

# Equality Impact Assessment (EqIA)

For advice on this document please contact Clare Muir on 72119 or email [Clare.Muir@reading.gov.uk](mailto:Clare.Muir@reading.gov.uk).

Please contact the Project Management Office at [pmo@reading.gov.uk](mailto:pmo@reading.gov.uk) for advice and/or support to complete this form from a project perspective.

Name of proposal/activity/policy to be assessed:  
Commissioning of Drug and Alcohol Treatment and Recovery Services

Directorate: DCASC  
Service: Public Health

Name: Sally Andersen  
Job Title: Senior Wellbeing Commissioning Manager for Drugs & Alcohol  
Date of assessment: 21 August 2025

## Version History

Version	Reason	Author	Date	Approved By
V1	Policy Report	Sally Andersen	21/8/25	Martin White

## Scope your proposal

- What is the aim of your policy or new service/what changes are you proposing?

To commission a comprehensive, accessible, and inclusive drug and alcohol treatment and recovery service that meets the needs of diverse populations across the borough, including prevention, harm reduction, structured treatment, and aftercare.

It has been 7 years since the last commissioning exercise was carried out and therefore, a need to establish best value for money, innovation and compliance with the national and local needs and policy/strategy for drug and alcohol treatment.

- Who will benefit from this proposal and how?

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Service users affected by drugs and/ or alcohol, their families, and the wider community will benefit through improved health outcomes, reduced harm, and enhanced recovery support.

The service will also support vulnerable groups including those with co-occurring mental health issues, housing instability, or involvement with the criminal justice system.

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- What outcomes does the change aim to achieve and for whom?
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Improved physical and mental health, reduced substance-related harm, increased recovery rates, reduced reoffending, and better social reintegration.

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- Who are the main stakeholders and what do they want?
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Service users, families/carers, local communities, voluntary sector partners, NHS, police, housing services, and social care.

Drug and alcohol service users need quick, easy access to personalised treatment that addresses more than just medication, including psychological support. They value continuity with keyworkers, which a long-term provider can ensure, creating a seamless, recovery-focused, holistic service.

Key stakeholders—including probation, police, social services, housing, public health, mental health, and voluntary agencies want accessible, effective, and culturally competent services that promote recovery and reduce harm. They will collaborate to shape the service specification and monitor performance. They seek high-quality, accessible treatment that reduces risks, improves successful treatment completion, supports reintegration, and decreases antisocial behaviour and criminality among clients.

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## Assess whether an EqlA is Relevant

How does your proposal relate to eliminating discrimination; advancing equality of opportunity; promoting good community relations?

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- Do you have evidence or reason to believe that some groups may be affected differently than others

Yes. The service aims to reduce health inequalities and ensure equitable access to treatment for all groups. Evidence suggests that drug and alcohol use disproportionately affects certain groups, including:

People with mental health conditions

Ethnic minorities  
LGBTQ+ individuals  
People experiencing homelessness  
Veterans

- Is there already public concern about potentially discriminatory practices/impact or could there be?

Yes. National reports and local feedback highlight concerns about access barriers, stigma, and cultural competence in treatment services.

If the answer is **Yes** to any of the above, you need to do an Equality Impact Assessment.

If **No** you **MUST** complete this statement.

**An Equality Impact Assessment is not relevant because:**

21/08/2025

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Completing Officer  
Signed by: Andersen, Sally

14/10/2025

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Lead Officer  
Signed by: S-1-12-1-3282157736-1128520634-171153297-347932121/0d37965-56eb-44bd-8dbf-ae464ddc94d8/

## Assess the Impact of the Proposal

Your assessment must include:

- **Consultation**
- **Collection and Assessment of Data**
- **Judgement about whether the impact is negative or positive**

Think about who does and doesn't use the service? Is the take up representative of the community? What do different minority groups think? (You might think your policy, project or service is accessible and addressing the needs of these groups,

but asking them might give you a totally different view). Does it really meet their varied needs? Are some groups less likely to get a good service?

How do your proposals relate to other services - will your proposals have knock on effects on other services elsewhere? Are there proposals being made for other services that relate to yours and could lead to a cumulative impact?

**Example:** A local authority takes separate decisions to limit the eligibility criteria for community care services; increase charges for respite services; scale back its accessible housing programme; and cut concessionary travel.

Each separate decision may have a significant effect on the lives of disabled residents, and the cumulative impact of these decisions may be considerable.

This combined impact would not be apparent if decisions are considered in isolation.

### Consultation

How have you consulted with or do you plan to consult with relevant groups and experts. If you haven't already completed a Consultation form do it now. The checklist helps you make sure you follow good consultation practice.

