

Due Regard Statement

Please use this statement to evidence how 'due regard to' the three aims of the public sector equality duty has been made (section 149 of the Equality Act 2010) during the development of the 'policy'.¹

- Eliminate discrimination, harassment and victimisation and any other conduct prohibited by the ACT:
- Advance equality of opportunity between people who share a protected characteristic and people who do not share it; and
- Foster good relations between people who share a protected characteristic

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| Name of the 'policy': | Building Better Lives policy document & Cabinet Paper |
| Person(s) responsible for completing this statement | Chris Haynes – Joint Lead Commissioner Agy Pasek- Strategy and Transformation Manager |
| Briefly describe the activity being considered including aims and expected outcomes | <p>A consultation with a wide range of stakeholders on the Building Better Lives policy.</p> <p>The consultation will enable consultees to influence:</p> <ul style="list-style-type: none"> • Whether such a joined up approach is the right direction of travel • Whether the drivers and needs which the approach is intending to meet are comprehensive and correct • Whether the principles upon which the policy is based are the right ones • Whether the objectives of the new system are suitable <p>If cabinet gives approval for consultation to go ahead in April, the consultation results will inform the production of an implementation plan and final policy which will return to cabinet in</p> |

¹ For 'policy': any new and existing policy, strategy, services, functions, work programme, project, practice and activity. This includes decisions about budgets, procurement, commissioning or de-commissioning services, service design and implementation.

September.

A separate Due Regard statement will be put together to look at the impact of the policy itself on the protected groups as this Due Regard exercise relates to the consultation plan specifically. These will both be working documents and the impact of the policy will be compared against the figures gathered in the data section of this document.

Documenting use of sufficient information

Please document below the data and information sources that you have used to understand the needs, participation and experiences of each protected group. Evidence must be gathered as the policy is developed and used to inform decisions.

Service user data

Service user data is an important source of evidence and should be collated as part of routine monitoring of in- house or external services. If service user data is not available record 'not known' and use the action plan to identify what improvement actions will be used to gather data going forward.

Service user diversity reports are available on our website and give an indication of service user participation across commissioning areas, for example adult residential services and youth services. It does not include participation data at individual service level.

Needs analysis

Gloucestershire population demographics data is available to understand the representation of different protected groups across the county and help with needs analysis. Data like this may also be useful for benchmarking to identify under or over representation of a service by any of the protected groups. For example, a service is open to all residents and from monitoring you know that 2% of service users are disabled: However, demographic data indicate that 16.7% of Gloucestershire residents report having a disability or long term limiting illness. This finding can be used to explore if there are barriers to participation by residents with disabilities and how this can be addressed as part of the development of your 'policy'.

Data gaps

You may find that you have more information about some of the protected groups for example, gender, age, disability and less about others, for example, sexual orientation and religion and/or belief. If data is not available and you intend to start collating data about a protected characteristic please use the action plan to outline how this data will be collated. You can find equality monitoring guidance on our website including an equality monitoring template.

If you have no plans to start collating data about a protected characteristic please state the rationale why.

Service information (if applicable) or Needs analysis (if applicable)

| <p>Who is responsible for delivering the service?</p> | <p>Gloucestershire County Council.</p> | | | | | | | | | | | | | | | |
|--|--|--|-----------|-------------------------|-------|-------|-------|--------|-------|--------|-------|--------|-----|--------|--------------------|----------------|
| <p>Service user data/Needs analysis information</p> | | | | | | | | | | | | | | | | |
| <p>Age</p> | <p>Of Service Users</p> <p>In 2011, 99,800 people in Gloucestershire reported to the Census that they had a long-term health problem or disability.</p> <p>Of these, 43,300 had a condition that limited their day-to-day activities 'a lot', which could represent the potential number of people who might require care services from the council at some point.</p> <p>Of the people whose condition affected their activities 'a lot':</p> <ul style="list-style-type: none"> → 1,300 were children aged 0-15. → 1,000 were young people aged 16-24. → 15,500 were aged 25-64 → 25,500 were aged 65 or above <p>This is the best overall picture we have about the population of people with a disability in Gloucestershire, although we are aware that the figures for people aged 65 include some older people with a disability which was acquired due to</p> | <p>Of Workforce Staff</p> <table border="1"> <thead> <tr> <th>Age Range</th> <th>Percentage of Workforce</th> </tr> </thead> <tbody> <tr> <td>16-25</td> <td>3.40%</td> </tr> <tr> <td>26-35</td> <td>15.50%</td> </tr> <tr> <td>36-45</td> <td>23.90%</td> </tr> <tr> <td>46-55</td> <td>35.87%</td> </tr> <tr> <td>56+</td> <td>21.32%</td> </tr> <tr> <td>Grand Total</td> <td>100.00%</td> </tr> </tbody> </table> <p>The highest percentage of the workforce is in the 46 to 55 age range, closely followed by the 36 to 45.</p> <p>3.4% of the workforce is aged 16 to 25.</p> <p>There is a rise in our over 56 demographic.</p> | Age Range | Percentage of Workforce | 16-25 | 3.40% | 26-35 | 15.50% | 36-45 | 23.90% | 46-55 | 35.87% | 56+ | 21.32% | Grand Total | 100.00% |
| Age Range | Percentage of Workforce | | | | | | | | | | | | | | | |
| 16-25 | 3.40% | | | | | | | | | | | | | | | |
| 26-35 | 15.50% | | | | | | | | | | | | | | | |
| 36-45 | 23.90% | | | | | | | | | | | | | | | |
| 46-55 | 35.87% | | | | | | | | | | | | | | | |
| 56+ | 21.32% | | | | | | | | | | | | | | | |
| Grand Total | 100.00% | | | | | | | | | | | | | | | |

