

Equality Impact Analysis to enable informed decisions

The purpose of this document is to:-

- I. help decision makers fulfil their duties under the Equality Act 2010 and
- II. for you to evidence the positive and adverse impacts of the proposed change on people with protected characteristics and ways to mitigate or eliminate any adverse impacts.

Using this form

This form must be updated and reviewed as your evidence on a proposal for a project/service change/policy/commissioning of a service or decommissioning of a service evolves taking into account any consultation feedback, significant changes to the proposals and data to support impacts of proposed changes. The key findings of the most up to date version of the Equality Impact Analysis must be explained in the report to the decision maker and the Equality Impact Analysis must be attached to the decision making report.

****Please make sure you read the information below so that you understand what is required under the Equality Act 2010****

Equality Act 2010

The Equality Act 2010 applies to both our workforce and our customers. Under the Equality Act 2010, decision makers are under a personal duty, to have due (that is proportionate) regard to the need to protect and promote the interests of persons with protected characteristics.

Protected characteristics

The protected characteristics under the Act are: age; disability; gender reassignment; marriage and civil partnership; pregnancy and maternity; race; religion or belief; sex; sexual orientation.

Section 149 of the Equality Act 2010

Section 149 requires a public authority to have due regard to the need to:

- Eliminate discrimination, harassment, victimisation, and any other conduct that is prohibited by/or under the Act
- Advance equality of opportunity between persons who share relevant protected characteristics and persons who do not share those characteristics
- Foster good relations between persons who share a relevant protected characteristic and persons who do not share it.

The purpose of Section 149 is to get decision makers to consider the impact their decisions may or will have on those with protected characteristics and by evidencing the impacts on people with protected characteristics decision makers should be able to demonstrate 'due regard'.

Decision makers duty under the Act

Having had careful regard to the Equality Impact Analysis, and also the consultation responses, decision makers are under a personal duty to have due regard to the need to protect and promote the interests of persons with protected characteristics (see above) and to:-

- (i) consider and analyse how the decision is likely to affect those with protected characteristics, in practical terms,
- (ii) remove any unlawful discrimination, harassment, victimisation and other prohibited conduct,
- (iii) consider whether practical steps should be taken to mitigate or avoid any adverse consequences that the decision is likely to have, for persons with protected characteristics and, indeed, to consider whether the decision should not be taken at all, in the interests of persons with protected characteristics,
- (iv) consider whether steps should be taken to advance equality, foster good relations and generally promote the interests of persons with protected characteristics, either by varying the recommended decision or by taking some other decision.

Conducting an Impact Analysis

The Equality Impact Analysis is a process to identify the impact or likely impact a project, proposed service change, commissioning, decommissioning or policy will have on people with protected characteristics listed above. It should be considered at the beginning of the decision making process.

The Lead Officer responsibility

This is the person writing the report for the decision maker. It is the responsibility of the Lead Officer to make sure that the Equality Impact Analysis is robust and proportionate to the decision being taken.

Summary of findings

You must provide a clear and concise summary of the key findings of this Equality Impact Analysis in the decision making report and attach this Equality Impact Analysis to the report.

Impact – definition

An impact is an intentional or unintentional lasting consequence or significant change to people's lives brought about by an action or series of actions.

How much detail to include?

The Equality Impact Analysis should be proportionate to the impact of proposed change. In deciding this asking simple questions “Who might be affected by this decision?” “Which protected characteristics might be affected?” and “How might they be affected?” will help you consider the extent to which you already have evidence, information and data, and where there are gaps that you will need to explore. Ensure the source and date of any existing data is referenced.

You must consider both obvious and any less obvious impacts. Engaging with people with the protected characteristics will help you to identify less obvious impacts as these groups share their perspectives with you.

A given proposal may have a positive impact on one or more protected characteristics and have an adverse impact on others. You must capture these differences in this form to help decision makers to arrive at a view as to where the balance of advantage or disadvantage lies. If an adverse impact is unavoidable then it must be clearly justified and recorded as such, with an explanation as to why no steps can be taken to avoid the impact. Consequences must be included.

Proposals for more than one option If more than one option is being proposed you must ensure that the Equality Impact Analysis covers all options. Depending on the circumstances, it may be more appropriate to complete an Equality Impact Analysis for each option.

