

Slough Borough Council

REPORT TO: Cabinet

DATE: 19th December 2022

SUBJECT: Re-procurement of Adult Social Care Extra Care Contracts.

CHIEF OFFICER: *Marc Gadsby, Executive Director People (Adults)*

CONTACT OFFICER: *Jane Senior – Associate Director People Strategy and Commissioning*

Suzanne Binns, Group Manager - People Strategy

WARD(S): ALL

PORTFOLIO: Cllr Natasa Pantelic, Social Care and Public Health

KEY DECISION: YES

EXEMPT: YES – Appendix is exempt on the ground that it contains exempt information as specified in Paragraph 3, Schedule 12A of the Local Government Act 1972, namely: “Information relating to the financial or business affairs of any particular person (including the authority holding that information)”

DECISION SUBJECT TO CALL IN: YES

APPENDICES: *Appendix 1 – Equalities Impact Assessment*

Exempt Appendix A – Pricing Information
Exempt Appendix B – Factors requiring change of procurement timetable.

1 Summary and Recommendations

- 1.1 In January 2022, Cabinet approved the extension of the existing contract to Creative Support for Integrated Care and Support in Extra Care to the value of £848,200 per annum for a period of two years, this is equal to £1,696,400 (one million, six hundred and ninety-six thousand, four hundred) over two financial years to cover the period 1st April 2021 to 31st March 2023. It was agreed that a paper seeking permission to procure new service provision would be brought to Cabinet in June 2022.

- 1.2 In June 2022, Cabinet approved the procurement of an Integrated Care and Support in Extra Care Services for a 3-year contract plus a one year extension period from 1st April 2023 to 31st March 2027. This was likely to be at a reduced cost predicated upon a reduction in night-time staffing hours. The extension was to be subject to satisfactory performance throughout the initial contract period and the contract being assessed as continuing to meet best value requirements.
- 1.3 Further to approval of the procurement, officers within the People Strategy and Commissioning Team issued a Prior Information Notice (PIN) on 22 July 2022 and following a change in personnel, tender documents were published on 29 September 2022, with a closing date of 7 November 22. The timescales, whilst tight, would have allowed for an evaluation of bids and for a report to have been presented to Cabinet in December 2022, seeking permission to award a contract, with sufficient time for mobilisation to have taken place.
- 1.4 A high number of clarification questions were received which could not be responded to within the necessary timescales, as information either had not been gathered, provided, recorded or otherwise made available to incoming personnel. Further, the rationale for a reduction in night-time hours could not be evidenced. On this basis, and in discussion with the Executive Director for People (Adults) and the Lead Member for Social Care and Public Health, it was agreed that the tender should be aborted, as despite the best efforts of officers to progress the procurement within necessary timescales, it would not be possible for suppliers to submit appropriately costed bids. Further detailed information is contained at Exempt Appendix B.
- 1.5 It is now requested that a new tender is undertaken in early 2023. Given the likely time frames and the timing of the Local Elections, it is recommended that delegated authority is given to award the contract to avoid any further delay. This will necessitate a further short contract extension to the incumbent provider, Creative Support Limited, for a 5 month period to cover the time over which the procurement will take place.

Recommendations:

Cabinet is recommended to:

1. Agree to extend the term of the current contract with Creative Support Ltd for Integrated Care and Support in Extra Care for a further 5 month period from 1st April 2023 to 31st August 2023 at a cost of £353,417.
2. Approve commencement of a new procurement for Integrated Care and Support in Extra Care for up to 4 years at a maximum cost of £848,200 per year (excluding any inflationary uplifts awarded) and delegate authority to Executive Director People (Adults), in consultation with Lead Member Social Care and Public Health and the Section 151 officer, to award the contract to commence in September 2023.
3. Note the revised pricing scenarios included at Exempt Appendix A
4. Note the learning from this case and the work to be undertaken corporately to address recruitment challenges.

Reason:

To ensure that an Integrated Care and Support in Extra care service that offers best value is procured properly and safely.

Commissioner Review

The recommendations are supported. It is disappointing that at a late stage in the process the failure to properly record the required data made it necessary to abort the tender procedure, but it is absolutely the correct decision. The Council needs to learn the lesson in all its service areas that data management and doing the boring really well is an essential component of delivering best value.