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| | <p>their age.</p> | |
| <p>Disability</p> | <p>In January 2014 there were 3,618 service users aged 18-64 receiving social care services (including reablement and other short term services). Of these:</p> <ul style="list-style-type: none"> • 36% (1,319) had a primary care need of Learning Disability • 50% (1,825) had a Physical Disability • 5% (169) had a Mental Health issue • 9.4% of these are aged 18-25 (340 people) <p>Although the overall prevalence of disability in Gloucestershire at 16.8% was below the national level, it was higher than the level 10 years ago (16.1%).</p> <p>The overall rate of growth also rose faster than that in the general population (9.4% compared to 5.7%). The rising trend was largely due to a growing number of elderly people living longer with a long term illness or disability, which resulted in higher prevalence among the oldest age groups.</p> <p>GPs do not hold a single register of all patients with disabilities but they have a few registers of individual conditions and disabilities that can be used as indicators for showing the levels of disabilities and long term conditions in the county compared to general England trends. As with any health data, it should be noted that the register is partly dependent</p> | <p>Disability</p> <p>Not Disabled 86.25%</p> <p>Disabled 4.68%</p> <p>Prefer not to say 0.61%</p> <p>Unstated 8.46%</p> <p>Grand Total 100.00%</p> <p>The percentage population of disabled people in Gloucestershire aged between 16 and 64 is 7%. The council is committed to supporting and developing all staff and appointing the 'best' person for the job. We are keen to enable employees who become disabled to remain in work by providing reasonable adjustments to their working environment or how they carry out their duties.</p> |

on how likely clinicians (and patients) are to diagnose and recognise certain conditions, and many less obvious conditions can go undetected for entire lifetimes.

According to GP data for the year 2012/13, the overall reported disability prevalence in Gloucestershire was similar to national levels.

- In sensory disability, the county's reporting rate of blindness/severe visual impairment and deafness/severe hearing impairment are 0.9% and 4.1% respectively, compared to the national averages of 1.1% and 4.0%.
- There is no direct measure of physical disability.
- For mental health issues, Gloucestershire is better than the national picture except for conditions relating to older people, as the county has an older age profile than nationally. For instance, the county rates for depression and long term mental health problems are 5.5% and 4.2% respectively, lower than national rates of 5.8% and 4.5%.
- The county figure for recorded dementia is 0.7% of all people, marginally above the national rate of 0.6%.

