



DERBY CITY COUNCIL

Equality Impact Assessment

Voluntary Community and Faith Grant Aid
Funding 2011- 2015: Impact of the potential
termination of funding for previously funded
groups

21st February 2012 Cabinet Report

**Appendix 4 Equality Impact Assessment of Proposal to Cease Long-Term Funding for Currently Funded Organisations.
9 February 2012**

EQUALITY IMPACT, NEEDS AND REQUIREMENTS ASSESSMENT FORM

Name of policy, practice, service or function: Voluntary Sector Grant Aid Funding: Consultation on long term funding of currently funded projects.

Assessment team leader name: Ian Chennery Voluntary Sector Partnership Manager

Date of assessment: Oct 2011 – February 2012

Department responsible: Adults Health and Housing / Arts and Service Development / Children and Young People Services

Service Area: Sector Wide Development

Note: The consultation for Children & Young People’s Services (CYPS) grant aided services is still ongoing, therefore references to CYPS services within this report should be regarded as a draft comments that will be finalised as their consultation is completed. Further details and timetable for finalising the CYPS sections will be provided to Reference Group.

| Name | Position | Area of expertise | Comments |
|-----------------------|--|--|-----------------|
| Anthony Nichols | Cluster Partnerships Lead NHS Derby City & Derbyshire County | 20 years experience working with community groups and diverse communities, former National Director of Positively Diverse and Head of Equalities NHS Derby City (Provider), established best practice by developing/supporting/seed funding the development of NHS staff support groups (BME, LBG and Disability) prior to 2003 – voluntary ex board member of Leicester lesbian, gay and bisexual centre. | |
| Ann Webster | Derby City Council Lead on Equality and Diversity | Experience (22yrs) of working with equality and diversity issues. | |
| Angela Kerry | Manager, Southern Derbyshire Voluntary Sector Mental Health Forum | Since 2001 have been working under contract to NHS Derbyshire to represent and support mental health voluntary sector organisations within commissioning and planning systems in Derby City and southern Derbyshire (both Health and Local Authority). Since April 2008 also working under contract to NHS Derbyshire/Derbyshire Healthcare Foundation Trust on diversity issues. Total 25 years’ experience working in Derby/Derbyshire voluntary sector. | |
| Christine Collingwood | Consultation and Engagement Manager Derby City Council | Extensive experience of consultation and communication with all equality areas in the community | |
| Dionne Reid | Women’s Work | Information not provided | |
| Fiona Francis | Sight Support Derbyshire Operations Manager | Experience of issues relating to support for people with visual impairments and managing voluntary sector organisations. (20 years management experience of which 4 years are in the voluntary sector) | |
| George Mighty | West Indian Community Association Minority Community Diversity Forum | Experience of issues effecting local African-Caribbean Community, and consultation work with Council and other agencies on Race and ethnicity impact of local policies and strategies. | |
| Ian Chennery | Voluntary Sector Partnerships Manager for Derby City Council | Experience of working with voluntary sector groups, 20 yrs, including partnership work with local authorities, health agencies and the lead for the Council on voluntary sector partnerships and the Compact | |