2 Report**Introductory paragraph**

- 2.1 The provision of good quality Integrated Care and Support in Extra Care enables individuals with assessed care and support needs to remain living in their own home, thus promoting independence and reducing the need for more expensive residential care.
- 2.2 Extra Care plays an essential role within the health and social care system, not only by delivering care to those who are assessed as requiring it, but also by averting the need for individuals to move to alternative residential care options, maintaining their independence and retaining greater control over their lives.
- 2.3 The provision of Integrated Care and Support in Extra Care meets the following Council priorities and objectives:

Slough Health and Wellbeing Strategy

Priority Two- Integration – Increasing the proportion of people living independently at home and decreasing the number of people living in care homes.

Slough Corporate Plan 2022-25

A Council that lives within our means, balances the budget, and delivers best value for taxpayers and service users

An environment that helps residents live more independent, healthier and safer lives.

Options considered

A number of options were considered:

Option	Pros	Cons
<p>Option 1 Continue with the procurement in accordance with existing timelines.</p>	<p>Compliance with procurement timetable agreed at Cabinet in June 2022.</p> <p>Does not require an additional extension to the contract term.</p>	<p>Unable to provide sufficient information to suppliers to enable them to properly cost bids.</p> <p>Possibility of failed tender causing further delay.</p> <p>Failure to adhere to procurement timetable agreed at Cabinet in June 2022, necessitating a further contract extension, which does not adhere to Contract Procedure Rules.</p>
<p>Option 2 Abort tender and issue direct award of Contract to existing provider for the proposed contract term.</p>	<p>This would maintain existing care arrangements.</p> <p>This would reduce resource pressure placed upon teams engaged in procurement activity.</p>	<p>This would not comply with the recommendation made to Cabinet in January 2022 to re-procure these services.</p> <p>The Council would not be able to seek possible better value from the market in relation to provision of Extra Care services.</p> <p>Would need to find mechanism to comply with Public Contracts Regulations</p> <p>There is a mature care and support market, and a competitive tender process is recommended.</p>
<p>Option 3 Extend timelines for procurement and request a contract extension. Recommended</p>	<p>Allows an appropriate procurement to be undertaken.</p> <p>Allows for necessary information to be gathered.</p>	<p>Extension to existing contract is required, which requires a waiver under Contract Procedure Rules (CPR).</p> <p>Officers will apply for an exemption under CPR para 14 on demonstrable best interest</p>

		and service imperative grounds
Option 4		
Abort tender and seek agreement from individuals receiving care from this provider to transfer to direct payments.	It would be cost effective to transfer individuals in receipt of commissioned care packages onto direct payments.	<p>Individuals in receipt of Extra Care services have complex needs for whom the management of their care arrangements via Direct Payments is unlikely to be feasible for the 24/7 onsite presence.</p> <p>Individuals in receipt of Extra Care services might not agree to transfer to direct payments.</p>

Background

2.4 Extra Care balances independent living with an enhanced sense of security where service users receive support to manage their tenancies. Essential to this are the following extra care characteristics:

- Purpose-built, accessible design promoting independent living which supports people to age in place.
- Fully self-contained properties with own front doors.
- Secure tenancies or lease arrangements where the service user has full control over who has access to their own home.
- Office for use by staff serving the scheme and sometimes the wider community.
- Communal spaces and facilities.
- Access to planned and unplanned urgent care and support services 24 hours a day, 7 days a week.
- Community alarms and other assistive technologies.
- Safety and security often built into the design with fob or person-controlled entry.

2.5 Extra Care schemes provide a cheaper and more personalised support to adults when compared to residential care settings as the council will only pay for the provision of care and support, the accommodation cost is the responsibility of the tenant. Tenancy or purchasing of extra care properties are paid directly by the service user to the Landlord. This includes additional charges relating to maintenance, communal facilities, and support as described in the tenancy agreement. Where affordability is a barrier, this is often funded via housing benefits claims and/or council tax reductions.

2.6 Slough Extra Care Schemes: Since 2008, there have been two Extra Care Housing Schemes in Slough; 56 properties at Northampton Place and 70

properties at The Pines. There are a total of 126 properties across the two schemes.

1. Northampton Place is designed with 47 one-bedroom and 9 two-bedroom self-contained properties. 10 of the 56 properties are sold on a shared ownership with the rest being available for rent.
2. The Pines is designed with 55 one-bedroom and 15 two-bedroom self-contained properties. 17 of the 70 properties are sold on a shared ownership with the rest being available for rent.

