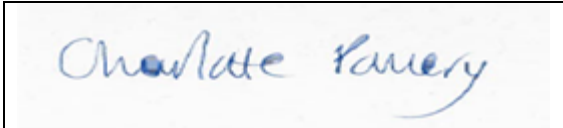




## Equality Impact Assessment

Name of Project	Alcohol Support Service	Cabinet meeting date <i>If applicable</i>	
Service area responsible	Commissioning		
Name of completing officer	Sebastian Dacre	Date EqIA created	May 2015 Updated Oct 2015
Approved by Director / Assistant Director		Date of approval	30 October 2015

The Equality Act 2010 places a 'General Duty' on all public bodies to have 'due regard' to:

- Eliminating discrimination, harassment and victimisation and any other conduct prohibited under the Act
- Advancing equality of opportunity between those with 'protected characteristics' and those without them
- Fostering good relations between those with 'protected characteristics' and those without them.

In addition the Council complies with the Marriage (same sex couples) Act 2013.

Haringey Council also has a 'Specific Duty' to publish information about people affected by our policies and practices.

All assessments must be published on the Haringey equalities web pages. All Cabinet papers **MUST** include a link to the web page where this assessment will be published.

This Equality Impact Assessment provides evidence for meeting the Council’s commitment to equality and the responsibilities outlined above, for more information about the Councils commitment to equality; please visit the Council’s website.

<b>Stage 1 – Names of those involved in preparing the EqIA</b>	
1. Project Lead – Sebastian Dacre	
2. Equalities - Kathryn Booth	
3.	
4.	

**Stage 2 - Description of proposal including the relevance of the proposal to the general equality duties and protected groups. Also carry out your preliminary screening** (Use the questions in the Step by Step Guide (The screening process) and document your reasoning for deciding whether or not a full EqIA is required. If a full EqIA is required move on to Stage 3.

**The Current Service**

The current alcohol support service is delivered by Haringey Advisory Group on Alcohol. The service is funded through a number of separately agreed contracts across Housing and Adults Commisisioning but acts as one service.

The alcohol support service provides:

- Outreach: This service prevents homelessness, minimises street drinking and alcohol related ASB and works in the community to raising awareness of the harmful affects of alcohol
- Engagement: this service is a non clinical intervention to reduce harmful levels of drinking or to support abstinence
- Employment, Training & Education

The current service provides a service to some of the most vulnerable people in the borough, including from the protected groups.

The current contractual arrangements are no longer viable and the value of the contracts means that a competitive tender process must be undertaken.

## **The Proposed Service**

A review of the service provision identified cross cutting themes and outcomes across the two commissioning areas and the potential to improve outcomes for service users and deliver savings through joint commissioning and a competitive process.

The proposed new service is not radically different from the current service provision. and will continue to provide outreach, engagement and ETE outcomes for service users.

In addition the new specification will have a focus on:

- Prevention and early intervention
- Joint working with other providers (especially children and young people services) and also the Public Health commissioned alcohol services.

The Council's Medium Term Financial Strategy outlines the need for savings to be made. As a result the budget for the proposed alcohol service is less than the current budget. The joint commissioning aims to manage the impact of budget reductions on service users by improving efficiency whilst retaining the overall focus of the service on outreach and engagement alongside a preventive approach.

The proposed service will continue to provide a service to some of the most vulnerable people in the borough, including from the protected groups. The outcome of the initial screening identifies that a full EQIA is required in relation to this contract. The relevance of this proposal to the general equality duties and protected groups derives from a number of issues which include:

- 1) The JSNA for alcohol projects an increase in the number of people in Haringey drinking at a level that is dangerous to their health.
- 2) The savings to be made against the current budget
- 3) The service being for some of the most vulnerable people in the borough, including from the protected groups.