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| Jackie Costello | Children& Young People Commissioning Derby City Council | 10 years experience working with the voluntary sector through commissioning/contracting roles in adult social care, children's health and social care including completing Equality Impact Risk Assessments (EIRA) for children's health services and procuring services identifying responsibilities around equality and diversity through contractual arrangements. | |
| Jane Harrison | Partnership Co-ordinator Derby City and Neighbourhood Partnerships | Information not provided | |
| Janet Warner | Trustee of Derby Shopmobility, Member of Disabled Peoples Diversity Forum | Founder of ME Derbyshire 1988, extensive experience of Physical and Learning disability issues and working with Council on EIAs, the development of policies, services and good practice. | |
| Julie Mehigan | Derbyshire Friend Gender and Sexual Orientation Diversity Forum | Information not provided | |
| Kirit Mistry | Executive Director – Derby and Derbyshire Race and Equality Commission Vice Chair Minority Community Diversity Forum | Providing Racial Harassment casework and assisting with Police Complaints, Strategic Equality and Human Rights policy work, Young People's Equality and Human Rights, community cohesion, health inequality and BAME infrastructure Support. Also sign posting clients to Derby Law Centre for Employment Racial Discrimination casework. (4 years at Derby REC and over 10 years in Race Equality and Health expertise). | |
| Lynn Gilbey | Disabled Peoples Forum | Information not provided | |
| Matt Allbones | Deputy Chief Executive Community Action Derby | 12 yrs experience of working with a wide number of voluntary sector groups, working with groups that provide services to people with a range of diversity issues. Strategic and local partnership working across the voluntary sector. | |
| Mike Brown | Derby City Council Arts Service Development Manager | Experience (8yrs) of funding Arts Services for diversity groups in the Community | |
| Simon Keeling | Service Manager CAMTAD | Issues relating to support for people with hearing impairments, 5? years experience of working within the voluntary sector organisations and working with health and social care statutory agencies. | |
| Som Bhalla | Indian Community Centre Committee Member. 50+ Forum Member | Experience Derby and Derbyshire Education, particularly around multi ethnic minorities. Derby University support training of health and social care workers, governor of local school and 6 th Form College. Member of Mental Health Carers Groups, Minority Ethnic Consultation Group for Derby Homes. Member of LINK – Healthwatch. Board member of Indian Community Centre. Derby and Derbyshire Blind Association member. | |
| Vivene McCalla | Voluntary Sector Co-ordinator Derby City Council | Experience of working with voluntary sector groups, 20 yrs, working with a range of diversity issues, carrying out EIA's, providing training and developing good practice in diversity issues in service delivery. | |
| Wendy Beer | Derbyshire MIND | 25 years experience of working in the mental health voluntary sector | |

List of Appendices

Appendix 1: List of Affected Groups

Appendix 2: Customer Equality Analysis:

Appendix 2a Equality Target Areas summary of All Applications,

Appendix 2b Equality Target Areas summary of Affected Groups

Appendix 2c Equality Target Areas detail of Affected Groups

Appendix 2d Equality Target Areas detail of all Projects Allocated Grant Aid

Appendix 3: Voluntary Community and Faith Grant Strategy

Appendix 4: Cultural Strategy

Appendix 5 Equality Excellence Report

Appendix 6 Equality and Diversity Plan

Appendix 7 Template for Equalities Monitoring for Grant Aided Services

Glossary:

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|------|-------------------------------------|
| AHH | Adults Health and Housing |
| CIN | Compact Implementation Network |
| CYPS | Children and Young People's Service |
| DCC | Derby City Council |
| EIA | Equality Impact Assessment |
| NHS | Derby City NHS |
| RFO | Regularly Funded Organisation |

Advice is sought from members of the Reference Group on the following Questions:

| Question | Response/ findings |
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| Question 1. What are the main aims and objectives or purpose of the policy, practice, service or function that you are assessing? | To ensure that grant aid to the Voluntary Sector in Derby: <ul style="list-style-type: none"> • Is used to the maximum benefit of Derby residents • Supports the agreed priorities of the Council and underpins the Derby Plan • Provides value for money for people of Derby • Reflects the diversity of the local community |
| Question 2. Who implements, carries out or delivers the policy, practice, service or function? Please state where this is more than one person, team, department, or body – and include any outside organisations who deliver under procurement arrangements | City Council Staff who commission services and grant aid officers from across Derby City Council's Directorates including, <ul style="list-style-type: none"> • Adult Health and Social Care, • Children and Young People • Arts Development Derby NHS grant aid and commissioning staff who jointly commissioned the Adult Health and Social Care grant aided services. |

