting of Health and Social Care officers and parents in respect of how they would deliver person centred outcomes. Another evaluation team consisting of citizens living in Supported Accommodation were presented to regarding how providers would support them 'to live their lives'. This evaluation team was facilitated by Cardiff People First advocacy service. Both were moderated by Commissioning and Procurement officers.
- Based on the tenderers combined price and quality score, tenderers were ranked within each single and combined lot. In addition the evaluation team also considered whether the single and combined lot bids submitted were the most economically advantageous for the Council. The Council has reserved the right to ensure lots are awarded based on the overall best value combination.
- The proposed recommendation following the tender process will be presented to Community & Adult Service Scrutiny Committee on 4th March 2015 and a Cabinet Report 2nd April 2015.

The development of a wider model of supported living will have the following outcomes for people:

- A community based supported living model which supports a preventive and reablement agenda and the wellbeing initiatives as identified within Welsh Government policies and the Social Services and Wellbeing Act
- People will be able to access a range of facilities which are based in and around their localities/neighbourhood communities
- There will be the opportunity for people to access facilities which reflect their particular interests and aspirations
- The model facilitates a strategically planned approach to the work on a city wide basis

--

3 Assess Impact on the Protected Characteristics

3.1 Age

Will this Policy / Strategy / Project / Procedure / Service / Function have a **differential impact [positive / negative]** on younger / older people?

	Yes	No	N/A
Up to 18 years			✓
18 - 65 years	✓		
Over 65 years	✓		

Please give details/consequences of the differential impact, and provide supporting evidence, if any.

The service will have a positive impact because it takes into account the following:
 Adults with a learning disability are living longer and we are seeing a greater demand for suitable supported living provision from people over 65 years of age. With an increased life expectancy there is an increase in the number of adults with LD developing dementia. Suitability of specialist supported living provision for the ageing LD population will need to be considered.

Younger people coming into the service area are indicating that they require a range of supported living options and are looking for greater choice and flexibility from the service.

Family carers are increasingly drawn from a higher age band and they may need their own support through supported living availability. Older carers tend to want their children to be accommodated in the same community in order to build on existing relationships and facilitate visits from older carers who may have their own challenges with travel.

What action(s) can you take to address the differential impact?

LD dementia – LD Dementia project group has been established in partnership with health colleagues to develop a pathway to support service users with their accommodation, care and support from early stages of on-set to end of life.

Work with Housing Strategy to identify options to commission/de-commission supported living schemes based on the age needs of the service users e.g. location and ground floor bedrooms – use long term population forecasts to make sure the appropriate accommodation is available for the current and future population.

Individualised service – commission a supported living service that enables flexibility and choice for service users to access a range of opportunities that they believe would best meet their outcomes. People’s need specific to age would be identified in support plans.

Expectations set out in the competitive procurement tender process from provider organisations include training on the protected characteristics for their staff to ensure that support plans and delivery of support plans are able to meet the needs of each service user in relation to age.

Move-on process considers the best supported living placement for each individual and takes into account age of the service user and the others living in a scheme before placement is made.

3.2 Disability

Will this Policy / Strategy / Project / Procedure / Service / Function have a **differential impact** [positive / negative] on disabled people?

	Yes	No	N/A
Hearing Impairment	✓		
Physical Impairment	✓		
Visual Impairment	✓		
Learning Disability	✓		
Long-Standing Illness or Health Condition	✓		
Mental Health	✓		
Substance Misuse	✓		
Other			

Please give details/consequences of the differential impact, and provide supporting evidence, if any.

The nature of the service will have a positive impact as evidenced below:

Moving into supported living will enable service users with a disability the opportunity to achieve what is most important to them. It will provide the opportunity to progress and learn/develop skills through an outcomes-based approach. Levels of support are matched to the needs of the tenants in a scheme and are flexible to meet changing needs.

There are a range of housing options available, however the population demographics indicate that consideration will need to be given to provide future schemes which are suitable for needs such as LD dementia, autism, challenging behaviours, complex needs and LD and physical disability.

Supported living schemes are adaptable and can give an opportunity for adults with complex needs to live more independently. Well designed supported living services can reduce the incidences of challenging behaviour of service users.

Person-centred planning and outcomes-based assessments will focus on what matters to the individual. They will have a significant say how they want to achieve outcomes. This results in a move towards a more positive emphasis when planning, and move away from talking about the things that a person cannot achieve.