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| | <ul style="list-style-type: none">• In learning disabilities, 0.6% of all adults in Gloucestershire have the conditions recorded by GPs, compared to 0.5% nationally. <p>People with mental health issues 243 people are funded from the adult mental health community care budget.</p> <p>Approximately 2,784* individuals receive support from specialist mental health teams that have an integrated Social Work function.</p> <p>Out of those 2,784 people approx:</p> <ul style="list-style-type: none"><input type="checkbox"/> 179 receive supported accommodation.<input type="checkbox"/> 191 receive specialised employment support.<input type="checkbox"/> 243 receive a funded social care package. <p><i>*This number excludes people with organic disorders, Learning Disability, Eating Disorders, Criminal Justice Liaison, Eating Disorder liaison and inpatient services</i></p> <p>Children with a disability:</p> <p>Available data suggests that there are about 480 children and young people with disabilities in Gloucestershire who meet the children with disability service criteria.</p> <p>The majority (approximately 350) are being worked</p> |
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| | <p>with by Targeted Support teams while the remainder (approximately 130 children) are being worked with in Children & Families (C&F) teams.</p> <p>At the same time, about 220 children are identified in the social care system Liquid Logic as having a disability, meaning that just under 100 children open to social care are recorded as having disabilities but do not meet children with disability service criteria.</p> <p>Learning Disabilities</p> <p>Gloucestershire has a population of adults with a learning disability known to GPs of 5.8 per 1,000. This is significantly above both the national and regional averages, in part due to the significant imported population of people with learning disability who has been placed in residential care or supported living by other authorities.</p> | | | | | | | | | | |
| <p>Sex</p> | <p>The 2011 census states that of people with 'a disability that limits their day to day activities a lot' (across the age brackets), 55.2% were male and 44.8% female.</p> <p>The available statistics show that:</p> <ul style="list-style-type: none"> - There are more boys than girls with a disability under the age of eighteen. - There are slightly more females than males with a disability aged between eighteen and sixty-four. | <p>Gender Percentage of Workforce</p> <table border="0"> <tr> <td>Female</td> <td>72.75%</td> <td></td> </tr> <tr> <td>Male</td> <td>27.25%</td> <td></td> </tr> <tr> <td>Grand Total</td> <td></td> <td>100.00%</td> </tr> </table> <p>73% of the council's workforce is female, this remains significantly higher than the workforce population as a whole (53%).</p> <p>53% of the female workforce works part time.</p> <p>We have good representation of women in senior management levels</p> | Female | 72.75% | | Male | 27.25% | | Grand Total | | 100.00% |
| Female | 72.75% | | | | | | | | | | |
| Male | 27.25% | | | | | | | | | | |
| Grand Total | | 100.00% | | | | | | | | | |

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| | <p>-There are more women than men with a disability amongst people aged over sixty-five.</p> | |
| <p>Race (including Gypsy & Traveller)</p> | <p>Further analysis of the Gloucestershire census numbers show that among those who had a condition or disability that limited their day-to-day activities 'a lot': The vast majority were of white ethnic backgrounds (97.3%), which was broadly in line with the county's ethnic structure.</p> <p>The Building Better Lives Consultation will cater for people with disabilities of all age and all 9 protected characteristics.</p> | <p>Race</p> <p>White British 86.25%</p> <p>Unstated 5.82%</p> <p>White Other 3.43%</p> <p>Black 1.49%</p> <p>Asian 1.46%</p> <p>Mixed 1.17%</p> <p>Other 0.37%</p> <p>Grand Total 100.00%</p> <p>There is a larger proportion of BME employees amongst younger workers, particularly those aged 16-25, where nearly 9% of all employees, double the organisational average, are from a BME background.</p> |
| <p>Gender reassignment</p> | <p>Data has not been collated as it is not currently available. As a result, plans have been made through the consultation plan to ensure that consultation participation is not affected for a person based on whether or not they had had gender reassignment.</p> | <p>We have identifiable representation of transgender but as this is a low percentage we will not disclose this number in this report so as to avoid illegally identifying anyone.</p> |