**Stage 3 – Scoping Exercise - Employee data used in this Equality Impact Assessment**  
**Identify the main sources of the evidence, both quantitative and qualitative, that supports your analysis. This could include for example, data on the Council’s workforce, equalities profile of service users, recent surveys, research, results of recent relevant consultations, Haringey Borough Profile, Haringey Joint Strategic Needs Assessment and any other sources of relevant information, local, regional or national.**

<b>Data Source (include link where published)</b>	<b>What does this data include?</b>
EqIA Profile on Harinet	Age, gender, ethnicity, disability information – for the Council and the Borough

**Stage 4 – Scoping Exercise - Service data used in this Equality Impact Assessment**  
**This section to be completed where there is a change to the service provided**

<b>Data Source (include link where published)</b>	<b>What does this data include?</b>
Data was provide by the current service provider HAGA. This information has not been published.	The data gives a breakdown for different services currently provided by HAGA: Assessment Service, Outreach, Breaking Ground (Day Service), Employment/Training/Education, Weekend Service. For each service the numbers are broken into: age, gender, ethnicity, disability information, religion, sexual orientation,
Alcohol Joint Strategic Needs Analysis	Information about alcohol need in Haringey
Local alcohol profiles  <a href="http://www.lape.org.uk">www.lape.org.uk</a>	includes hospital admissions (

The latest comprehensive hospital episode statistics (HES) analysis but relates to 2011/12 data: <a href="http://www.haringey.gov.uk/sites/haringeygovuk/files/haringey_alcohol_admissions_march_2013.pdf">http://www.haringey.gov.uk/sites/haringeygovuk/files/haringey_alcohol_admissions_march_2013.pdf</a>	Data on alcohol related admissions to hospital
Reshaping drug and alcohol services in Haringey Consultation findings March 2013	The re-tender consultation results
Impact analysis tool	granular local level data
Service User Consultation	Service user views on the current service

**Stage 5a – Considering the above information, what impact will this proposal have on the following groups in terms of impact on residents and service delivery:  
Positive and negative impacts identified will need to form part of your action plan.**