Under the shared ownership scheme, eligible applicants must buy 75% share of the property, with the Landlord Anchor/Hanover, retaining the remaining 25% share in the property.

- 2.7 Eligibility: Applicants must be 55 years or older, with care and support needs, and have a local connection to the area. For either setting, the applicant must make an application on the housing register to rent an extra care property or register with the Council for shared ownership. Applications are assessed for suitability by the Housing Panel; this is a joint Adult Social Care, Housing Allocations, care operator, and housing operator panel that reviews and agrees applications to the schemes from adult social care and housing allocations.

3. Implications of the Recommendation

3.1 Financial implications

3.1.1 The Council is responsible for procuring a suitable care provider and payment of care and support costs to meet assessed needs.

3.1.2 The current budget/contract price of £848,200 per annum, provides a maximum of 45,130 hours of care; this is a mixture of planned care, unplanned care, and urgent care. It is recommended that re-procurement is undertaken on a maximum budget of £848,200 (excluding any inflationary uplifts awarded) on a block contract basis with no change to the current service delivery model. Details are set out at Exempt Appendix A.

The proposed level of commissioned hours is commensurate with the needs outlined within care reviews for the individuals for whom the council currently provides care across both schemes. These clients typically have complex needs and have had more than one care review undertaken over the last year. Therefore there is some certainty that the level of proposed commissioned hours is being set an appropriate level.

3.1.3 This provision is demand-led, where any changes in service user assessed needs, over and above the contracted value will require approval via the routine Social Care Panel Approval process. This will provide the necessary scrutiny prior to any further commitment of council funds above the contracted level over the life of the contract.

3.2 Legal implications

3.2.1 The Care Act 2014 requires the local authority to meet identified eligible needs as assessed under s9 of the Care Act, and to make appropriate provision to meet those

needs. Where this is identified as Extra Care, then there is a duty placed upon the Council to make that provision.

3.2.2 The Care Act statutory guidance states that 'high quality, personalised Care and Support can only be achieved where there is a vibrant, responsive market of services available'.

3.2.3 Under section 5 of the Care Act, the local authority has a duty to shape and maintain an efficient and effective market of services for meeting care and support needs in the local area.

3.2.4 The duty applies in relation to services that the Local Authority commissions directly, but also to other non-commissioned services in its area (including those used by self-funders), universal services and services provided by partners (such as health or charitable services) that together create the marketplace.

3.2.5 The market that is shaped should ensure that any person requiring Care and Support/Support services:

1. Has a variety of providers, supplying a variety of services to choose from;
2. Has a variety of high-quality services to choose from; and
3. Has sufficient information to make an informed decision about how to meet the needs in question

3.2.6 Use of a properly established Dynamic Purchasing System (DPS) to procure Integrated Care and Support in Extra Care is a compliant procurement approach in accordance with both the Council's Contract Procedure Rules and the Public Contracts Regulations 2015.

3.2.7 The DPS must be operated as a completely electronic process and must be open, throughout the period of validity of the DPS, to any economic operator that satisfies the selection criteria

3.2.8 To procure under a DPS, the council must follow the rules of the restricted procedure, which means that any economic operator can submit a request to participate in response to the call for competition by providing the information for qualitative selection requested by the council. The minimum time limit for receipt of requests to participate, where a prior information notice (PIN) is used as a means of calling for competition, is 30 days from the date on which the PIN is sent to the UK e-notification service - Find a Tender.

3.2.9 The council must offer unrestricted and full direct access free of charge to the procurement documents, by means of the internet, on an ongoing basis from the date on which the PIN is sent. This requirement can be satisfied by providing a link to a procurement portal (such as SE Portal) where potential candidates can access the documents.

3.2.10 The council must finalise their evaluation of requests to participate in the DPS, in accordance with the applicable selection criteria, within ten working days following their receipt, and must simultaneously and in writing invite the economic operators which have expressed their interest to confirm their continuing interest and invite the selected candidates to submit their tenders.

3.2.11 The minimum time limit for receipt of tenders must be at least ten days from the date on which the invitation to tender is sent. However, the council may set the time limit for the receipt of tenders by mutual agreement between the council and all selected candidates, provided that all selected candidates have the same time to prepare and submit their tenders.

3.2.12 Where the council awards a contract under a DPS, there is no compulsory standstill period.

3.2.13 The council must either send a contract award notice within 30 days after the award of each contract based on the DPS or group such notices on a quarterly basis and send the grouped notices within 30 days of the end of each quarter.