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| <p>Question 3. Who is effected by the policy, practice, service or function, or by how it is delivered? Such as, who are the external and internal customers, groups, or communities?</p> | <p>Customers, volunteers and paid staff of Voluntary Sector organisations whose long term funding is doubt. A list of these organisations is attached. List in Appendix 1 Affected Groups.</p> |
| <p>Question 4. What outcomes do we want to achieve, why and for whom? For example, what do you want to be providing, how well, what changes or improvements, and what should the benefits be for customers, groups or communities?</p> | <p>The Voluntary Community and Faith (VCF) Grant Strategy (Appendix 3) sets out the strategic priorities for the City Council and how these link to the Derby Plan. Additional details are provided as detailed below:</p> <p>1. For Adult Health and Social Care the Grant Service Specifications (Appendix B sets out further detail of Health and Social Care outcomes)</p> <p>a) Early Intervention and Prevention: Access to Community Opportunities Services that meet this specification will support people to lead more independent, inclusive lives by accessing opportunities for interaction in their local communities.</p> <p>b) Information Advice and Advocacy: Advocacy Services Services that meet this specification will support people to lead more independent inclusive lives by providing advocacy support to enable individual customers to express views, communicate choices, and receive services or take part in making of decisions about services that effect.</p> <p>c) Early Intervention and Prevention: Carers Support Services Services that meet this specification will provide:</p> <ul style="list-style-type: none"> • Support that adapts to individual carers' needs and issues • Specific, targeted interventions that support carers in managing significant risks to their independence, health and well-being. <p>d) Early Intervention and Prevention: First Contact Services The services that meets this specification will to provide specific interventions that support people to manage significant risks to their independence and well-being.</p> <p>e) Information Advice and Advocacy: Information and Advice Services Services that meet this specification will provide information that is appropriate to the customers who use their service and advice that adapts to each individual's needs and issues. The information and advice will assist people to manage major risks to their independence and well-being.</p> |

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| | <p>f) Voluntary and Community Sector (VCS) Infrastructure Support Services</p> <p>Grant aid will be used to provide:</p> <ol style="list-style-type: none"> 1. General Infrastructure Services: that supports the VCS to access: appropriate information and resources, develop networks and partnerships, recruit volunteers, training and receive support for fundraising. 2. Financial Services that supports the VCS to access independent financial assessment, finance systems training and development and payroll services. 3. Business Support Services that support the VCS to access, professional advice, support and volunteers from the Business Sector. 4. Black and Minority Ethnic (BME) Community Infrastructure Services that provide a recognised point of contact and infrastructure support for local BME community groups. <p>g) Early Intervention and Prevention: Responding to health and social care risks and preventing deterioration</p> <p>Services that meet this specification will provide support that adapts to each individual's needs and issues and will assist people to manage significant risks to their independence and well-being.</p> <p>2. For the Arts Development Section the Derby Cultural Plan See Derby Cultural Plan(Appendix C)</p> <p>3. Children and Young People Services will meet the outcomes as highlighted in the Grant Aid Strategy (Appendix 3) and will make a significant contribution to reducing/preventing more children and young people from coming into care by supporting children and young people on an individual basis/in a group setting or within their family unit.</p> <p>4. Requirement to annually review performance on equalities: Voluntary Community and Faith Grant Funding Cabinet Report 27 September 2011 Organisations will be required to carryout an annual equalities review that is appropriate to their service and develop an action plan to improve the accessibility of their service. This will be supported by using the grant forms and guidance currently being developed by the Standard Document Set Working Group.</p> |
| <p>Question 5. What existing or previous inspections of the policy, practice, service or function are there? For example, Best Value Inspections, policy reviews, research into the effects of a policy or practice.</p> <p>What did they tell you?</p> | <p>The following documents provide a background to this EIA.</p> <p>The EIA of the 27th September VCF Grant Aid Report:</p> <p>Adult Health and Social Care: An increased proportion of total grant funding was targeted at services that target people with disabilities (18.8% up to 28.2%) and older people (15.3% up to 20.4%). There was also a small reduction 16.4% down to 16% in the proportion of services that target specific race, gender and Sexual Orientation services.</p> <p>Arts: The comparison of current funding (not including projects that are being moved out of grant aid into contracts) shows that increase proportion of funding for services that target people with disabilities, a decreasing proportion for younger people,</p> |