Living in supported living will enable people with a learning disability achieve their own tenancy and all the rights associated with a secure tenancy including access to welfare benefits. The Housing Related Support contract will support the service users to deal with matters relating to maintaining a tenancy so that the risk of losing a tenancy is reduced. There may be issues around the person's capacity to understand and sign a tenancy agreement which will be addressed with the community support team

Supported living can reduce social isolation that can be experienced by adults with a learning disability and open up the opportunity to social networks within the supported living scheme and wider into the local community.

When not implemented correctly housing with shared support can lead to people with a learning disability being isolated. If identified as pockets of LD 'mini communities' within an area there is the potential for targeted harassment and bullying from people living in the wider community. The locality model and dispersal of schemes across Cardiff was planned to avoid

over-development of LD schemes in a single area.

What action(s) can you take to address the differential impact?

Continue to implement the move-on process so that adults with learning disabilities are matched and placed in supported living that is best suited to meet their accommodation and support needs.

Use the LD Review and Monitoring process to undertake project reviews. This is to ensure that providers are fulfilling the terms of the contract through providing an individualised service and that outcomes for adults with a learning disability are being met.

Work with Housing Strategy to identify options to commission/de-commission supported living schemes based on needs of service users e.g. specialist supported living accommodation for adults with autism – use long term population forecasts to make sure the appropriate accommodation is available for the current and future population.

Expectations set out in the competitive procurement tender process from provider organisations include training on the protected characteristics for their staff to ensure that support plans and delivery of support plans are able to meet the needs of each service user in relation to all forms of disability.

People’s needs specific to their disability would be identified in support plans.

3.3 Gender Reassignment

Will this Policy / Strategy / Project / Procedure / Service / Function have a **differential impact [positive / negative]** on transgender people?

	Yes	No	N/A
Transgender People (People who are proposing to undergo, are undergoing, or have undergone a process [or part of a process] to reassign their sex by changing physiological or other attributes of sex)		✓	

Please give details/consequences of the differential impact, and provide supporting evidence, if any.

The service will have a positive impact on transgender people because the service model is one which is flexible, enabling service users to have choice and control over their own lives.

Transgendered users will not be affected differently from other groups by virtue of the gender nature.

What action(s) can you take to address the differential impact?

Expectations set out in the competitive procurement tender process will require provider organisations to include training on the protected characteristics for their staff to ensure that support plans and delivery of support plans are able to meet the needs of each service user in relation to gender reassignment.

3.4. Marriage and Civil Partnership

Will this Policy / Strategy / Project / Procedure / Service / Function have a **differential impact** [positive / negative] on marriage and civil partnership?

	Yes	No	N/A
Marriage		✓	
Civil Partnership		✓	

Please give details/consequences of the differential impact, and provide supporting evidence, if any.

The service will have a positive impact on married people and people in a civil partnership because the service model is one which is flexible, enabling service users to have choice and control over their own lives.

Users, whether married or in civil partnership, will not be affected any differently from other groups.

What action(s) can you take to address the differential impact?

N/A

3.5 Pregnancy and Maternity

Will this Policy / Strategy / Project / Procedure / Service / Function have a **differential impact** [positive / negative] on pregnancy and maternity?

	Yes	No	N/A
Pregnancy			✓
Maternity			✓

Please give details/consequences of the differential impact, and provide supporting evidence, if any.

N/A

What action(s) can you take to address the differential impact?

N/A

3.6 Race

Will this Policy / Strategy / Project / Procedure / Service / Function have a **differential impact** [positive / negative] on the following groups?

	Yes	No	N/A
White	✓		
Mixed / Multiple Ethnic Groups	✓		
Asian / Asian British	✓		
Black / African / Caribbean / Black British	✓		
Other Ethnic Groups	✓		

Please give details/consequences of the differential impact, and provide supporting evidence, if any.

The service will have a positive impact on people from different ethnic groups because the service model is one which is flexible, enabling service users to have choice and control over their own lives.

Since we have Direct Payments in place, the scheme will provide people with greater choice and control over their supported living services and who provides them. This will allow service users to choose culturally sensitive services and ensure that their cultural needs are met. If employing a personal assistant, they will have the opportunity to explore attitudes at interview and have greater control over who supports them.

Those who speak a language other than English will need additional assistance e.g. interpreter to ensure that they are able to communicate the outcomes they want to achieve from supported living.