3.2.14 HB Public Law can advise as required on the DPS procedural requirements and contract awards and conclusion.

3.2.15 Under Regulation 72 (1) (b) of The Public Contracts Regulations (PCR), the current contract can be extended for a further 5 month period from 1st April 2023 to 31st August 2023 because the additional services from the current contractor have become necessary and were not included in the initial procurement, and a change of contractor:

- (i) cannot be made for economic reasons such as requirements of continuity of existing services procured under the initial procurement, and/or
- (ii) would cause significant inconvenience or substantial duplication of costs for the council,

provided that any increase in price does not exceed 50% of the value of the original contract.

The proposed contract extension is for the minimum period necessary to enable the council to complete the compliant re-procurement process.

The council must send a notice of the contract extension in accordance with Regulation 51 of the PCR to the UK e-notification service (Find a Tender Service) for publication.

3.2.16 The Transfer of Undertakings (Protection of Employment) Regulations 2006 (as amended) ('TUPE') will apply to any transfer of the services to any new contractor(s). While no staff will transfer to or from the council, and so the council itself is not directly subject to TUPE, the tender process must facilitate compliance with TUPE by all bidders.

3.3 Risk management implications

3.3.1 The recommended option will ensure the continuity of supply when the existing contract terminates on the 31ST of March 2023 – both in terms of contract extension and re-procurement. The table below sets out the risks associated with the proposed course of action and the mitigating action.

Risk	Assessment of Risk	Mitigation	Residual Risk
Missing information is not able to be gathered in the timescales set out to enable an effective re-procurement.	Medium It is evident that information either had not been gathered, provided or recorded to the detriment of the current team in seeking to progress the procurement.	. The People Strategy and Commissioning Team is aware of gaps in information and has already sought to remedy this.	Low
Suppliers do not bid under the revised timescales	Medium There is a risk that suppliers will not bid for new services within a difficult economic environment.	Low The aborted procurement attracted market interest. Revised documentation – furnished by evidence, is likely to attract a higher number of compliant and properly costed. bids.	Low
Suppliers bid at rates which are higher than those currently, placing a pressure on Adult Social Care budgets.	Medium The market is facing significant economic pressures. This includes increases in national insurance contributions, inflationary pressures and wage competition from other sectors.	Approaches to inflationary uplifts will be included within tender documents.	Medium / Low
Loss of continuity of supply for service users if the existing supplier does not bid or bids at excessive price	Medium	TUPE will apply to any transfer of service from one provider to another. Service users whose packages of care are identified as potentially requiring transfer will receive a service review to determine whether their individual needs can be met by the new provider.	Low
Providers offering a lower price will result in a lower quality	Medium	There are specific tender development methods to deal with this scenario which set weightings according to constraints and evaluating in quality: price ratios, and identified fixed maximum budget for the service.	Low

		<p>The Extra Care contract will contain a clear set of KPIs which will be monitored.</p> <p>Care providers are also monitored by the Council's Quality Assurance team with issues discussed at the Care Governance Board with improvement plans being submitted to ensure that clear turnaround initiatives are implemented, where required.</p> <p>A suite of KPIs will be included within contracts and suppliers will be required to report against these.</p>	
Extending the current contract breaches public procurement rules	Low	Regulation 72 of the Public Contracts Regulations permits the relatively short contract extension in these circumstances	Low

3.4 Environmental implications

3.4.1 During the procurement process, potential suppliers will be requested to provide a copy of their environmental impact assessment and impact management measures.

3.4.2 The table below provides examples of environmental impact measures that affect Extra Care services:

Environmental Impact	Management Measures
Carbon emissions from staff travelling to work and between service user households.	<p>Staff recruitment centred on local residents thus reducing travel to work carbon emission footprint.</p> <p>Promotion or provision of bicycles for staff travel.</p> <p>Promotion of walking routes for rosters.</p> <p>Promotion of car sharing.</p> <p>Promotion of electric powered cars.</p>
Hazardous Waste management	<p>Promotion and support of service user recycling of household waste packaging.</p> <p>Infection control policies and procedures. Staff trained in infection control and incontinence waste storage and disposal. Use of incontinence waste removal service.</p>

Office and equipment waste management	Use of confidential paper shredding and recycling service. Use of recycled ink cartridges for printers. Recycle electronic equipment with ethical supplier. Reduce paper usage by using electronic alternative methods for communication e.g., electronic rostering and care delivery records.
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3.5 Equality implications

3.5.1 An Equalities Impact Assessment is set out at Appendix 1. Providers will be required to set out how they will meet equalities requirements through the tendering process. This includes meeting the diverse cultural and language needs within the borough and seeking to recruit sufficient male carers to meet demand.