	Positive	Negative	Details						None – why?																								
<b>Sex</b>	The new contract will include a focus on early help and prevention which is aimed at improving outcomes for all service users (positive impact for all protected characteris		<table border="1"> <thead> <tr> <th></th> <th>Heavy Drinking (UK)</th> <th>HAGA</th> <th>ETE</th> <th>Assessment</th> <th>BG</th> <th>Outreach</th> <th>Weekend</th> </tr> </thead> <tbody> <tr> <td>male</td> <td>70</td> <td>71.5</td> <td>61</td> <td>69</td> <td>71.2</td> <td>76.5</td> <td>85.7</td> </tr> <tr> <td>Female</td> <td>30</td> <td>28.5</td> <td>39</td> <td>31</td> <td>28.8</td> <td>23.5</td> <td>14.3</td> </tr> </tbody> </table> <p>Service monitoring data shows that more men than women are accessing current services. However, national figures highlight that men in England are more likely to drink heavily than women. 38% of men and 16% of women consume more alcohol than is recommended (Department of Health (DH), 2005).</p> <p>The review did not pick up any particular issues regarding service delivery around gender.</p>							Heavy Drinking (UK)	HAGA	ETE	Assessment	BG	Outreach	Weekend	male	70	71.5	61	69	71.2	76.5	85.7	Female	30	28.5	39	31	28.8	23.5	14.3	Services, under the new contract will continue to be open to residents regardless of sex
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<b>Gender Reassignment</b>	As above		No data								Services, and access to services are not restricted on the basis of gender reassignment																																																																																																																																																																								
<b>Age</b>	As above		<table border="1"> <thead> <tr> <th>Age</th> <th>Haringey</th> <th>HAGA</th> <th>ETE</th> <th>Assessment</th> <th>BG</th> <th>Outreach</th> <th>Weekend</th> </tr> </thead> <tbody> <tr><td>0-4</td><td>7.1</td><td>0</td><td>0</td><td>0</td><td>0</td><td>0</td><td>0</td></tr> <tr><td>5-9</td><td>6.2</td><td>0</td><td>0</td><td>0</td><td>0</td><td>0</td><td>0</td></tr> <tr><td>10-14</td><td>6</td><td>0</td><td>0</td><td>0</td><td>0</td><td>0</td><td>0</td></tr> <tr><td>15-19</td><td>5.6</td><td>0</td><td>0</td><td>0</td><td>0</td><td>0</td><td>0</td></tr> <tr><td>20-24</td><td>7.4</td><td>1.6</td><td>0</td><td>2</td><td>0.7</td><td>1.8</td><td>3.6</td></tr> <tr><td>25-29</td><td>11</td><td>4.8</td><td>2.5</td><td>5</td><td>3.4</td><td>5.1</td><td>7.1</td></tr> <tr><td>30-34</td><td>11.2</td><td>9.9</td><td>12</td><td>12</td><td>3.4</td><td>8.3</td><td>16.1</td></tr> <tr><td>35-39</td><td>8.9</td><td>14.1</td><td>17</td><td>14</td><td>11.6</td><td>14.1</td><td>12.5</td></tr> <tr><td>40-44</td><td>7.9</td><td>11.6</td><td>12</td><td>12</td><td>10.3</td><td>11.6</td><td>14.3</td></tr> <tr><td>45-49</td><td>6.9</td><td>17.1</td><td>17</td><td>17</td><td>17.8</td><td>17</td><td>16.1</td></tr> <tr><td>50-54</td><td>5.3</td><td>16.9</td><td>19.5</td><td>16</td><td>24.7</td><td>15.6</td><td>12.5</td></tr> <tr><td>55-59</td><td>4.2</td><td>12.4</td><td>10</td><td>11</td><td>15.1</td><td>14.5</td><td>8.9</td></tr> <tr><td>60-64</td><td>3.6</td><td>6.5</td><td>10</td><td>6</td><td>8.2</td><td>5.8</td><td>8.9</td></tr> <tr><td>65-69</td><td>2.6</td><td>3.7</td><td>0</td><td>3</td><td>3.4</td><td>4.4</td><td>0</td></tr> <tr><td>70-74</td><td>2.3</td><td>1.6</td><td>0</td><td>2</td><td>1.4</td><td>1.8</td><td>0</td></tr> <tr><td>75-79</td><td>1.8</td><td>0</td><td>0</td><td>0</td><td>0</td><td>0</td><td>0</td></tr> <tr><td>80-84</td><td>1.1</td><td>0</td><td>0</td><td>0</td><td>0</td><td>0</td><td>0</td></tr> <tr><td>85-89</td><td>0.6</td><td>0</td><td>0</td><td>0</td><td>0</td><td>0</td><td>0</td></tr> <tr><td>90-94</td><td>0.3</td><td>0</td><td>0</td><td>0</td><td>0</td><td>0</td><td>0</td></tr> <tr><td>95-100</td><td>0.1</td><td>0</td><td>0</td><td>0</td><td>0</td><td>0</td><td>0</td></tr> </tbody> </table>								Age	Haringey	HAGA	ETE	Assessment	BG	Outreach	Weekend	0-4	7.1	0	0	0	0	0	0	5-9	6.2	0	0	0	0	0	0	10-14	6	0	0	0	0	0	0	15-19	5.6	0	0	0	0	0	0	20-24	7.4	1.6	0	2	0.7	1.8	3.6	25-29	11	4.8	2.5	5	3.4	5.1	7.1	30-34	11.2	9.9	12	12	3.4	8.3	16.1	35-39	8.9	14.1	17	14	11.6	14.1	12.5	40-44	7.9	11.6	12	12	10.3	11.6	14.3	45-49	6.9	17.1	17	17	17.8	17	16.1	50-54	5.3	16.9	19.5	16	24.7	15.6	12.5	55-59	4.2	12.4	10	11	15.1	14.5	8.9	60-64	3.6	6.5	10	6	8.2	5.8	8.9	65-69	2.6	3.7	0	3	3.4	4.4	0	70-74	2.3	1.6	0	2	1.4	1.8	0	75-79	1.8	0	0	0	0	0	0	80-84	1.1	0	0	0	0	0	0	85-89	0.6	0	0	0	0	0	0	90-94	0.3	0	0	0	0	0	0	95-100	0.1	0	0	0	0	0	0	Services, and access to services are for adults aged 18+.
Age	Haringey	HAGA	ETE	Assessment	BG	Outreach	Weekend																																																																																																																																																																												
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			The age profile accessing the service is consistent with what we would expect. There is a strong correlation between dangerous levels of drinking and early deaths.								
<b>Disability</b>	As above								Services under the new contract will continue to be open to residents regardless of disability.		
		Disability	Haringey	HAGA	ETE	Assessment	BG	Outreach		Weekend	
		Day-to-day activities limited a lot	6.8	5.3	No data	3.5	8.2	8.7		5	
		Day-to-day activities limited a little	7.2	0.8		0.6	2.1	1.1			
		Day-to-day activities not limited	86	93.9		95.9	89.7	90.2		94	
A small proportion of existing service users have additional needs in relation to a disability or limiting illness they will still be provided for under the new service. The specification states that the service must be provided at accessible facilities.											
<b>Race &amp; Ethnicity</b>	As above								Services under the new contract will continue to be open to residents regardless of ethnicity.		
		Ethnicity	Haringey	HAGA	ETE	Assessment	BG	Outreach		Weekend	
		white	Englis/Welsh/Scottish/Northern irish/British	34.7	45.8	32	43.8	51.4		47.1	58.9
			Irish	2.7	9	10	7.5	10.9		9.8	16.1
			Gypsy or Irish Traveller	0.1	0	0	0	0		0	0
			Other White	23	19	20	20.1	2.7		27.5	7.1
		Mixed	White and black caribbean	1.9	2	2.5	2.2	0.7		2.2	1.8
			white and black african	1	1	2.5	1.3	0.7		0.7	0
			White and asian	1.5	0.2	0	0.2	0.7		0	0
			Other Mixed	2.1	1.5	0	0.6	8.2		0.4	0
		Asian	Indian	2.3	1.9	7	1.8	2.1		0.7	3.6
			pakistani	0.8	0.4	0	0.5	0.7		0.4	0
			Bangladeshi	1.7	0.2	0	0.3	0		0	0
Chinese	1.5		0.4	0	0.3	1.4	0	1.8			