| <p>Marriage & civil partnership</p> | <p>Data has not been collated as it is not currently available. As a result, plans have been made through the consultation plan to ensure that consultation participation is not affected for a person based on their relationship status.</p> | <table border="0"> <thead> <tr> <th>Marriage and Civil Partnership</th> <th>Percentage of Workforce</th> </tr> </thead> <tbody> <tr> <td>Divorced</td> <td>0.32%</td> </tr> <tr> <td>Living with Partner</td> <td>3.91%</td> </tr> <tr> <td>Marriage/Civil Partnership</td> <td>22.73%</td> </tr> <tr> <td>Separated</td> <td>1.14%</td> </tr> <tr> <td>Single</td> <td>6.22%</td> </tr> <tr> <td>Widow</td> <td>0.08%</td> </tr> <tr> <td>Prefer not to say</td> <td>0.72%</td> </tr> <tr> <td>Unstated</td> <td>64.88%</td> </tr> <tr> <td>Grand Total</td> <td>100.00%</td> </tr> </tbody> </table> | Marriage and Civil Partnership | Percentage of Workforce | Divorced | 0.32% | Living with Partner | 3.91% | Marriage/Civil Partnership | 22.73% | Separated | 1.14% | Single | 6.22% | Widow | 0.08% | Prefer not to say | 0.72% | Unstated | 64.88% | Grand Total | 100.00% |
|---|--|--|--------------------------------|-------------------------|----------|-------|---------------------|--------|----------------------------|--------|-----------|-------|--------|-------|---------------|--------|-------------------|-------|-------------------|--------|--------------------|----------------|
| Marriage and Civil Partnership | Percentage of Workforce | | | | | | | | | | | | | | | | | | | | | |
| Divorced | 0.32% | | | | | | | | | | | | | | | | | | | | | |
| Living with Partner | 3.91% | | | | | | | | | | | | | | | | | | | | | |
| Marriage/Civil Partnership | 22.73% | | | | | | | | | | | | | | | | | | | | | |
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| Single | 6.22% | | | | | | | | | | | | | | | | | | | | | |
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| Prefer not to say | 0.72% | | | | | | | | | | | | | | | | | | | | | |
| Unstated | 64.88% | | | | | | | | | | | | | | | | | | | | | |
| Grand Total | 100.00% | | | | | | | | | | | | | | | | | | | | | |
| <p>Pregnancy & maternity</p> | <p>This is not an area which ERIC enables us to collect information about currently. It is an important issue and systems need to improve to develop a better understanding.</p> <p>As a result, plans have been made through the consultation plan to ensure that consultation participation is not affected for a person based on whether they are pregnant or a parent.</p> | <p>The council had 116 employees who returned from maternity leave and four who did not.</p> | | | | | | | | | | | | | | | | | | | | |
| <p>Religion or Belief</p> | <p>Data has not been collated as it is not currently available. As a result, plans have been made through the consultation plan to ensure that consultation participation is not affected for a person based on their religion or beliefs.</p> | <table border="0"> <thead> <tr> <th>Religion</th> <th>Percentage of Workforce</th> </tr> </thead> <tbody> <tr> <td>Buddhist</td> <td>0.19%</td> </tr> <tr> <td>Christian</td> <td>16.46%</td> </tr> <tr> <td>Hindu</td> <td>0.11%</td> </tr> <tr> <td>Muslim</td> <td>0.40%</td> </tr> <tr> <td>None</td> <td>0.16%</td> </tr> <tr> <td>Not religious</td> <td>10.32%</td> </tr> <tr> <td>Other</td> <td>0.74%</td> </tr> <tr> <td>prefer not to say</td> <td>1.33%</td> </tr> <tr> <td>Unstated</td> <td>70.30%</td> </tr> </tbody> </table> | Religion | Percentage of Workforce | Buddhist | 0.19% | Christian | 16.46% | Hindu | 0.11% | Muslim | 0.40% | None | 0.16% | Not religious | 10.32% | Other | 0.74% | prefer not to say | 1.33% | Unstated | 70.30% |
| Religion | Percentage of Workforce | | | | | | | | | | | | | | | | | | | | | |
| Buddhist | 0.19% | | | | | | | | | | | | | | | | | | | | | |
| Christian | 16.46% | | | | | | | | | | | | | | | | | | | | | |
| Hindu | 0.11% | | | | | | | | | | | | | | | | | | | | | |
| Muslim | 0.40% | | | | | | | | | | | | | | | | | | | | | |
| None | 0.16% | | | | | | | | | | | | | | | | | | | | | |
| Not religious | 10.32% | | | | | | | | | | | | | | | | | | | | | |
| Other | 0.74% | | | | | | | | | | | | | | | | | | | | | |
| prefer not to say | 1.33% | | | | | | | | | | | | | | | | | | | | | |
| Unstated | 70.30% | | | | | | | | | | | | | | | | | | | | | |

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| | | Grand Total | 100.00% |
| Sexual Orientation | Data has not been collated as it is not currently available. As a result, plans have been made through the consultation plan to ensure that consultation participation is not affected for a person based on their sexual orientation. | Sexual Orientation Bisexual 0.29% Gay man 0.61% Gay woman/lesbian 0.48% Heterosexual/straight 40.02% Prefer not to say 3.19% Unstated 55.41% Grand Total | 100.00% |

Other information

Please see the *GCC Building Better Lives Policy 2014-2020* for a full environmental scan and predictions and forecasts around future demand.

This is further supported by the *GCC Equality and diversity service user report 2013-2014*.

Please see the Workforce Equality and Diversity Report (2013/14) for a complete breakdown of GCC staff data.

Workforce data

Please document details of GCC staff only if they will be affected by the proposed activity. This could include GCC staff transferring under TUPE to a new service provider, relocating, employment at risk. **GCC Workforce diversity reports** are available on our website.