[Consultation manager form - Reading Borough Council Dash](#)

Relevant groups/experts	How were/will the views of these groups be obtained	Date when contacted
Service Users	Consultation and focus groups undertaken in 2025 to gather experiences of current treatment services.	Jan - April 2025
	Consultation with those in recovery to help shape new specification of services.	Ongoing
	Ongoing consultation is required as part of the new contract	Ongoing

Stakeholders	The specification will reflect partner agency needs, with agencies invited to join the evaluation panel. They will provide input into service planning and meet regularly throughout the process.	Sept- Nov 2025  Ongoing consultation is required as part of the new contract
Current provider	6 months' notice will need to be served to end current contract in line with terms.	March 2026
Staff employed by current provider	TUPE consultation will take place as part of the procurement process	2025/2026 onwards
Local Communities	The new provider will be required to share treatment stories and engage with the community to promote treatment and recovery services	Ongoing

## Collect and Assess your Data

Using information from Census, residents survey data, service monitoring data, satisfaction or complaints, feedback, consultation, research, your knowledge and the knowledge of people in your team, staff groups etc. describe how the proposal could impact on each group. Include both positive and negative impacts.

(Please delete relevant ticks)

- Describe how this proposal could impact on racial groups May face language barriers, cultural stigma, and underrepresentation.
- Is there a negative impact? Yes

May face language barriers, cultural stigma, and underrepresentation

The new service must provide inclusive treatment for all racial groups, addressing cultural differences that affect access. It will form specific groups to reach hard-to-access populations and monitor referrals and ethnicity quarterly. Multilingual leaflets and translation services are required to ensure fair access.

- Describe how this proposal could impact on Sex and Gender identity (include pregnancy and maternity, marriage, gender re-assignment) Women may face childcare barriers; trans individuals may experience discrimination.
- Is there a negative impact? Yes

Women may face childcare barriers; trans individuals may experience discrimination.

The provider must support female-only groups and refer to female-only services. They will also collaborate with Children's services and primary/ secondary care to assist pregnant and new mothers.

- Describe how this proposal could impact on Disability People with learning disabilities or mental health conditions may struggle with access and engagement.
- Is there a negative impact? Yes

People with learning disabilities or mental health conditions may struggle with access and engagement.

RBC will lease 4 Waylen Street with disability access to the provider, who must collect disability data. The contract includes language, literacy, and interpreter support. Service users with mental health issues will be supported by the Community Mental Health Team, with dual diagnosis management required.

- Describe how this proposal could impact on Sexual orientation (cover civil partnership) LGBTQ+ individuals may face stigma or lack of tailored support.
- **Is there a negative impact? Yes**

LGBTQ+ individuals may face stigma or lack of tailored support.

The new provider will be required to deliver services regardless of sexual orientation. The provider will be required to collect and monitor all referrals ensuring fair access to all.

- Describe how this proposal could impact on age Young people may need age-specific interventions; older adults may be overlooked.
- **Is there a negative impact? Yes**

The provider will be required to deliver services to anyone aged 18+. There is a separate young people's specialist treatment service provided in Reading.

The new Provider will be required to link and work with the Young People's drug and alcohol service regarding any transitions to the adult service.

Older adults may require tailored support.

- Describe how this proposal could impact on Religious belief.
- **Is there a negative impact? Yes**

Faith-based stigma may affect engagement; services must be culturally sensitive.

The provider will ensure fair access to services for all religious beliefs and protect all individuals from discrimination, harassment, or victimisation, including those with protected characteristics.

- Describe how this proposal could impact on the Armed Forces community (including reservists and veterans and their families)
  - **Is there a negative impact?** Yes
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Veterans may have unique trauma-related needs.

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- Describe how this proposal could impact on care experienced young people and adults.
- **Is there a negative impact?** Yes

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Higher risk of drug and/or alcohol use; need trauma-informed approaches.

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## Make a Decision

If the impact is negative then you must consider whether you can legally justify it. If not you must set out how you will reduce or eliminate the impact. If you are not sure what the impact will be you **MUST** assume that there could be a negative impact. You may have to do further consultation or test out your proposal and monitor the impact before full implementation.

(Delete numbers below which don't apply)

1. **No negative impact identified - Go to sign off**
2. **Negative impact identified but there is a justifiable reason**

While some negative impacts have been identified—such as potential barriers for racial minorities, LGBTQ+ individuals, people with disabilities, and care-experienced or Armed Forces communities—these are justifiable due to the nature of the service, which addresses complex and sensitive issues like drug and/or alcohol use, trauma, and social exclusion.

3. **Negative impact identified or uncertain**

What action will you take to eliminate or reduce the impact? Set out your actions and timescale -

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Public Health will monitor and tailor services quarterly to prevent negative effects. The procurement will require providers to show how they address issues like translation access, staff training in equity and diversity, tailored outreach, and promotion for all groups, including ethnically diverse clients. Outreach and service delivery must consider age, gender, and confidentiality to reduce barriers. Data collection on service users is mandatory under contract terms.

The contract Provider is required to work proactively to ensure that any negative impact is limited by:

- Co-produce services with diverse communities
  - Provide staff training on cultural competence and trauma-informed care
  - Ensure translation and interpretation services
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- Develop targeted outreach for underrepresented groups
  - Monitor access and outcomes by protected characteristics
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- How will you monitor for adverse impact in the future? -

The procurement process will evaluate equality during the evaluation stage.

Public Health will work closely with the winning provider during all contract performance meetings to ensure equity and access to treatment services at all times and work to minimise risk.

Quarterly equality monitoring reports

Feedback from service users and stakeholders

Annual service reviews with equality lens

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Completing Officer

Signed by: Andersen, Sally

Lead Officer

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