The information you provide in this form must be sufficient to allow the decision maker to fulfil their role as above. You must include the latest version of the Equality Impact Analysis with the report to the decision maker. Please be aware that the information in this form must be able to stand up to legal challenge.

Background Information

Title of the policy / project / service being considered	Lincolnshire Community Equipment Services	Person / people completing analysis	Marie Kaempfe-Rice
Service Area	Public Health	Lead Officer	Marie Kaempfe-Rice
Who is the decision maker?	Derek Ward	How was the Equality Impact Analysis undertaken?	Desktop
Date of meeting when decision will be made	04/05/2022	Version control	V1
Is this proposed change to an existing policy/service/project or is it new?	Existing policy/service/project	LCC directly delivered, commissioned, re-commissioned or de-commissioned?	Re-commissioned
Describe the proposed change	<p>The Lincolnshire Community Equipment Services (LCES) is a loan service which is required to help meet the Health and Social Care needs of people of all ages, including children, who have long term conditions and disabilities. It is a jointly commissioned service between the Council and Lincolnshire Clinical Commissioning Group (CCG) with a section 75 agreement and Partnership Board underpinning the joint work. The community equipment is supplied, maintained, collected, recycled and stored by the Service Provider, Nottingham Rehab Limited (trading as NRS Healthcare).</p> <p>In terms of the Councils' statutory obligations, the Care Act 2014 places a general duty on the Local Authority to provide, arrange or otherwise identify services, facilities and resources to prevent, delay or reduce the needs of adults for care and support in the local area and equipment can come under this. When provided as part of preventative services under the Act, all equipment must be free of charge to the end user/resident.</p> <p>The current contract has been in place since 1st April 2016. The initial five years of the contract ended on 31st March 2021. The</p>		

Council and Partnership Board subsequently agreed to a further two year extension of the service up until a maximum of 31st March 2023.

The Lincolnshire Community Equipment Services, including Telecare, has undergone a comprehensive review. As a result of this, there are a number of changes to the current arrangements, proposed as part of the new service, due to commence 1st April 2023. The key areas of change are highlighted below:

- 1) Scope - A widening scope of LCES, to include stairlifts and potentially other equipment types ie: modular ramps, these are currently managed through the Disabled Facilities Grants (DFG) via the District Authorities. There is also the inclusion of the Wheelchair Service proposed this is currently commissioned by the CCG.
- 2) Active Recall Team (ART) - Commissioner and Provider engagement undertaken throughout the review highlighted the potential benefits of an Active Recall Team. This team focuses on end of loan reviews and the collection of equipment. If the equipment is collected and recycled it negates the need for the Provider to buy new and reduces the cost of the service.
- 3) Premises – There are currently capacity challenges at the existing premises, the Grantham building on its own, will not be fit for purpose for the new contract, particularly when the widening of service scope is taken into account.
- 4) Commercial Model - There are changes proposed in terms of the existing commercial model.
- 5) True Pooled Budget – At present equipment items are costed to either Health or Social Care. It was acknowledged that equipment should be prescribed on the basis of need, regardless of whether the equipment required is Health or Social Care. Both parties have therefore agreed the principles of a true pooled budget with underspend or overspend being managed on a 50/50 split. The details of how this will be administered are set out within the Schedule 3 the Financial Arrangements of the revised Section 75 Agreement.
- 6) Contract Duration - The LCES Board were comfortable with a longer term contract of 10 years including extensions. This would align with other LCC contracts such as Wellbeing and Health partners also indicated was more common for a contract of this nature and complexity.
- 7) Specification - A high level review of the LCES specification concluded the following:
 - That throughout the pandemic the use of the peripheral stores was heightened. Proposals considered included more peripheral store locations and the option of Service User drop off points.
 - Following a review of the current specification it was determined that the arrangements in terms of the transfer of

ownership liabilities for equipment out in the community and in the warehouse need to be more clearly laid out.

- The LCES Team have already introduced initiatives to reduce the Non-Contract Special (NCS) spend. Throughout the Provider engagement sessions of the review other proposals were discussed that could make better use of the NCS equipment.

- There was significant discussion regarding Service Levels. All of the Project Team members were comfortable with the concept of rationalising these.

- The annual replacement of equipment was reflected upon. This could apply to bath lifts and hoists, equipment that has a long life span.

