

Western Cheshire Primary Care Trust Equality Impact Assessment Template (Version 3.0)

BACKGROUND

1. The Race Relations (Amendment) Act 2000, Disability Discrimination Act 2005 and the Equality Act 2006 requires the Trust to prioritise and undertake Equality Impact Assessments on those of its existing and proposed **policies and functions (services)** that have been assessed as being **relevant** to the **general duty** of promoting equality. During initial assessments undertaken whilst developing the Primary Care Trust's Single Equality Scheme it was agreed that all policies, procedures and functions (services) would be included in the process.

ABOUT THIS TEMPLATE

2. This template guides you through the process for ensuring that the above duty is met. All completed templates must be forwarded to Andy Meadows, Head of Corporate Services and Business based at the 1829 Building. You should also retain a copy for your records which will be made available upon request, to staff, members of the public, statutory and / or inspectorate bodies.
3. You should not attempt to complete this template until you have attended training sessions on Equality & Diversity and Impact Assessments.

DEFINITIONS

4. In terms of the legislation, **relevant** means 'having implications for, or affecting, the promotion of equality'. The Primary Care Trust has broadened this to include all areas of anti-discrimination law, such that relevance refers to 'having negative implications for, or affecting people from any **equality target group** regardless of their race, ethnicity, cultural background, religion, belief, disability, gender, sexual orientation, age, employment or HIV status, or responsibilities as a carer.
5. The term **function** is intended to encompass the full range of the Primary Care Trust's duties and powers, which includes clinical and corporate services.

6. The term **policy** means the full range of formal and informal decisions made in carrying out a function or delivering a particular service. Policies may take the form of a clear written statement, or may be implicit in management decisions or “custom” and “practice”. Policies may also take the form of a strategy or action plan.
7. The terms:
 - a) **procedure** means any process used to deliver a function or to apply a policy.
 - b) **facility** refers to any accommodation where staff are based or services are provided from.
8. A policy, procedure, function (service) or facility is relevant if it has implications for, or in any way affects the elimination of unlawful discrimination or the promotion of equality. In practice any policy, procedure or function (service) that has a direct or indirect impact on the public may be potentially relevant. This may include functions, policies, procedures or facilities relating to service delivery, policy formulation, employment and patient/public involvement. Some functions (services) may be less relevant but need to be included in the assessment process to provide an audit trail showing that they have been considered and identifying any evidence that supported the decision. Consideration must also be given to all policies, procedures or functions (services) carried out wholly or partly through a contractor and to those that are carried out in partnership

EVIDENCE

9. It is important that there is clear evidence for the decision on whether the policy, procedure, function (service) or facility has a high, medium or low impact. This may be through:
 - a) Knowledge of e.g. the culture of a particular ethnic group
 - b) Complaints
 - c) Surveys
 - d) Performance data
 - e) Inspection / audit / assessment
 - f) Anecdotal evidence

KEY POINTS FOR CONSIDERATION

10. Some key points to consider when assessing the possible impact of functions/ policies and procedures
 - a) Could the policy or the way the function (service) is carried out have an adverse impact on people from equality target groups? In other words, does it put some diverse groups at a disadvantage?
 - b) Could the policy or the way the function (service) is carried out have an adverse impact on relations between different groups?
 - c) Is the adverse impact, if any, unavoidable? Could it be considered to be unlawful discrimination? Can it be justified by the aims and importance of the policy or function (service)? Are there other ways in which the Primary Care Trust's aims can be achieved without causing adverse impact on some diverse groups?
 - d) Could taking particular measures reduce the adverse impact?
 - e) Is further research or consultation necessary? Would this research or consultation be proportionate to the importance of the policy or function (service)? Is it likely to lead to a different outcome?

11. **Race and Ethnicity**
 - a) The provision of an interpreter for people whose first language is not English,
 - b) Written communication and use of language particularly jargon or colloquialisms etc,
 - c) Respect in terms of religion, belief and culture.

12. **Age**
 - a) Any discriminatory employment practices regardless of age (young or old) including recruitment, personal development, promotion, entitlements and retention,
 - b) Services should be provided, regardless of age (young or old), on the basis of clinical need alone.

13. **Religion, Belief and Culture**
 - a) Prayer facilities for service users and staff,
 - b) Dietary requirements,
 - c) Gender of staff when caring for females,
 - d) Respect for requests from staff to have time off for religious festivals and functions,
 - e) Respect for dress codes.