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| | <p>and marked decrease in percentage terms in race/gender etc specific services. However, in financial terms quite small grant values and numbers of organisations are involved, limiting the impact of these changes. In addition, the VCF Grant Funding Report did not include the Small Arts Grant, an ongoing grant round that supports smaller organisations to get support for arts projects.</p> <p>Children and Young People: There was an increase to 54% of the total recommendation for services to disabled children, young people and their families.</p> <p>Council wide, The Equality Excellent Report (Appendix 5) provides details of the summary of the findings of a Diversity Peer Challenge as part of the Equality Framework for Local Government.</p> |
| <p>Question 6- What do you already know about the equality impact or need? For example, from research, feedback, consultation or any performance monitoring</p> | <p>Appendix 2b and Appendix 2d outline the previous allocation of grant aid and diversity information about the users of these services. Although the grant allocations in grant aid process were against a new set of specifications and criteria the previous figures can be used to provide a context for the analysis of the distribution of grant aid.</p> <p>The main issues highlighted in the previous grant allocation are as follows: Arts Grants – The majority of Arts grants provide general services that don't target a specific diversity group. 1.6% of current grant funding targets specific diversity areas – learning disabilities and South Asian cultures.</p> <p>Adults Health and Housing AHH, Social Care Grants – Grant funding targets many diversity streams, eg. people with disabilities, people from BME communities and older people. The Personalisation Programme for Adult Social Care and changes in the eligibility criteria have been considered in the development of the grant specifications used for Social Care and Health within the VCF Grant process. The specifications have focused on supporting people to remain independent within the community and providing infrastructure support to the VCF sector. Grant aided services are required to meet the needs of people from all equality streams. In addition gaps were identified where there were no suitable applications, these included, these are listed in Appendix 2d and provide services for Indian elders, people with Autism, BSL users, victims of racial harassment, additional advocacy for working age adults with Learning Disabilities, Mental Health issues and other needs, support for carers from BME communities and infrastructure support for BME community groups.</p> <p>Children and Young People, Main Grants - The majority of these grants are provided for general services that don't target a specific diversity group, however 18.5% of previous grant funding targets children, young people from All BME communities or with learning, physical and sensory disabilities.</p> |

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| <p>Question 7. Is there any evidence of higher or lower take up under the policy or practice, or of the service or function for any particular groups? For example, who uses the service, who doesn't and why not?</p> | <p>The tables in Appendix 2 provide evidence of the changes in the allocation of grant aid across all equality areas, and the impact on equalities of the proposal to end funding for the affected groups.</p> <p>Appendix 2a, provides summary of:</p> <ul style="list-style-type: none"> • The pre-existing allocation of grant aid across the equality areas • And the change in allocation following the grant aid process. <p>Appendix 2b provides the same information for the affected projects whose future funding is being considered.</p> <p>Appendix 2c provides a detailed breakdown, for each affected project, of the equality impact of each of these projects.</p> <p>Appendix 2d provides, for comparison a detailed equalities breakdown for all projects allocated grant aid.</p> <p>The Consultation Report that is an appendix to the Cabinet Report provides, for each organisation additional details of the service user's views on the impact of not receiving the service. This includes, where this is provided, the equality details of the public and service users and the impact on equality areas as identified by customers, public, stakeholders and the organisation itself.</p> |
| <p>Question 8. Have there been any important demographic changes or trends locally? For example is the population changing, and if so, how and what might that mean for the service or function?</p> | <p>Derby City has a population of 240,100 with 121,500 men and 122,600 women. We are expecting our population to go up by 17% in the next 30 years, with people over 70 increasing by some 41%. Although we have an ageing population, like the rest of the UK, we have a slightly younger profile than the national average. Derby University and Derby College, also give us quite a large student population in Derby. We have a Royal School for Deaf Children in the city and many of the students stay and make Derby their home, so we have one of the highest populations of Deaf People in the country. We also have a very active LGBT community in Derby with several gay bars and clubs. We estimate we have about 15,846 lesbians, gay men and bi-sexual people living in Derby, according to the National Audit Office suggestion of 6.6% representation of the population.</p> <p>We are a city of diverse cultures and communities, who respect each other's beliefs and traditions. The Derby City Place Survey 2008 told us that 77.1% of people believed people from different backgrounds got on well together in their local area. This was above the Unitary Council average.</p> <p>According to the 2001 Census, nearly 16% minority ethnic people live in Derby, including 8.4% Asian people, of which 4% are Pakistani and 3.8% Indian and 1.8% Black or Black British people, of which 1.4% are African Caribbean. Irish people make up 1.4% of our community. We know our community profile has changed since the Census, as new communities join us, for example people from Poland, Bosnia, Africa, Kosovo, Iraq, and Turkey and we also have a Roma community. In fact there are about 180 nationalities represented in Derby and around 71 languages spoken, the main non English languages being Punjabi, Urdu and Polish, followed by French. People's religion include Christian 67.4%, Muslim 4.5%, Sikh 3.2%, and people with no religion at 15.9%.</p> <p>Our Community Safety Partnership did an exercise in 2008 to show the profile of the city and although this was experimental, it did show us how our city had changed, the full experimental data from this study was included in the EIA for the Voluntary Sector Grant Strategy 2011-2015 Report.</p> |

