# Equality Impact Assessment Ref. Number Start date 19/05/2023

#### Part A

## **Initial Impact Assessment**

**Proposal name** 

Transport Extension of the Dynamic Purchasing Scheme (DPS) Transport Contract

### Brief aim(s) of the proposal and the outcome(s) you want to achieve

The aim of this to extend the transport DPS Transport Contract.

The proposal is to extend the current Transport Dynamic Purchasing System (DPS) contract for additional 5 years.

A DPS is different from a traditional framework contract as additional Contractors can join the contract during its lifetime. This means that there is constant market competition which supports the Council to deliver the best value possible.

The DPS is a contract with private taxi and minibus contractors. Once a contractor has passed the quality threshold, they are allowed to tender prices for particular routes. Every route is offered to all of the contractors on the DPS framework, who then submit a price. The best price wins the contract for that route.

The contract makes up 50% of the Council's statutory Special Educational Needs and Disabilities (SEND) Home to School Transport service provision, supporting around 1,120 young people. The other 50% of the service is covered by the councils own in house Transport Service.

Proposal type ○ Budget	O non-Budget	If Budget, entered on Q Tier? O Yes	○ No
		Q Tier reference	
Year of proposa	l (s)		
0 21/22 0 22	2/23 ● 23/24 ● 3	24/25 ● other	

	O	$21/22 \mid \bigcirc 22/23 \mid \bullet 23/24 \mid \bullet 24/25 \mid \bullet \text{ other}$
	Dad	rision Type
ı	Dec	cision Type
	0	Committee (select below)
	0	Adult Health and Social Care Policy Committee
	0	Communities, Parks and Leisure Policy Committee
	0	Economic Development and Skills Policy Committee
	0	Education, Children and Families Policy Committee
	0	Housing Policy Committee
	0	Strategy and Resources Policy Committee
	0	Transport, Regeneration and Climate Policy Committee
	0	Waste and Street Scene Policy Committee
	0	Regulatory Committees (e.g. Licensing Committee)
	•	Other Policy Committee or sub-Committee
	0	Local Area Committees
	0	Leader
	0	Executive Director

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Officer Decisions (Non-Key)		
O Council (e.g. Budget and Housing Revenue Account)		
Lead Committee Member		
Lead Director for Proposal	Tom Smith	
Person filling in this EIA form	John Hudson	
<b>Equality Lead Officer</b>	Simon Ebbins	
Lead Equality Objective		
O Understanding O Workforce Communities Diversity	● Leading the city in celebrating & and improve life promoting inclusion □ Break the cycle and improve life chances	
Lead Portfolio Neighbourhood  Is the EIA joint with another or  ○ Yes    No	○ Yes • No	
Consultation		
Is consultation required?  ● Yes ○ No		
If consultation is not require	d please state why	
Are Staff who may be affecte  ● Yes ○ No	ed by these proposals aware of them?	
Are Customers who may be a  ○ Yes    No	affected by these proposals aware of them?	
If you have said no to either	please say why	
There will be no impact on the cust	tomer.	

# **Initial Impact**

Under the <u>Public Sector Equality Duty</u> we have to pay due regard to the need to:

- eliminate discrimination, harassment and victimisation
- advance equality of opportunity
- foster good relations

For a range of people who share protected characteristics, more information is available on the <u>Council website</u> including the <u>Community Knowledge Profiles</u>.

## **Identify Impacts**

#### Identify which characteristic the proposal has an impact on tick all that apply

O Health	O Transgender
○ Age	O Carers
<ul><li>Disability</li></ul>	<ul> <li>Voluntary/Community &amp; Faith Sectors</li> </ul>
<ul> <li>Pregnancy/Maternity</li> </ul>	Partners
O Race	O Cohesion
O Religion/Belief	Poverty & Financial Inclusion
O Sex	O Armed Forces
<ul> <li>Sexual Orientation</li> </ul>	O Other

<b>Cumulative Impact</b>		
Does the proposal hav  ● Yes ● No	e a cumulative impact?	
• res • iv	0	
<ul><li>Year on Year</li></ul>	O Across a Community of Identity/Interest	
O Geographical Area	O Other	
If yes, details of impact	that is amongood is for a minimum of 2 years to	n na navima u ma
	that is proposed is for a minimum of 3 years to a essment has to take this into consideration	a maximum
	assiment has to take this lines consideration	
Does the proposal hav  ○ Yes   • No	e a geographical impact across Sheffield?	
O res • N	0	
If Yes, details of geograp	hical impact across Sheffield	
<b>Local Area Committee</b>	Area(s) impacted	
○ All ○ Specific		
If Specific, name of Local	l Committee Area(s) impacted	

#### **Initial Impact Overview**

Based on the information about the proposal what will the overall equality impact?