3.6 Procurement implications

The following table sets out the options that have been considered in relation to the procurement route and strategy.

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Procurement Strategic Approach	Consideration	Recommended
Use of Suppliers engaged through mini-competition stage on the ASC Dynamic Purchasing System (DPS)	<p>The approach allows for regular refresh of the list of contracted suppliers at any time, as and when required, via advertisement of mini competitions.</p> <p>New suppliers to the local market are engaged through application to join the DPS at any time with the knowledge that there will be opportunity to apply at mini-competition stage for supply contracts.</p> <p>Early engagement with suppliers successful on joining the DPS allows organisations to clearly understand service delivery requirements.</p> <p>The DPS also allows a time efficient process for specific specialist services to be procured.</p> <p>There are currently 160 providers registered to bid for call-off Contracts on the DPS, for care and support .</p>	<p>Yes.</p> <p>Offers time efficient and flexibility for refresh of suppliers for generic and specialist services.</p>
Open-market procurement	<p>This option may increase new providers into this market.</p>	<p>No.</p> <p>The Council has an effective mechanism for driving competition and</p>

Procurement Strategic Approach	Consideration	Recommended
		<p>seeking best value – the Adult Social Care Dynamic Purchasing System.</p> <p>A process for engagement has been undertaken to inform the Extra Care service model. The timetable for this exercise is compatible with adoption of the DPS contractual mechanism.</p>
Joint Procurement with other neighbouring local authorities/E Berkshire.	Neighbouring boroughs of Bracknell Forest and RBWM are not seeking a procurement of this service type at this time.	No.

Proposed Revised Procurement Timetable

This paper recommends use of the Adult Social Care DPS mechanism for securing Extra Care contracts required to start 1st September 2023. The below timetable is applicable for this purpose:

Event	Target Date
Cabinet authority to commence procurement.	19/12/2022
ITT issued on SE Shared Services E-portal (restricted due to use of DPS).	10/01/2023
Deadline for receipt of clarifications	19/01/2023
Target date for responses to clarifications.	25/01/2023
Deadline for receipt of Tenders.	07/02/2023 at 12 noon
Evaluation of Tenders.	08/02/2023 – 28/02/2023
[Presentations] – Proposed date if required.	To be scheduled
Lead Member Approval of Contract Award	15/03/2023

Tender Evaluation Report to Procurement Review Board	20/04/2023
Notification of contract award decision	27/04/2023
Confirm contract award.	12/05/2023
Start of TUPE consultation period.	01/06/2023
Target service commencement date.	01/09/2023

3.7 Workforce implications

3.7.1 Not Applicable.

3.8 Property implications

3.8.1 Not Applicable.

4. Background Papers

None

Appendix 1 – Equalities Impact Assessment

Directorate: People (Adults)	
Service: Commissioning	
Name of Officer/s completing assessment: Avtar Maan (AV)	
Date of Assessment:27/04/2022	
Name of service/function or policy being assessed: Externally Commissioned Integrated Care and Support in Extra Care Services	
1.	<p>What are the aims, objectives, outcomes, purpose of the policy, service change, function that you are assessing?</p> <p>The provision of Extra Care services is a statutory requirement of the Council under the Care Act 2014. Extra Care workers provide personal care (such as support with getting up, getting washed, eating and drinking), non-personal care (such as support with shopping, household cleaning and laundry) and specific healthcare activities such as end of life care. Extra Care-enabled individuals continue to live independently in their own homes. This Equality Impact Assessment (EIA) will primarily assess possible effects on residents with protected characteristics. Additionally, this EIA assesses the possible effects of recommissioning of Extra Care services for all users and carers who either receive support directly or indirectly. The recommissioning exercise will not see an interruption in service. Individuals who require Extra Care services will not have any disruption to services provided – although they may experience some degree of change if the existing provider is not successful in re-tendering for services or does not re-tender.</p>
2.	<p>Who implements or delivers the policy, service or function? State if this is undertaken by more than one team, service, and department including any external partners.</p> <p>Extra Care providers deliver services in the borough. Commissioning arrangements are managed through the Council’s People Strategy and Commissioning Team. Partnership arrangements are in place with social workers and the NHS.</p>
3.	<p>Who will be affected by this proposal? For example, who are the external/internal customers, communities, partners, stakeholders, the workforce etc. Please consider all of the Protected Characteristics listed (more information is available in the background information). Bear in mind that people affected by the proposals may well have more than one protected characteristic.</p> <p>There are 10 protected characteristics:</p>