If the proposed activity does not affect GCC staff, please state 'Not affected below'.

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| Total number of GCC staff affected | All teams within the children and young people social care and adult social care. |
| Age | We have considered this protected characteristic, and can see no disproportionate impact for any potential staff involved with this protected characteristic. |
| Disability | We have considered this protected characteristic, and can see no disproportionate impact for any potential staff involved with this protected characteristic. |
| Sex | We have considered this protected characteristic, and can see no disproportionate impact for any potential staff involved with this protected characteristic. |
| Race (including Gypsy & Traveller) | We have considered this protected characteristic, and can see no disproportionate impact for any potential staff involved with this protected characteristics. |
| Gender reassignment | We have considered this protected characteristic, and can see no disproportionate impact for any potential staff involved with this protected characteristic. |
| Marriage & civil partnership | We have considered this protected characteristic, and can see no disproportionate impact for any potential staff involved with this protected characteristic. |
| Pregnancy & maternity | We have considered this protected characteristic, and can see no disproportionate impact for any potential staff involved with this protected characteristic. |
| Religion or Belief | We have considered this protected characteristic, and can see no disproportionate impact for any potential staff involved with this protected characteristic. |
| Sexual Orientation | We have considered this protected characteristic, and can see no disproportionate impact for any potential staff involved with this protected characteristic. |

Consultation and engagement

List all types of consultation that has taken place during the development of this activity. Include on-line consultations, events, meetings with stakeholders, community events, employee consultation exercises etc

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| <p>Service users</p> | <p>Consultation will not commence unless approval is given by Cabinet in April 2014. Please see the consultation plan for more information.</p> <p>Service users to be consulted include:</p> <ul style="list-style-type: none"> ➤ Adults with a disability and/or mental health issue ➤ Children and young people to whom either one or more of the following apply: they have a disability, they have a special educational need, they have a mental health issue. ➤ Carers and family members of children, young people or adults with a disability, mental health issue or special educational need. |
| <p>Workforce</p> | <p>Workforce to be consulted include:</p> <ul style="list-style-type: none"> ➤ The Gloucestershire Corporate Management Team (COMT) ➤ Internal GCC operational and commissioning staff ➤ Unions |
| <p>Partners</p> | <p>Partners to be consulted include:</p> <ul style="list-style-type: none"> ➤ GCC cabinet ➤ Elected members ➤ Gloucestershire Clinical Commissioning Group ➤ Gloucestershire Hospitals NHS Foundation Trust |

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| | <ul style="list-style-type: none"> ➤ The 2gether Trust ➤ The Learning Disability Partnership Board ➤ The Autism Partnership Board ➤ The Mental Health and Wellbeing Board ➤ User-led organisations (PING, DROP, Gloucestershire Voices) ➤ Gloucestershire Safeguarding Adults Board ➤ Gloucestershire Safeguarding Children Board ➤ The Health Overview and Scrutiny Committee ➤ Children and Families Overview and Scrutiny Committee ➤ Gloucestershire Commissioning Board |
| <p>External providers of services</p> | <p>External providers and services to be consulted include:</p> <ul style="list-style-type: none"> ➤ The Parent Carer Council ➤ Carers Gloucestershire ➤ Schools and Further Education / Higher Education colleges (including the schools forum) ➤ Disability-related groups and associations ➤ Providers, the Gloucestershire Care Providers Association and Aiming High Network Group and their representatives ➤ The Department for Work and Pensions ➤ The Voluntary Sector / GAVCA ➤ Local businesses ➤ Gloucestershire Care Services |

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| | <ul style="list-style-type: none"> ➤ Public Health ➤ The police ➤ The general public ➤ The media |
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Equality analysis: Summary of what the evidence shows and how has it been used

This section will allow you to outline how the evidence has been used to show 'due regard' to the three aims of the general equality duty. It is important that this consideration is thorough and based on sufficient information. Consideration should be relevant and proportionate.