- It was acknowledged that there could be significant developments in terms of the LCES IT infrastructure. Aspects such as a Service User portal, Service User empowerment focus will be considered within any new specification.

- A high level review of the KPIs was carried out.

8) Telecare – The LCES Programme Board supported a proposal to de-couple Telecare from LCES. Whilst this is currently part of the LCES contract moving forward it is proposed these services will be procured separately .

Evidencing the impacts

In this section you will explain the difference that proposed changes are likely to make on people with protected characteristics. To help you do this first consider the impacts the proposed changes may have on people without protected characteristics before then considering the impacts the proposed changes may have on people with protected characteristics.

You must evidence here who will benefit and how they will benefit. If there are no benefits that you can identify please state 'No perceived benefit' under the relevant protected characteristic. You can add sub categories under the protected characteristics to make clear the impacts. For example under Age you may have considered the impact on 0-5 year olds or people aged 65 and over, under Race you may have considered Eastern European migrants, under Sex you may have considered specific impacts on men.

Data to support impacts of proposed changes

When considering the equality impact of a decision it is important to know who the people are that will be affected by any change.

Population data and the Joint Strategic Needs Assessment

The Lincolnshire Research Observatory (LRO) holds a range of population data by the protected characteristics. This can help put a decision into context. Visit the LRO website and its population theme page by following this link: <http://www.research-lincs.org.uk> If you cannot find what you are looking for, or need more information, please contact the LRO team. You will also find information about the Joint Strategic Needs Assessment on the LRO website.

Workforce profiles

You can obtain information by many of the protected characteristics for the Council's workforce and comparisons with the labour market on the [Council's website](#). As of 1st April 2015, managers can obtain workforce profile data by the protected characteristics for their specific areas using Agresso.

Positive impacts

The proposed change may have the following positive impacts on persons with protected characteristics – If no positive impact, please state '*no positive impact*'.

Age	<p>The eligibility for the service includes all ages of adults and children. The assessment process to determine eligibility and community equipment needs and subsequent requisition process shall be carried out by Health and Social Care professionals including but not exclusive of Occupational Therapists, Social Workers, Community Nurses and therapists working in the community.</p> <p>The service allows, particularly older people the opportunity of remaining independent and living in their own homes for longer. Therefore providing choice to the individual, as would not necessarily have to access short- or long-term residential care and more opportunity for reablement as through retaining independence could potentially mean less reliance upon homecare support services. This increase independence could also aid in maintaining the individuals emotional and mental wellbeing.</p>
Disability	<p>The LCES being commissioned is in direct relation to the statutory requirements as set out in various legislation including:</p> <ul style="list-style-type: none">- Adult Social Care – The Care Act 2014 – Regulations 2 and 4 of the Care and Support (Preventing Needs for Care and Support) Regulations 2014 and Regulation 3 of The Care and Support (Charging and Assessment of Resources) which specifies:- Any community care equipment and minor adaptations for the purpose of assisting with nursing or aiding daily living should be provided free of charges, and, for the purposes of these Regulations, an adaptation is minor if the cost of making the adaptation is £1,000 or less- It is also of note that the duty of the local authority to meet a need is subject to the general principle that it is required to offer only the most cost-effective option consistent with human rights and having regard to the person’s well-being. This was established in case law by the McDonald v Kensington and Chelsea Judgement (European Court decision 2014 and UK Supreme court Judgement 2011)- Childrens Social Care - Childrens Act 1989 – contains a duty to safeguard and promote the welfare of children in need. However, this applies across an area rather than to specified individuals- Chronically Sick and Disabled Act 1970 - contains a duty towards an individual child if the Local Authority has accepted that it is necessary to meet the child’s needs. It also contains a list of specification services in relation to this support including practical assistance in a child’s home, assistance for a child in obtaining wireless, TV, library or similar recreational facilities, provision of lectures, games, recreation outside the home, provision for the child for receiving assistance with travelling to or from the home for the purposes of participating in services, provision of adaptations ot help of the child secure greater safety or comfort, provision of meals- NHS – NHS Act 2006 (Section 3) – health care equipment for both adults and children and states that Clinical Commissioning Groups must arrange for the provision of items ‘to such extent as it considers necessary to meet the reasonable requirements’ of the local population it is responsible for. Included in the list of what must be provided are