				Other Asian	3.2	1.1	0	1.3	2.7	0.4	0	
				African	9	4.8	7	4.9	6.2	4	3.6	
				Caribbean	7.1	5.3	12	4.9	8.2	3.3	7.1	
			Black	Other black	2.6	2.2	5	2.7	0	2.2	0	
				Arab	0.9	0	0	0	0	0	0	
			Other	Any other ethnic group	3.9	5.1	2	7.7	3.4	1.5	0	
			<p>Current patterns of service use broadly reflect the existing Haringey population. However, some ethnic groups within the borough currently have higher levels of problematic alcohol use and therefore have a greater need at present for the services provided under the contract. For example, the JNSA states that Irish men and 'any other ethnic group' have the highest rates of admissions wholly attributable to alcohol; it is thought that 'any other ethnic group' category includes people from Poland and Eastern Europe.</p> <p>The specification states that the Outreach Service must respond in an informed and culturally appropriate manner to all service users.</p>									
<b>Sexual Orientation</b>				Sexual Orientation								
				lesbian, gay, bisexual		Haringey/London	HAGA	ETE	Assessment	BG	Outreach	Weekend
						3.2	9.4	2	no data	6.9	9.4	10.7
<b>Religion or Belief (or No Belief)</b>				Religion	Haringey	HAGA	ETE	Assessment	BG	Outreach	Weekend	
				Christian	45	41.7	22	42.3	42.5	40.9	51.8	
				Buddist	1.1	1	0	0.8	1.4	1.4	0	
				Hindu	1.8	0.4	0	0.3	0.7	0.4	1.8	
				Jewish	3	0	0	0	0	0	0	
			<p>Services are open to residents regardless of sexual orientation</p>									
			<p>Services are open to residents regardless of religion</p>									