The DPS contract is supportive of local small and medium enterprises and 100% of the contract spend is distributed to contractors in the Sheffield and South Yorkshire region. This means that local Taxi / Minibus drivers and Passenger Assistants benefit from the contract spend and the local transport economy is supported.

The contract is open to everyone and provides opportunities for all. The spend on the contract goes to local businesses who in turn employ local people.

The contract enables young people with SEND to attend their education. The nature of the contract also allows it to be used for special events or short-term requirements such as Covid-19 vaccine transportation. The contract is therefore inclusive and flexible, providing transport that meets people's needs and enabling them to attend essential services and travel to life enhancing provision.

**Is a Full impact Assessment required at this stage?** O Yes

No

If the impact is more than minor, in that it will impact on a particular protected characteristic you must complete a full impact assessment below.

Initial Impact Sign Off			
EIAs must been signe	_	signed off by an Equality le	ead Officer. Has this
• Yes	O No		
Date agreed	DD/MM/YYYY	Name of EIA lead officer	

# Part B

Health

# **Full Impact Assessment**

			impact on health and well-being minants of health)?
O Yes	O No	if Yes, comple	te section below
<b>Staff</b> O Yes	O No	<b>Customers</b> O Yes	○ No
Details of	fimpact		
-		n Impact Asses	sment being completed
O Yes	O No	act accessment	as a supporting document below.
	·		
Public He	ealth Leads ha	as signed off th	e health impact(s) of this EIA
O Yes O	No		
Name of Lead Offi			
Age			
			_
Impact o		Imp	act on Customers es O No
Details of	fimpact		

Disability	
Impact on Staff  O Yes  O No  Details of impact	Impact on Customers  ○ Yes ○ No
Pregnancy/Maternity	
Pregnancy/ Materinty	
Impact on Staff O Yes O No	
Details of impact	
Dage	
Race  Impact on Staff ○ Yes ○ No  Details of impact	Impact on Customers  ○ Yes ○ No
Religion/Belief	
Impact on Staff ○ Yes ○ No	Impact on Customers  ○ Yes ○ No
Details of impact	

Sex	
Impact on Staff	<b>Impaြာဥပော့ရောကers</b> ္ Yes ် No
O Yes O No	O Yes ONo

Details of impact		
<b>Sexual Orientation</b>		
Impact on Staff  O Yes  O No	<b>Impact on Customers</b> ○ Yes ○ No	
Details of impact		
Gender Reassignm	ent (Transgender)	
Impact on Staff  O Yes  O No		
Details of impact	O res O NO	
Details of impact		
_		
Carers		
Impact on Staff O Yes O No	<b>Impact on Customers</b> ○ Yes ○ No	
Details of impact		

Voluntary, Community & Faith sectors		
Impact on Staff O Yes O No		
Details of impact		
Partners		
Impact on Staff  O Yes  O No	Impact on Customers  ○ Yes ○ No	
	O res O No	
Details of impact		
Cohesion		
Staff O Yes O No	Customers O Yes O No	
Details of impact		
Poverty & Financial 1	Inclusion	
Impact on Staff  O Yes  O No	Impact on Customers  O Yes  O No	
Please explain the impa		

Armed Forces	
Impact on Staff O Yes O No	<b>Impact on Customers</b> ○ Yes ○ No
Details of impact	
Other	
Please specify	
Impact on Staff  O Yes  O No	
Details of impact	
Action Plan and S	upporting Evidence
What actions do you ne	eed to take following this EIA?
what evidence have yo	u used to support the info in the EIA?
Detail any changes	made as a result of the EIA

Following mitigation is there still significant risk of impact on a protected

○ No

**characteristic.** O Yes

If yes, the EIA will need corporate escalation? Please explain below	
Sign Off	
EIAs must be agreed and signed off by an Equality lead Officer. Has this been signed off?	
O Yes C	) No
Date agreed	Name of EIA lead officer.
<b>Review Date</b>	DD/MM/YYYY