Faith/cultural needs must be appropriately handled where people from different backgrounds live together, for example, if people have different dietary requirements or where people need gender specific services.

What action(s) can you take to address the differential impact?

Service users will be individually assessed and any issues arising relating to this protected characteristic will be discussed with the service user. A clear and transparent communication plan for work with service users and their families will be put in place to support this work.

3.7 Religion, Belief or Non-Belief

Will this Policy / Strategy / Project / Procedure / Service / Function have a **differential impact [positive / negative]** on people with different religions, beliefs or non-beliefs?

	Yes	No	N/A
Buddhist		✓	
Christian		✓	
Hindu		✓	
Humanist		✓	
Jewish		✓	
Muslim		✓	
Sikh		✓	
Other		✓	

Please give details/consequences of the differential impact, and provide supporting evidence, if any.

The service will have a positive impact on this group as it focuses on a person-centred plan through individualised support plans. This individualised approach takes into account the religion, belief or non-belief of each person.

Users will not be affected any differently from other groups by virtue of their religion, beliefs and non beliefs.

What action(s) can you take to address the differential impact?

N/A

3.8 Sex

Will this Policy / Strategy / Project / Procedure / Service / Function have a **differential impact [positive / negative]** on men and/or women?

	Yes	No	N/A
Men		✓	
Women		✓	

Please give details/consequences of the differential impact, and provide supporting evidence, if any.
The service will have a positive impact on gender as the move-on process for supported living placements looks at each individual and the scheme that would be best suited to their individual needs and takes into account the gender mix. Users will not be affected any differently from other groups by virtue of their gender
What action(s) can you take to address the differential impact?
N/A

3.9 Sexual Orientation

Will this Policy / Strategy / Project / Procedure / Service / Function have a **differential impact** [positive / negative] on the following groups?

	Yes	No	N/A
Bisexual		✓	
Gay Men		✓	
Gay Women/Lesbians		✓	
Heterosexual/Straight		✓	

Please give details/consequences of the differential impact, and provide supporting evidence, if any.
The service will have a positive impact on this group because the move-on process for Supported Living placements looks at each individual and the scheme that would be best suited to their individual needs. It takes into account the mix of a scheme in terms of sexual orientation. Consideration to compatibility with other tenants and their lifestyles would need to be evaluated. Users will not be affected any differently from other groups by virtue of their sexual orientation.
What action(s) can you take to address the differential impact?
N/A

3.10 Welsh Language

Will this Policy / Strategy / Project / Procedure / Service / Function have a **differential impact** [positive / negative] on Welsh Language?

	Yes	No	N/A
Welsh Language		✓	

Please give details/consequences of the differential impact, and provide supporting evidence, if any.
Welsh speakers will not be affected any differently from other groups by virtue of their language.
What action(s) can you take to address the differential impact?
N/A

4. Consultation and Engagement

What arrangements have been made to consult/engage with the various Equalities Groups?

The Supported Living Services model for the service from 1 st August 2014 has evolved from on-going and specific consultation opportunities since the commencement of the previous Supported Living contract in 2007. Consultation regarding the development of the Supported Living Service and proposed model has involved the following groups:

- Learning Disabilities service users via the Advocacy Services and Cardiff People First through feedback at the Learning Disabilities Planning Group (formerly LDAPG).
- Carers/families through the Parents Federation represented on the Learning Disabilities Planning Group (Formerly LDAPG)
- Voluntary and Health organisations represented through the Learning Disability Forum representative on the Learning Disability Planning Group (Formerly LDAPG)
- Consultation events with the Learning Disability Community Support team
- Accessible consultation for service users at the open consultation 'The Event' in March 2011 facilitated independently by an advocacy group.
- 'The Event' in March 2011 was a consultation opportunity open to service users, families, friends, providers, voluntary organisation, staff and any member of the community with an interest in LD and provided opportunities for feedback about current and future needs for Supported Living services.
- This day was attended by approximately 250 people and accessible communication was in place to enable delegates to participate and comment.
- This consultation was widely advertised internally and through external networks. Representatives of any groups were welcomed to attend.
- 'Housing Care and Support Event' in March 2011 involved working with landlords and providers to establish current picture of needs and future requirements for supported living across Cardiff. People in attendance were representing the views of their internal service user groups in order to reflect the true need for the LD population taking into account the protected characteristics.
- Service user consultation day which was independently facilitated, gave the opportunity to comment and provide direction on the future models for Supported Living to meet needs.
- Attendance and presentations at the incumbent provider service user and stakeholder consultation groups/meetings – this is on-going and will continue during the project
- Consultation with service users, families/carers and incumbent providers following pilot of proposed Supported Living Model from May 2014
- Consultation and engagement work with the social care market place through specific events and information sharing workshops to seek provider feedback on aspects of the project and to support and enable the Small Medium Enterprises to be able to enter the competitive procurement tender process. This consultation supported by Business Wales and Wales Co-operatives took place on 17th June 2014.
- Engagement with the social care market through a procurement process, an independent LD service user panel with support from an advocacy provider that ensured service users had training, support and accessible information to provider feedback and the proposals for the Supported Living plans and had the opportunity for meaningful involvement in the competitive procurement tender process.
- Health & Social Care have met with citizens and staff to discuss budget proposals and have entered into dialogue on the proposed change in the delivery and remodelling of services.
- Health & Social Care have fully participated in the consultation events 'Change for Cardiff – Have Your Say' to obtain a whole picture of the impact and endorsement of change across the sector.