			<table border="1"> <tr> <td>Muslim</td> <td>14.2</td> <td>3.9</td> <td>0</td> <td>4.1</td> <td>6.2</td> <td>3.3</td> <td>1.8</td> </tr> <tr> <td>Sikh</td> <td>0.3</td> <td>0.3</td> <td>0</td> <td>0.3</td> <td>0.7</td> <td>0.4</td> <td>0</td> </tr> <tr> <td>Other religion</td> <td>0.5</td> <td>3.6</td> <td>2</td> <td>2</td> <td>2.7</td> <td>5.1</td> <td>7.1</td> </tr> <tr> <td>No religion</td> <td>25.2</td> <td>46</td> <td>17</td> <td>47.6</td> <td>45.9</td> <td>48.5</td> <td>37.5</td> </tr> <tr> <td>Religion not stated</td> <td>8.9</td> <td>2.1</td> <td>59</td> <td>2.6</td> <td>0</td> <td>0</td> <td>0</td> </tr> </table> <p>Religions underrepresented are those where alcohol abstention is part of the normal practice of that religion.</p>	Muslim	14.2	3.9	0	4.1	6.2	3.3	1.8	Sikh	0.3	0.3	0	0.3	0.7	0.4	0	Other religion	0.5	3.6	2	2	2.7	5.1	7.1	No religion	25.2	46	17	47.6	45.9	48.5	37.5	Religion not stated	8.9	2.1	59	2.6	0	0	0	
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Religion not stated	8.9	2.1	59	2.6	0	0	0																																					
<b>Pregnancy &amp; Maternity</b>	x		<p>There is currently no data available on the number of service users who are pregnant or have young children.</p> <p>The JNSA states that there is a gap in advice and information for pregnant women around safe drinking levels. The specification has therefore made pregnant women and those with young children as a priority group for the new alcohol support service</p>																																									
<b>Marriage and Civil Partnership (note this only applies in relation to eliminating unlawful discrimination (limb 1))</b>			<p>There is currently no data available in relation to this protected characteristic</p>	<p>Services, and access to services are not restricted on the basis of marriage and civil partnership</p>																																								

**Stage 5b – For your employees and considering the above information, what impact will this proposal have on the following groups: Positive and negative impacts identified will need to form part of your action plan.**

	<b>Positive</b>	<b>Negative</b>	<b>Details</b>	<b>None – why?</b>
<b>Sex</b>	N/A			
<b>Gender Reassignment</b>	N/A			
<b>Age</b>	N/A			
<b>Disability</b>	N/A			
<b>Race &amp; Ethnicity</b>	N/A			
<b>Sexual Orientation</b>	N/A			
<b>Religion or Belief (or No Belief)</b>	N/A			
<b>Pregnancy &amp; Maternity</b>	N/A			
<b>Marriage and Civil Partnership (note this only applies in relation to eliminating unlawful discrimination (limb 1))</b>	N/A			

<b>Stage 6 - Initial Impact analysis</b>	<b>Actions to mitigate, advance equality or fill gaps in information</b>
Existing services are targeted at problematic drinkers who are some of the most vulnerable in our communities. A number of service users have additional needs, for example related to disability or cultural needs.	The specification for the new service requires:

**Pregnancy & maternity:** By making this protected characteristic a priority group the new specification will have a positive impact.

**Gender Reassignment/ marriage and Civil Partnership:** gap in information so unable to know impact on this group.

- The service must be accessible to all sections of the community.
- The Outreach Service responds in an informed and culturally appropriate manner
- The provider must have an equalities policy
- All staff must be trained in equalities and diversity
- The service acknowledges and respects service users' gender, sexual orientation, age, ability, race, faith and culture and aims to meet the needs of BME and other protected groups as set out in the Equality Act 2010.

As part of the tender process prospective providers were required to demonstrate how they would ensure inclusive and fair ways of working with people and how they would measure their progress in doing so. The specification states that the new service must have a particular focus on Pregnant women and those with young children and treat them as a priority group.

As part of the monitoring data the new provider is required to collect data on all the protected characteristics which is not currently the case.

