

DRAFT Initial Budget Equality Impact Assessment

Please add content where << XXX>> is indicated.

Please make Yes or No bold as appropriate.

1. The Project

Directorate: Adults and Housing

Theme or area: Home Care Resourcing

Lead Officer: Gerald Hunt

Date: 28th November 2025

		Budget reduction (£)		
Budget Reference	Budget Proposal	2026/27	2027/28	2028/29
ASH08	Home Care /Community Meals – optimising service routes	£150,000	£50,000	

Description of the project:

The aim of the project is to drive reduced costs of commissioning domiciliary care from improved planning and allocation of resources using Artificial Intelligence (AI). Artificial Intelligence optimises solutions and services for sectors including transport logistics, field service and community health and care. It uses cloud-based software for planning domiciliary care and other types of community-based care.

We have undertaken an evaluation of the three strategic Support to Live at Home providers, and our community meal routes analysing the efficiencies of their current planning and producing optimised scenarios which incorporate transferring care packages routing which will generate capacity to reduce our reliance on spot contracting.

Summary of changes:

Undertaking this project will enable our strategic domiciliary care providers to increase their capacity to take on additional care packages, transferred from more costly spot providers, thereby reducing spend on spot-contacts as well as overall spend on domiciliary care. Due to years of challenges around recruitment into the domiciliary care sector, we have not been able to manage the market as effectively as we would have liked. The commissioning of our strategic Support to

Live at Home (STLaH) contracts work in principle but there has remained a minority of provision delivered by our spot framework providers. The project has generated savings of over £250k already from readdressing the market split in favour of the STLaH providers, which has been our intention since 2015 and where this hasn't been possible, renegotiating more favourable spot prices.

As well as addressing the market split, the project will allow us to realise the ambition of our strategic domiciliary care commissioning in reducing the geographical area that staff are covering. This has several benefits:

- improvement in pay and terms and conditions for staff from less travel or downtime.
- in turn, improved continuity of care staff and times of calls for people who draw on care and support
- reduced waiting times for people to receive a package of care due to an increase in capacity
- environmental benefits that are essential to supporting the climate emergency. It will also provide an environmental benefit by reducing mileage and associated CO2 emissions. Reducing overall mileage has the additional potential to increase the portion of journeys on foot and bicycle.

Are any of the proposals within this theme a continuation of a previous medium-term financial plan saving?

Yes No

If yes, please insert reference number and year of assessment?

Budget Proposal	Year of assessment	Budget Reference
Implementation of home care resourcing to optimise planned activity	2025/26	ASH08

If yes, please describe what steps you have taken to review the equality impacts from previous years?

The work is ongoing, savings have been above expectations, but the project has also provided reassurance that strategic providers are scheduling staff journeys realistically, not the evidence of similar work undertaken in England. We will be meeting with each strategic provider to assess potential efficiencies from the next stage of the work, and the analysis will inform future commissioning arrangements to optimise route planning. The route optimisation retains a minimum 30-minute adjustment maximum to existing packages but offers potential mileage route savings of c 30 to 40%.

2. Customer equality impact summary

Will the changes proposed in this project have a disproportionate impact (or bias) for any of these groups?

Insert X into one box per row, for impact level and type.

H = High, M = Medium, L = Low, N = None

+ = Positive, - = Negative

Protected or significant group	Impact Level				Impact type	
	H	M	L	N	+	-
Disabled people (Including the consideration of neurodiversity)			X			X
People from different ethnic groups				X		
Men or women (including those who are pregnant or on maternity leave)				X		
People who are LGBTQ+				X		
People on a low income			X			X
People in particular age groups			X			X
People in particular faith groups				X		
People who are married or in a civil partnership				X		
People who are undergoing gender reassignment				X		
Other significant groups, for example: Armed Forces Community, care experienced young people, carers, parents. Please specify: Carers			X			X

3. Explanation of customer impact

The impact on people using the service will be a change of care provider, should the project achieve the intended outcomes, but experience to date is that the

intention to move packages has delivered the same bargaining position and this has been limited to date. However, the Council will continue to provide care and support to meet the person's assessed care needs and there will be no change to care allocated unless it is deemed the person no longer requires the level of care they have been receiving.

It is hard to say for definite what the impact or perceived impact will be on an individual basis. Some people may be unhappy with their current care provider and be happy to change. Some people may be happy and not want to change. We recognise that for these people, there will be an impact. We are satisfied, through contract monitoring and effective partnerships, that quality of care provided by our strategic care providers means that there will not be a detrimental impact to the quality of the care received by people should they transfer. The overall impact will benefit future people from improved capacity and better pay and conditions of workers.

Consideration will be given on a case-by-case basis to people for whom the Department would consider a change to be detrimental to their health.

There could be challenge on this decision under the Choice and Control element of Personalisation, but fundamentally we will be offering an improved provider offer, as a strategic provider who will have demonstrated through the tender process better quality and have a closer scrutiny of their activity.

Please describe how you will communicate these changes to those impacted.

Communication with providers is extensive and ongoing, any changes with people's care is by a case-by-case communication to reflect the variable nature of any changes. We have had very limited need to move people's care and not received concerns to date.

4. Staff equality impact summary

Are there any staffing implications for this proposal?	Yes	No
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Explanation of staff impact

If yes, please describe the nature of the impact, including how many posts could be affected, please state whether they are vacant, or filled permanently or temporarily.

<<Text here>>

5. Cumulative equality impacts

Is this project linked to or likely to have an impact on any other service areas?

There may be an impact on increased referrals into adult social services operational teams.

6. Action Plan

Are there any further actions that should be taken because of this Equality Impact Assessment?

This is a continuing process previous action below.

Issue Identified	Planned Action	Lead Officer	Time for review
Concerns raised around the messaging given to people and providers	Meetings held with providers. Letters provided to social work teams and people drawing on care and support/families as required	Teresa Stanley	January 2026

7. Review and Sign Off

Service Manager Review

Insert any service manager comments here.

Approved.

Is a further detailed equality impact assessment needed? Yes **No**

Please note that if this assessment indicates a potential 'medium' or 'high' impact on any protected or significant group a further, more detailed assessment will be required.

If 'yes', when will the further assessment be completed? N/A

Service Manager: Gerald Hunt, Assistant Director
Commissioning, Partnerships and Housing

Date: 28 November 2025