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| | <p>The last Census also identified that nearly 19% disabled people live in Derby, that's 42,862 disabled people, which is above the national average. The more recent May 2010 Nomis Labour Market statistics found that the total number of people in Derby receiving a disability related benefit was 13,070. The number of Derby residents claiming Carers Allowance increased by 510 between May 2000 and May 2010 to 2,100 claimants, this is 1.2% of the population and is similar to the percentages claiming in the East Midlands – 1.2% and Great Britain – 1.1%. Going back to the Census, 16,100 residents were providing 1-19 hours of care, 2,746 providing 20-49 hours of care and 4,884 residents providing 50 or more hours of care a week.</p> |
| <p>Question 9. Is there an indication that any of the policies or practices involved with the service or function creates particular problems or difficulties for any groups of customers or communities?</p> | <p>The Consultation Report provides details of the impact of the ending of funding on the affected groups. The Report includes feedback from Service Users, public, stakeholders and the organisations themselves. The Consultation process provided additional support to projects, interpretation, one to one meetings, focus groups and translation of consultation documents to support people to access the process.</p> |
| <p>Question 10. What information or data exists? For example, statistics, customer feedback, complaints, research, monitoring – who keeps it and can you get hold of it?</p> | <p>Information used in the assessment is drawn from:</p> <ul style="list-style-type: none"> • Information provided in the grant applications • Monitoring information • The outcome of the consultation process |
| <p>Question 11. Does any equality or diversity objectives already exist? If so, what are they and what is current performance like against them?</p> | <p>The Equality and Diversity Plan sets out the commitment of Derby City Council (Appendix 6) sets out the actions and priorities for the City Council to improve performance across the Council services. This includes objectives around providing equality impact assessments as part of service developments and monitoring equalities in contracts and general service provision. The Council has been a</p> |
| <p>Question 12. Is the service having a positive or negative effect on particular people in the community, or particular groups or communities?</p> | <p>All grant aided services will have a positive impact on positive impact for people from all equality areas. Any changes in funding levels for services that support specific equality areas will be mitigated by requirement for all grant aided projects to consider and improve the way that their services support the equality of access to their services. This requirement is supported by:</p> <ul style="list-style-type: none"> • The inclusion of clauses within the standard terms and conditions of grant aid agreements • Specific requirements in the grant service specifications and action plans to develop grant aided services • The requirement to collect equality information as part of the standard monitoring procedures. Appendix 7 illustrates equalities page of the standard monitoring template that has been developed in consultation with VCF representatives and the Council's lead for Equalities. Details of monitoring required are agreed between Grant Officers and grant funded organisations for each service. |

In addition the VCF Grant Allocation Report 27th September 2011 included a requirement for all grant aided services to review the equality impact of their service and develop an action plan to improve their service that was appropriate to their service area. This will be externally monitored by the Compact and/or the Diversity Forums. It is recommended that an action is included in this EIA to ensure that this monitoring is extended to examine the equality elements within the action plans and service specifications of new grant aid agreements.

The following bullet points a) identify equality issues arising from the proposal to end funding the affected groups discussed in the consultation process.