Health & Social Care will continue to address citizens, constituents and stakeholders concerns arising from consultation events and the procurement exercise.

5. Summary of Actions [Listed in the Sections above]

Groups	Actions
Age	<p>LD dementia - establish a LD Dementia Project Group in partnership with health colleagues to develop a pathway to support service users with their accommodation, care and support from early stages of on-set to end of life.</p> <p>Work with Housing Strategy to identify options to commission/de-commission supported living schemes based on the age needs of the service users e.g. location and ground floor bedrooms – use long term population forecasts to make sure the appropriate accommodation is available for the current and future population.</p> <p>Individualised service – commission a supported living service that enables flexibility and choice for service users to access a range of opportunities that they believe would best meet their outcomes. People’s need specific to age would be identified in support plans.</p>
Disability	<p>Work with Housing Strategy to identify options to commission/de-commission supported living schemes based on needs of service users e.g. specialist supported living accommodation for adults with autism – use long-term population forecasts to make sure the appropriate accommodation is available for the current and future population.</p>
Gender Reassignment	
Marriage & Civil Partnership	<p>May need to consider developing a specific scheme around civil partnership, if suitable supported living is not available currently.</p>
Pregnancy & Maternity	
Race	<p>Use the LD Review and Monitoring process to undertake project reviews to ensure that schemes are fulfilling the terms of the contract and providing an individualised service for each tenant so that outcomes for adults with a learning disability in terms of ethnicity are being met.</p>
Religion/Belief	
Sex	
Sexual Orientation	
Welsh Language	
Generic Over-Arching [applicable to all the above groups]	<p>New service developments will continue to involve consultation with all service users and families, ensuring that opportunities to be involved are available in different formats and with accessible communication - interpreters/translators/advocates/SALT to be available</p> <p>The contract monitoring, review and move-on procedures will</p>

	<p>continue to take into account the protected characteristics as part of the process.</p> <p>Expectations set out in the competitive procurement tender process from provider organisations include training on the protected characteristics for their staff to ensure that support plans and delivery of support plans are able to meet the needs of each service user particularly in relation to age, disability, gender reassignment, race, religion/belief or non-belief, sex, sexual orientation or Welsh Language.</p> <p>People's needs specific to the above characteristics would be identified in their support plans.</p>
--	---

6. Further Action

Any recommendations for action that you plan to take as a result of this Equality Impact Assessment (listed in Summary of Actions) should be included as part of your Service Area's Business Plan to be monitored on a regular basis.

7. Authorisation

The Template should be completed by the Lead Officer of the identified Policy/Strategy/Project/Function and approved by the appropriate Manager in each Service Area.

Completed By : Amanda Phillips	2 nd September 2014 Updates - 7 TH January 2015 & 23 rd February 2015
Designation: OM LD Cardiff & Vale	
Approved By: Siân Walker	
Designation: Director	
Service Area: Health & Social Care	

7.1 On completion of this Assessment, please ensure that the Form is posted on your Directorate's Page on CIS - *Council Wide/Management Systems/Equality Impact Assessments* - so that there is a record of all assessments undertaken in the Council.

For further information or assistance, please contact the Citizen Focus Team on 029 2087 3059 or email citizenfocus@cardiff.gov.uk