	<ol style="list-style-type: none"> 1. Age including younger and older people 2. Disability 3. Gender reassignment 4. Pregnancy and maternity - No Impact 5. Race including ethnic or national origins, colour or nationality 6. Religion or belief including lack of belief 7. Sex 8. Sexual orientation 9. Marriage/civil partnerships No Impact 10. Carers protected by association <p>Individuals in receipt of Extra Care services may have one or more protected characteristics. It is a requirement that all providers delivering Extra Care have appropriate equalities' policies in place.</p> <p>All providers bidding for Extra Care will be required to be registered / to register with the Care Quality Commission. The Care Quality Commission standards set out that services must be able to meet specific cultural, language and spiritual/religious needs through personalisation of the care and support plan.</p>
4.	<p>What are any likely positive impacts for the group/s identified in (3) above? You may wish to refer to the Equalities Duties detailed in the background information.</p> <p>Extra Care services enable individuals to live at home independently as opposed to moving to alternative residential care accommodation. This supports participation in the community and a better quality of life.</p> <p>Extra Care also prevents the need for more expensive and sometimes less satisfactory residential care.</p> <p>Active market shaping in Slough means there are suppliers who have experience specific to the demographic of the borough. E.g., Culture and language, complex care needs, etc.</p> <p>The competitive procurement process will include evaluation of the proposed operational method statements in relation to meeting the needs of Slough's culturally diverse community and related service requirements such as language needs. There are specific challenges in identifying male carers and this will be identified in the ITT documentation.</p>

5.	<p>What are the likely negative impacts for the group/s identified in (3) above? If so, then are any particular groups affected more than others and why?</p> <p>It will be important that any cultural requirements are addressed through the tendering process.</p>
6.	<p>Have the impacts identified in (4) and (5) above been assessed using up to date and reliable evidence and data? Please state evidence sources and conclusions drawn (e.g., survey results, customer complaints, monitoring data etc.).</p> <p>In progress. However, previous work has been taken into account.</p>
7.	<p>Have you engaged or consulted with any identified groups or individuals if necessary and what were the results, e.g., have the staff forums/unions/ community groups been involved?</p> <p>In progress, forums and workshops are planned before the specification is completed. Slough's co-production network will be engaged in the work. Creative Support Ltd have commenced a comprehensive survey with existing service users and their families / carers.</p>
8.	<p>Have you considered the impact the policy might have on local community relations?</p> <p>Ensuring sufficient supply of appropriate Extra Care services which meet the assessed needs of the population will have a positive impact upon community relations.</p>
9.	<p>What plans do you have in place, or are developing, that will mitigate any likely identified negative impacts? For example, what plans, if any, will be put in place to reduce the impact?</p> <p>Any negative impacts will be addressed through the tender exercise and assessment of provider responses.</p>
10.	<p>What plans do you have in place to monitor the impact of the proposals once they have been implemented? (The full impact of the decision may only be known after the proposals have been implemented). Please see action plan below.</p> <p>KPIs developed in partnership with community groups will be actively managed through contract management. These include service user protected characteristic profile monitoring, and reasons for unavailability of staffing/referral declination.</p>

What course of action does this EIA suggest you take? More than one of the following may apply	✓
Outcome 1: No major change required. The EIA has not identified any potential for discrimination or adverse impact and all opportunities to promote equality have been taken	✓
Outcome 2: Adjust the policy to remove barriers identified by the EIA or better promote equality. Are you satisfied that the proposed adjustments would remove the barriers identified? (Complete action plan).	
Outcome 3: Continue the policy despite potential for adverse impact or missed opportunities to promote equality identified. You will need to ensure that the EIA clearly sets out the justifications for continuing with it. You should consider whether there are sufficient plans to reduce the negative impact and/or plans to monitor the actual impact (see questions below). (Complete action plan).	
Outcome 4: Stop and rethink the policy when the EIA shows actual or potential unlawful discrimination. (Complete action plan).	

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