Arts Grants

Disability and Age

a) Small increase in support for adults with learning disabilities

Comparison of Appendix 2a 'previous funding' and 'awarded funding' shows a small increase (21.7% to 30.7%) for grants to organisations specialising in work with adults with learning disabilities. This is slightly misleading as the level of grant in this area has remained relatively static whereas the overall arts grants awarded have gone down.

BME Communities

b) Reduction in funding for projects that supported south Asian communities in the main grant program

A majority of previous grant awards supported work with all communities. A small proportion of funding to affected groups was a single grant targeted at Indian, Pakistani and Bangladeshi communities. This is reflected in the allocation of the VCF Grant for projects that support this community group (13.4% to 0%). This is mitigated through the provision of the Small Arts Grant fund that is available to all communities.

Adult Social Care and Health,

Data set out in Appendix 2a and 2b 'previous funding' and 'allocated funding' provides an indication of the impact of not funding the affected groups and the impact of this on the total allocation of all VCF funding.

Disability and Age

c) Reduction in grant allocation for projects that target all disabilities in the total grant allocation.

Over 66% of the affected group provided services that supported all disability categories. The potential removal of funding from these groups will have contributed to the reduction (16.5% to 9.1%) of the proportion of funding allocated to groups who targeted all disability categories. By implication this has meant an increase in funding allocated to groups that specialise in support for specific disability areas, eg physical disability, or sensory impairment.

d) No change in total grant allocation for projects that target older people

For the affected groups the next largest category was those groups who specialised in support for older people (14%). This does not have a significant impact on the proportion of funding allocated to older people in the VCF Grant Allocation Report which remains consistent (20.5% to 20.6%)

e) Reduction in total grant allocation for projects that target people with hearing impairment

12.8% of the affected groups supported people with a hearing impairment, this will have an impact on the reduction in the proportion of the VCF Grant allocated to this customer group (4.8% to 4%).

BME Communities

f) Limited impact on support for generic services that support all communities

The majority of affected groups (61.7%) provided services that supported all communities. The proposal to not fund these groups will only have a minor impact on the provision of generic support services within the total VCF Grant allocation as there is only a minor reduction in support to projects that support all communities. (86.7% to 83.1%). This limited change in support also indicates that the overall level of support for projects that supported specific BME and emerging communities has also not changed significantly, although there have been minor changes in which communities were supported.

g) Limited impact on services that target all BME groups.

There was a significant proportion of funding (21%.8%) allocated to affected projects that support all BME and emerging communities. If these projects are not funded there will only be a minor change in the allocation of VCF Grant funding, which did not change significantly. (4.7% to 5%)

h) Changes to services that target specific BME communities

A significant proportion of funding to affected groups was allocated to the African-Caribbean community (9.5%). This is reflected in the reduction in the proportion of the total grant allocation of the VCF Grant for projects that support this BME group (3.3% 1.7%).

Other, smaller, changes in the distribution of funding for groups that target specific communities

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| Reduction in funding for groups that target: <ul style="list-style-type: none">• Indian, Pakistani + Bangladeshi,• Polish,• Pakistani,• White British + Irish,• African,• Indian + white British. | Increase in funding for groups that target: <ul style="list-style-type: none">• Eastern European,• Chinese,• Eastern European emerging communities + African,• Indian |
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Gender, Sexual Orientation and Transgender

i) Increase in VCF funding for groups that target all genders, sexual orientations and transgender and decrease in services that target women only

The most significant proportions for affected groups has been the proportion of grant aid allocated to all gender, orientation

and transgender groups (82.4%) This has a minor impact on the total VCF Grant allocation where the proportion allocated increases slightly (96.3% to 99.3%). This is directly linked to the decrease in funding to services that specialise in support for women (16.5% of the affected groups) that reduces the total VCF Grant allocation for specialist women's services from 2.8% to 0.1%.