- Eliminate discrimination
- Advance equality of opportunity
- Promote good relations

| Protected group | Challenge or opportunity considered and what we did |
|-----------------|--|
| Age(A) | <p>Service Users – Building Better Lives aims to have a positive impact on service users of all ages, and indeed much of the policy focuses on the positive outcomes of an all age approach. We will ensure we get good response rates across age groups to the consultation – including older people with a disability and children and young people.</p> <p>Internal Workforce – We have a robust consultation plan which uses a variety of consultation channels and ensures nobody's ability to provide their views and feedback is affected by their age.</p> <p>External Providers and Services – We will have a robust consultation plan which uses a variety of consultation channels and ensures nobody's ability to provide their views and feedback is</p> |

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| | <p>affected by their age.</p> <p>We do not consider the consultation about the Building Better Lives Policy will have a negative impact on any of the nine protected characteristics.</p> |
| Disability (D) | <p>We envisage that the Building Better Lives consultation will have a positive impact on people with a disability.</p> <p>A number of accessible consultation channels will be used to ensure that people with a disability are able to fully contribute to the consultation (such as focus groups, out-reach events, user-led consultation events etc.)</p> |
| Sex (S) | <p>We do not envisage that there is any reason why the impact of the consultation should be affected by sex. We will monitor this through the consultation review points and mid-period review.</p> |
| Race (including Gypsy & Traveller)(R) | <p>We will ensure that the consultation is open to everyone and will make particular effort to target BAME groups and get into hard-to-reach locality areas. We will monitor the success of this through the consultation review points and mid-period review.</p> |
| Gender reassignment(GR) | <p>We have not identified this consultation as having an impact on this protected group. We will make best use of appropriate gender-related community groups to help ensure that people's ability to participate is not affected by their sexual orientation.</p> <p>We have not identified this consultation as having an impact on this protected group.</p> |
| Marriage & civil partnership (MCP) | <p>We have not identified this consultation as having an impact on this protected group.</p> |
| Pregnancy & maternity (PM) | <p>We have not identified this consultation as having an impact on this protected group. We will make best use of appropriate religious and spiritual community groups to help ensure that people's ability to participate is not affected by their sexual orientation.</p> |
| Religion and/or Belief (RAOB) | <p>We have not identified this consultation as having an impact on this protected group. We will make best use of appropriate gender-related community groups to help ensure that people's ability to participate is not affected by their sexual orientation.</p> |
| Sexual Orientation(SO) | <p>We have not identified this consultation as having an impact on this protected group. We will make best use of appropriate gender-related community groups to help ensure that people's ability to participate is not affected by their sexual orientation.</p> |

Strengthening actions: Planning for further improvements

Please outline here what actions are required for further improvements to address challenges or opportunities, for example:

- Arrangements for continued/new engagement with stakeholders, staff, service users
- Plans to close data gaps across any of the protected characteristics through reviewed contract management arrangements
- Identify other plans already underway to address the challenges or opportunities identified in this statement
- Share findings with partner organisations.

Action Plan

| Action | Who is accountable | Time frame |
|--|--------------------|------------------|
| Pre-consultation events | Chris Haynes | Feb – May 2014 |
| You Engage Online consultation | Chris Haynes | April, May, June |
| GCC-run focus groups | Chris Haynes | April, May, June |
| User-led run focus groups | Chris Haynes | April, May, June |
| Youtube video | Chris Haynes | April, May, June |
| Outreach to existing groups and forums | Chris Haynes | April, May, June |
| Twitter and social media publicity | Chris Haynes | April, May, June |

Monitoring and Review

Please indicate what processes/actions will be put in place to keep this 'activity' under review. For example will progress be monitored/ reported to a board, scrutiny committee, project board etc

This statement will be reviewed on an on-going basis as the programme develops. .

- The Building Better Lives Policy Programme Board will continue to monitor all activities in relation to the consultation.
- The consultation plan describes governance arrangements for the consultation, tracking mechanisms and contingency plans.
- Any additional intelligence relating to the population of people with a disability will be added to this document as it is made available, based on work being carried out by the performance team.
- Information about the response to the consultation which informs our responses to the nine protected characteristics will be added to this document at the end of the consultation and during the end of consultation review point if applicable.

Sign off and Scrutiny

By signing this statement off as complete you are confirming that 'you' have examined sufficient information across all the protected groups and used that information to show due regard to the three aims of the general duty. This has informed the development of the activity

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| Senior level sign off:  | Date: 21.3.14 |
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I am in agreement that sufficient information and analysis has been used to inform the development of this 'activity' and that any proposed improvement actions are appropriate and I confirm that I as the decision maker have been able to show due regard to the needs set out in section 149 of the Equality Act 2010.

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| Name of relevant Portfolio Holder/Cabinet Member: Cllr Kathy Williams and Cllr Paul McLain | Date: 24.3.14 |
| Signed by Portfolio Holder/Cabinet Member:   | Date: 24.3.14 |

Publication

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