“such other services or facilities for the prevention of illness, the care of persons suffering from illness and the after-care of persons who have suffered from illness as the group considers”

- NHS Continuing Healthcare (CHC) – if an individual has CHC then it is the NHS that has the responsibility for providing community equipment to people in their own homes. Section 22 of the Care Act 2014 forbids a local authority, under the Care Act, to meet needs by providing a facility or service that the NHS is required to provide. Note: this is different for children where the onus is on Local Authorities unless it involves meeting essential medical needs

In addition to the above, the following legislation is relevant to the delivery of Community Equipment Services and at all times the Provider shall have due regard to any obligations they have under legislation:

- The National Health Service and Community Care Act 1991
- Data Protection Act 1998
- Human Rights Act 1998
- Mental Capacity Act 2005
- The Deprivation of Liberty Amendments to the Mental Capacity Act 2005
- Welfare Reform Act 2012
- The Health and Social Care Act 2012 (ensuring compliance with the Accessible Information Standard 2015)
- The Health and Social Care Act 2008 (including the hygiene code)
- Health and Safety at Work Act 1974
- Control of Substances Hazardous to Health (COSHH) Regulations 2002
- Corporate Manslaughter Act 2007
- The Health and Safety (Offences) Act 2008
- Disability Discrimination Act 1995 (DDA)
- Health and Safety at Work Act, etc. 1974
- Electricity at Work Regulations 1989
- Management of Health and Safety at Work Regulations 1999
- Manual Handling Operations Regulations 1992
- Lifting Operations and Lifting Operations Regulations 1998
- Provision and Use of Work Equipment Regulations 1998
- Care Standards Act 2000 (and Health and Social Care Act 2008)
- NHS and Community Care Act 1990
- Equality Act 2010 (ensuring compliance with ISB1605, Accessible Information)

The service can aid in providing the equipment necessary for people with a disability to remain independent within their own home.

Gender reassignment

There is no specific positive impact relating to gender re assignment.

Marriage and civil partnership	There is no specific positive impact relating to marriage or civil partnership
Pregnancy and maternity	There is no specific positive impact relating to pregnancy and maternity
Race	There is no specific positive impact relating to race.
Religion or belief	There is no specific positive impact relating to religion or belief.
Sex	There is no specific positive impact relating to sex
Sexual orientation	There is no specific positive impact relating to sexual orientation.

If you have identified positive impacts for other groups not specifically covered by the protected characteristics in the Equality Act 2010 you can include them here if it will help the decision maker to make an informed decision.

Not applicable

Adverse/negative impacts

You must evidence how people with protected characteristics will be adversely impacted and any proposed mitigation to reduce or eliminate adverse impacts. An adverse impact causes disadvantage or exclusion. If such an impact is identified please state how, as far as possible, it is justified; eliminated; minimised or counter balanced by other measures.

If there are no adverse impacts that you can identify please state 'No perceived adverse impact' under the relevant protected characteristic.

Negative impacts of the proposed change and practical steps to mitigate or avoid any adverse consequences on people with protected characteristics are detailed below. If you have not identified any mitigating action to reduce an adverse impact please state 'No mitigating action identified'.

Age	No perceived adverse impact as recommendation is that integrated model supports both Adults and children.
Disability	No perceived adverse impact as recommendation is that integrated model of delivery supports all eligible clients
Gender reassignment	The service is available regardless of this protected characteristic
Marriage and civil partnership	The service is available regardless of this protected characteristic
Pregnancy and maternity	The service is available regardless of this protected characteristic

Race	The service is available regardless of this protected characteristic
Religion or belief	The service is available regardless of this protected characteristic
Sex	The service is available regardless of this protected characteristic
Sexual orientation	The service is available regardless of this protected characteristic

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If you have identified negative impacts for other groups not specifically covered by the protected characteristics under the Equality Act 2010 you can include them here if it will help the decision maker to make an informed decision.

Not applicable

Stakeholders

Stake holders are people or groups who may be directly affected (primary stakeholders) and indirectly affected (secondary stakeholders)

You must evidence here who you involved in gathering your evidence about benefits, adverse impacts and practical steps to mitigate or avoid any adverse consequences. You must be confident that any engagement was meaningful. The Community engagement team can help you to do this and you can contact them at consultation@lincolnshire.gov.uk

State clearly what (if any) consultation or engagement activity took place by stating who you involved when compiling this EIA under the protected characteristics. Include organisations you invited and organisations who attended, the date(s) they were involved and method of involvement i.e. Equality Impact Analysis workshop/email/telephone conversation/meeting/consultation. State clearly the objectives of the EIA consultation and findings from the EIA consultation under each of the protected characteristics. If you have not covered any of the protected characteristics please state the reasons why they were not consulted/engaged.