Collecting the information and data about how the policy, practice, service or function, impacts on communities

This table records:

- what information or data is needed
- quantitative and qualitative data
- making sure that where possible there is information that allows all perspectives to be considered
- identifying any gaps in the information/ data and what it can tell you

The following information will be collected to support the assessment of the equalities performance of grant aided groups.

| Data or information | When and how was it collected? | Where is it from? | What does it tell you? You need to consider all six equality strands where you can | Gaps in information |
|---|--|--|---|----------------------------|
| Summary of actions to improve equality performance of grant aided groups. | Collated by Grant officers June-Oct 2012 | Developed as part of grant agreement negotiations | It will provide external confirmation that equalities actions have been included in the development of new grant aided services | |
| Summary of the equalities impact of grant aided services | Collated by Grant Aided Groups as part of standard monitoring and annual action planning process | Part of standard monitoring process and grant agreements | Appendix 7 Standard Monitoring Form equalities section indicates the raw data that will be collected. Action plans will identify SMART objectives for equalities appropriate to each service. | |

Action Plan: Monitoring and reviewing - incorporating into performance management
Overarching Aim: Grant Aid funding reflects diversity in local community:

| Objective | Planned action | Target performance | | | Responsible lead officer | Reporting cycle, for example, quarterly |
|--|--|---|--|---------|--|--|
| | | 2012/13 | 2013/14 | 2014/15 | | |
| 1. VCF Grant aided services demonstrate actions to improve equality of grant aided services. | Grant Aid Agreements will include appropriate actions to improve the equality of access of Grant Aided Services. Recommendations for additional support for groups will inform annual equality action plans. | Jan- June. Information collated October Summary of equality information from Grant Agreements and action plans presented to Diversity Forums | A requirement to report to on the equality performance of grant aided groups has already been included in the September 2011 VCF Grant Allocation Report to gather feedback from Annual Action Plans to continue this monitoring | | Grant Officers setting up grant agreements. Summary coordinated by VCS Team | October 2012 Report to Diversity Forums of City Council. Forum role is challenge Grant Officers if action to improve equality performance has not taken place and make recommendations on future actions and /support for VCF groups |
| 2. Customers of groups who are not funded, particularly those with language and other access issues are provided with information on alternative support options | Grant officers will work with organisations whose funding is terminated and who target specific equality customer groups to support these organisations to provide their customers with alternative sources of support for where this is required. | Feb-May Customers receive information about alternative sources of support/future arrangements | | | Grant Officers for groups whose funding is terminated | October Report to diversity forums |

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| <p>3. Identify if there are additional actions that would support groups that support people with language or other issues to participate in consultation processes</p> | <p>Survey of affected groups that did not take part in the consultation to identify why they did not take part and any additional support that could have been provided.</p> | <p>March Results of survey fed back to City Council Consultation Team</p> | | <p>Grant Officers for groups who did not respond to consultation</p> | <p>June Report to Consultation Team to inform future developments. Key recommendations fed back to Diversity Forums and Compact Forum.</p> |
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SMART Analysis of Action Plan Objectives - process, impact or outcome based?

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| Objective/Target: | 1 VCF Grant aided services demonstrate actions to improve equality of grant aided services. |
| Specific | Yes |
| Measurable | The effectiveness of the objective will be assessed by Diversity Forums |
| Achievable | Yes |
| Relevant | Identified by EIA Reference Group and links to Annual Equalities Plans required in 27 th Sept Cabinet Report on VCF Funding |
| Timed | Jan – Sept 2012 |

SMART Analysis of Action Plan Objectives - process, impact or outcome based?

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|--------------------------|--|
| Objective/Target: | 2. Customers of groups who are not funded, particularly those with language and other access issues are provided with information on alternative support options |
| Specific | Yes |
| Measurable | The objective will be assessed by Diversity Forums |
| Achievable | Yes, with support of organisations concerned. |
| Relevant | Will ensure that customers have access to services that consider their equality access issues. |
| Timed | Feb - May 2012 |

SMART Analysis of Action Plan Objectives - process, impact or outcome based?

| | |
|--------------------------|--|
| Objective/Target: | 3. Identify if there are appropriate additional actions that would support groups to participate in consultation processes |
| Specific | Yes |
| Measurable | The objective will be assessed by Consultation Team to inform future consultation |
| Achievable | Yes, |
| Relevant | Will ensure that future consultation takes any required additional measures to include people with range of equality access support needs. |
| Timed | Feb - May 2012 |