14. **Disability**

- a) Reasonable steps that can be taken to accommodate the disabled persons requirements including,
- physical access,
 - format of information,
 - time of interview or consultation event,
 - personal assistance,
 - interpreter,
 - induction loop system,
 - independent living equipment,
 - content of interview or course, etc.
- b) Steps to make reasonable adjustments to service delivery and employment practices to ensure “accessible to all”.

15. **Gender**

- a) Equal access to recruitment, personal development, promotion and retention,
- b) Childcare arrangements that do not exclude a candidate from employment and the need for flexible working,
- c) The provision of single sex facilities, toilets, wards, etc,
- d) Equality of opportunity in relation to health care for individuals irrespective of whether or not they are single divorced, separated, living together or married.

16. **Sexual orientation**

- a) Recognition and respect of individuals sexuality,
- b) Recognition of same sex relationships in respect to consent and inheritance,
- c) The maintenance of confidentiality about an individual’s sexuality.

17. **Carers**

- a) Reasonable steps that can be taken to accommodate carers requirements, such as,
- time of meetings or interviews,
 - flexible working,
 - carers’ assessments.

Please Note - Section 15 should only be completed if you are assessing a function (service).

**Western Cheshire Primary Care Trust
Equality Impact Assessment Template (Version 3)**

1. Where you work: <i>(Select One)</i>	<input checked="" type="checkbox"/> PCT – Commissioning Arm	<input type="checkbox"/> Provider Services Unit		
	<input type="checkbox"/> Cheshire Health Agency	<input type="checkbox"/> North West Specialist Commissioning Team		
	<input type="checkbox"/> Cheshire HR Service	<input type="checkbox"/> Cheshire ICT Service		
2. Department:	Integrated Strategic Commissioning Team			
3. Details of Person Completing this Form:	Name:	Cathy Davis		
	Job Title:	Head of Mental Health and Learning Disabilities		
	Email:	Cathy.Davis@wcheshirepct.nhs.uk		
	Tel No:	01244 650304		
4. Assessment Start Date:	22 January 2010			
5. Title of policy / function / service / project etc being assessed:	Dementia Strategy			
6. Is the policy / function / service / project etc <i>(Select One)</i>	<input type="checkbox"/> Existing and being reviewed, or			
	<input checked="" type="checkbox"/> a NEW development			
7. What is the main purpose (aims / objectives) of this policy / function / service / project etc?				
The main purpose of this strategy is to respond to the national guidance and set out a clear vision for the transformation of dementia services in NHS Western Cheshire and Cheshire West and Chester Council. The document outlines how the commissioning arm intends to develop high quality service delivery via partnership working across Health, Social Care and Third Sector.				
8. Will patients, carers, the public or staff be affected by this policy /	Patients	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> Don't Know
	Carers	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> Don't Know

function / service / project etc? <i>(Indicate for each category)</i>	Public	<input type="checkbox"/> x Yes	<input type="checkbox"/> No	<input type="checkbox"/> Don't Know
	Staff	<input type="checkbox"/> x Yes	<input type="checkbox"/> No	<input type="checkbox"/> Don't Know
	If staff, how many individuals are likely to be affected?			
9. Have patients, carers, the public or staff been involved in the development of the policy / function / service / project etc?		<input checked="" type="checkbox"/> x Yes	<input type="checkbox"/> No	
<i>If YES, who have you involved and how have they been involved?</i>				
<p>A baseline report was commissioned from the Alzheimer's Society and this included postal questionnaires to professionals and carers.</p> <p>The Care Service Efficiency Delivery methodology recommends 20% engagement of service users and carers in the process. Five one day workshops were held between September and December 2009 and each was attended by 30-40 key stakeholders including health, social care, third sector agencies, representative carers and a service user. In between each workshop facilitators and representatives from Alzheimer's Society consulted with established carer's groups.</p>				
10. In relation to <u>Staff</u> do you have any data on the number of people from Equality Target Groups that will be affected by this policy / function / service / project being assessed?				
Data of the Primary Care Trust's Workforce, if available, is located on the Equality and Diversity section of both the Primary Care Trust's Staff Extranet and Public website (subject to declaration by members of staff)				
a) People from different racial & ethnic groups	<input checked="" type="checkbox"/> x Yes	<input type="checkbox"/> No	Details:	Primary Care Trust Workforce Data (available on Equality & Diversity section of the Trust's Extranet) Cheshire West and Chester Council(CWAC) maintain workforce data records.
b) People of different gender (male, female, transgender)	<input checked="" type="checkbox"/> x Yes	<input type="checkbox"/> No	Details:	Primary Care Trust and CWAC hold Workforce Data for male and female staff. No data currently collected on transgender staff
c) People from different religions or beliefs	<input checked="" type="checkbox"/> x Yes	<input type="checkbox"/> No	Details:	Primary Care Trust Workforce data only includes data for recently recruited staff. No data currently on existing staff CWAC does not currently report on this strand (existing data represent amalgamation from previous authorities, which were inconsistent in the approach)