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Objective(s) of the EIA consultation/engagement activity

Engagement/ Consultation Position

The proposal is to recommission the LCES through a tender process, therefore while the identity of the Service Provider may change, the nature of the service and its availability will not change significantly. In these circumstances, whilst some level of engagement with people in receipt of the services is appropriate a formal consultation is not required as a matter of law.

Engagement Approach

A review of the service commenced. The review was structured in terms of seven different work streams as set out below. Each of these work streams will have a Project Team consisting of representatives from partner organisations that will consider all aspects of these themes and in turn influence the future of the services.

- Part 1 Service Review - Work Stream 1 - The Development of the Section 75 and Information Sharing Agreement
- Part 1 Service Review - Work Stream 2 - Future Scope and Demand Analysis
- Part 1 Service Review - Work Stream 3 - Review of the LCES Commercial Models
- Part 1 Service Review - Work Stream 4 - Budget and Cost Review including consideration of true pooled budget

- Part 1 Service Review - Work Stream 5 - Service User, Provider and Stakeholder Consultation
- Part 1 Service Review - Work Stream 6 - Specification Review
- Part 1 Service Review - Work Stream 7 - Legal Requirements
- Part 1 Service Review - Work Stream 8 – Telecare Provision
- Part 2 – Options Appraisal arising from Part 1

There are five different stakeholders that were consulted as part of this review as follows:

- 1) Members of the LCES Partnership ie: LCC, CCG, LCHS, LPFT, ULHT, St Barnabas
- 2) Other stakeholder organisations
- 3) Service Users of Community Equipment and Telecare Services
- 4) Providers of Community Equipment and Telecare Services
- 5) Other Commissioners of Community Equipment and Telecare Services

- 1) Members of the LCES Partnership ie: LCC, CCG, LCHS, LPFT, ULHT, St Barnabas

Representatives from each of the partner organisations formed the project teams for each work stream. The partners were therefore continually engaged and consulted with on an on-going basis throughout the review. Further engagement continues throughout the governance process and development of the invitation to tender documentation including the specification of services, pricing schedules and mechanisms and terms and conditions. This area of engagement will also take into account prescriber feedback, via both survey and face to face.

- 2) Other stakeholder organisations ie: Primary Care contacts, Healthwatch

Other stakeholder organisations/networks were approached regarding their thoughts of the service, whether it meets need and any other potential areas of improvement.

- 3) Service Users of LCES ie: All Service Users both Social Care and Health

Service Users were approached regarding their thoughts of the service, whether it meets need and any other potential areas of improvement. Also aspects of the new services identified as part of the review.

This engagement took the form of surveys, face to face, focus groups, specific cohorts of Patients or Service Users. Areas of questioning agreed upon by the partnership as part of the WS5 Stakeholder Engagement Project Team work.

The Service User and Carer feedback confirmed the following:

118 Carers. As a result of the equipment:

- 63% felt safer in their home, 36% not applicable, only 2 people stated didn't
- 65% felt more independent, 31% not applicable, only 3 people stated didn't
- 20% felt more able to go out and about, 79% not applicable, only 2 people stated didn't
- 82% felt equipment made day to day living easier, 14% not applicable, only 4 people stated didn't
- 63% felt equipment had reduced care needs, 31% not applicable, only 8 people stated didn't
- Overall 92% were either very happy (78%) or happy (14%) that the equipment met their need, 5% were neither happy or unhappy and only 4 people were unhappy in this respect

71 Service Users. As a result of the equipment:

- 77% felt safer in their home, 23% not applicable
- 84% felt more independent, 16% not applicable
- 29% felt more able to go out and about, 68% not applicable, only 2 people stated didn't
- 90% felt equipment made day to day living easier, 9% not applicable, only 1 person stated didn't
- 71% felt equipment had reduced care needs, 26% not applicable, only 2 people stated didn't
- Overall 90% were either very happy (69%) or happy (21%) that the equipment met their need, 7% were neither happy or unhappy and only 2 people were unhappy in this respect

Overall conclusion that the equipment is meeting need and delivering individual outcomes.