The Council is seeking to mitigate the impact of savings on service users through:

- reducing administrative costs

<p>The new contract will bring together the following existing services outreach, engagement (currently delivered through the day programme, Housing related support and Employment, training and education.)</p> <p>The new contract will deliver annual savings of £120k (greater than the original £100k target) as part of the Council's Medium Term Financial Strategy.</p> <ul style="list-style-type: none"> <li>•</li> <li>•</li> </ul>	<ul style="list-style-type: none"> <li>• making savings through a joint commissioning process</li> <li>• refocusing aspects of the service around prevention and early intervention to decrease demand for more intensive support over time</li> </ul> <p>The specification allows for flexibility in how the outcomes of the service are delivered. Through contract monitoring the service will be able to adjust where necessary to make sure that those with protected characteristics are able to access the service.</p>
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**Stage 7 - Consultation and follow up data from actions set above**

<b>Data Source (include link where published)</b>	<b>What does this data include?</b>
<p><b>Consultation</b></p> <p>A service user consultation was undertaken in October 2014. This consisted of members of the current providers abstinence day programme. This consultation focused on what they felt were the most important elements of the existing alcohol service and areas they thought were of least benefit.</p> <p><b>Stakeholder Meetings</b></p>	<p>The data included views about what were important services and which were less important.</p> <p>Important Services</p> <ul style="list-style-type: none"> <li>• Abstinence 590 project</li> <li>• Counselling</li> <li>• Detox</li> </ul>

Stakeholder meeting were held with external providers and also Council staff to look at the outcomes of the draft specification and to see if the correct commissioning process was being undertaken.

Stakeholders were aware of the Council's position for the need to make savings.

The meetings also highlighted the changing nature of the groups involved in street drinking and the need for the provider to be able to adjust the delivery of the outreach service to be culturally appropriate.

- Links to CAB – Housing (St Mungos)
- After care
- recovery

'Luxury services' (didn't say they were unnecessary)

- Polish and Eastern European drinking programme
- Hospital liaison
- Outreach
- Home support
- GP Hubs

Agreed that a single service jointly commissioned was a good idea.

Agreed with aligning the contract with the Public Health alcohol service in the future.

Discussed the outcomes for the new specification. This led to some amendments and some additions. Overall agreed that the these were improved outcomes and would mitigate against the savings made against the contract.

Highlighted the importance of having an alcohol support service and how it supported the Council's priorities and other services in the borough.

The Polish and Eastern European drinking programme was provided as a short term contract which ended prior to the recommissioning of

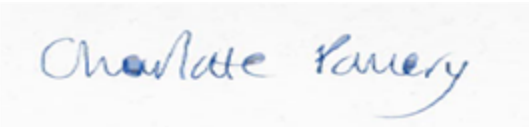
	<p>the new service.. The new specification, however, makes reference to the different cultures that are street drinking and the need for the new provider to be able to adapt to the cultural needs of this and future groups.</p> <p>The hospital liaison and GP hubs fall under the public health alcohol service.</p>
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## Stage 8 - Final impact analysis

- Alcohol services provide support to some of most vulnerable in our community, including those who share the protected characteristics.
- A new contract is being tendered for which brings together the following existing services Outreach and Engagement, Housing related support and Employment, Training & Education.
- Savings are being made to the contract in line with the MTFS. The Council has agreed measures to mitigate the impact of these reductions including administrative savings, a joint commissioning process and refocusing the service around prevention and early intervention to reduce demand for services over time
- Service users were consulted on the design of the new service and service user feedback was incorporated into the specification for the new service
- The contract specification sets out the service provision and procedures the contractor must have in place in order to meet the needs of service users in line with the equalities duty
- Prospective tenderers were required to demonstrate how they would ensure inclusive and fair ways of working with people.

**Stage 9 - Equality Impact Assessment Review Log**

Review approved by Director / Assistant Director



Charlotte Parry

Date of review

30 October 2015

Review approved by Director / Assistant Director



Date of review



**Stage 10 – Publication**

Ensure the completed EqIA is published in accordance with the Council's policy.