Delivery Aspects

- 97% either very satisfied (65%) or satisfied (32%) with the ease of arranging delivery. Only one person from 121 not.
- 95% either very satisfied (71%) or satisfied (24%) with the time taken for the equipment to arrive. Only one person from 151 not.
- 100% either very satisfied (75%) or satisfied (25%) with the successful delivery when expected. No people out of 152 were not.
- 99% either very satisfied (74%) or satisfied (25%) that the equipment was in good working order. Only 2 people out of 154 were not.
- 99% either very satisfied (74%) or satisfied (25%) that the equipment was clean. Only one person out of 153 said they were neither, satisfied or unsatisfied.
- 97% either very satisfied (72%) or satisfied (25%) with the quality of installation. Only 3 people out of 104 said they were neither, satisfied or unsatisfied.
- 99% either very satisfied (74%) or satisfied (25%) that communication was timely. Only one person out of 96 said they were neither satisfied or unsatisfied.

Overall conclusion – High levels of satisfaction indicating that the service delivery levels are acceptable and also the elements in the current specification regarding installation, recycling, and decontamination of equipment are being delivered.

Overall Feedback:

- 99% either very satisfied (75%) or satisfied (24%) with the overall service. Only 2 neither satisfied or dissatisfied and 1 dissatisfied out of 189 people.

Overall conclusion – Whilst this is a reflection of the current Provider performance it is also an indication that the current specification is meeting need and fit for purpose.

Engagement regarding aspects of the new service and co-production of the specification will be on-going until May 2022.

4) Providers of LCES

Some soft market testing was undertaken with the main providers of the services including: NRS, Mediequip, Red Cross and Millbrook. Initial one to one sessions gained feedback in regarding to contract duration and scope, commercial arrangement and financial models, contract management arrangements key performance indicators, crisis and risk management / business continuity including future pandemics and Brexit and anything we need to consider as Commissioning Authority. These discussion helped shaped some of the options considered as part of the review. Further engagement was undertaken throughout the re-procurement phase.

5) Other Commissioners of Community Equipment and Telecare Services

Other Local Authority Commissioners of services were contacted. These included: Nottingham City and County Council, Derby City Council, Sheffield City Council and Northamptonshire County Council. Similar areas were discussed as with providers and more information gained in terms other specification of services, added value initiatives and alternate pricing mechanisms. These have also prompted some options for re-commissioning that have been proposed. These will also continue if required and will be expanded to include Norfolk and North Yorkshire from a Telecare perspective as these two authorities have similar geographic characteristics and demographics to that of Lincolnshire.

Who was involved in the EIA consultation/engagement activity? Detail any findings identified by the protected characteristic

Age	See above approach. All ages included
Disability	See above approach.
Gender reassignment	See above approach.
Marriage and civil partnership	See above approach.
Pregnancy and maternity	See above approach.
Race	See above approach.
Religion or belief	See above approach.

Sex	See above approach.
Sexual orientation	See above approach.
Are you confident that everyone who should have been involved in producing this version of the Equality Impact Analysis has been involved in a meaningful way? The purpose is to make sure you have got the perspective of all the protected characteristics.	Yes this included the Project Team Stakeholder Workstream Group and also the CCG Patient Engagement Group
Once the changes have been implemented how will you undertake evaluation of the benefits and how effective the actions to reduce adverse impacts have been?	This can be evidenced through a robust contract management framework captured on a quarterly basis including but not limited to: <ul style="list-style-type: none"> - The reporting of key performance indicators. - Close monitoring of the delivery of the specification and continuous improvement plan. - Extensive wider community and partnership engagement. - The demonstration of value for money. - Case studies demonstrating overall framework outcomes. - The recovery following the pandemic

Further Details

Are you handling personal data?

Yes

If yes, please give details.

The Service Provider will hold personal data regarding individual cases they are dealing with. The relationship is one of Joint Controllers

The Information Assurance Team have been consulted and are in the process of drafting an Information Sharing Agreement

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Actions required	Action	Lead officer	Timescale
Include any actions identified in this analysis for on-going monitoring of impacts.			
Signed off by		Date	Click here to enter a date.