d) Disabled people with: <ul style="list-style-type: none"> ▪ Physical impairments (including wheelchair users) ▪ Sensory impairment ▪ Mental illness ▪ Learning disabilities 	<input type="checkbox"/> Yes	<input type="checkbox"/> No	Details:	Primary Care Trust Workforce data only includes data for recently recruited staff. No data currently on existing staff. CWAC hold similar data.
<input type="checkbox"/> xSome not others				
<input type="checkbox"/> Not Applicable				
e) People of different ages (children up to 18 and adults)	<input type="checkbox"/> x Yes	<input type="checkbox"/> No	Details:	Primary Care Trust and CWAC Workforce data
f) People of various sexual orientation; lesbian, gay, bisexual	<input type="checkbox"/> x Yes	<input type="checkbox"/> No	Details:	Primary Care Trust Workforce data only includes data for recently recruited staff. No data currently on existing staff. CWAC does not currently report on this strand (existing data represent amalgamation from previous authorities, which were inconsistent in the approach)
11. In relation to <u>patients and public</u> do you have any data on the number of people from Equality Target Groups that will be affected by this policy/function/service/project being assessed? Such as Count Me In Census, Service Monitoring, National Census				
a) People from different: <ul style="list-style-type: none"> ▪ Racial & ethnic groups, ▪ Gypsies, travellers ▪ Refugees and asylum seekers 	<input type="checkbox"/> Yes	<input type="checkbox"/> No	Details:	Census Data Data from Office for National Statistics Service returns for inpatients services (not collected for patients treated in the community) Population Profile data extracted from the 'Health Review' and available on the Primary Care Trust's public website and staff Extranet School Census Service equality monitoring data
<input type="checkbox"/> x Some not others				
<input type="checkbox"/> Not Applicable				
b) People of different gender (male, female, transgender)	<input type="checkbox"/> x Yes	<input type="checkbox"/> No	Details:	As 11a above, but no data currently available for transgender patients and staff
c) People from different religions or beliefs	<input type="checkbox"/> x Yes	<input type="checkbox"/> No	Details:	As 11a above

d) Disabled people with: <ul style="list-style-type: none"> ▪ Physical impairments (including wheelchair users) ▪ Sensory impairment ▪ Mental illness ▪ Learning disabilities 	<input type="checkbox"/> x Yes	<input type="checkbox"/> No	Details:	As 11a above, but data not available on impairments
<input type="checkbox"/> Some not others				
<input type="checkbox"/> Not Applicable				
e) People of different ages (children up to 18 and adults)	<input type="checkbox"/> x Yes	<input type="checkbox"/> No	Details:	As 11a above, but no 'service' specific data except where treated as an inpatient
f) People of various sexual orientation; lesbian, gay, bisexual	<input type="checkbox"/> Yes	<input type="checkbox"/> No	Details:	Not routinely collected as part of the assessment. CWAC uses estimates based on national research carried out by Stonewall (no accurate data available)
g) Carers (Adults & Young Carers)	<input type="checkbox"/> x Yes	<input type="checkbox"/> No	Details:	Census Data Data from Office for National Statistics
12. Are you aware of any consultation or involvement events that been held with individuals or organisations from Equality Target Groups that could have influence on the policy/function/service/project being assessed? (Engagement could include formal events such as face to face meetings, focus groups, questionnaires, documentation, use of website or email)				
a) People from different: <ul style="list-style-type: none"> ▪ Racial & ethnic groups, ▪ Gypsies, travellers ▪ Refugees and asylum seekers 	<input type="checkbox"/> Yes	<input type="checkbox"/> No	Details:	National Dementia Strategy was consulted on prior to publication.
<input type="checkbox"/> Some not others				
<input type="checkbox"/> Not Applicable				
b) People of different gender (male, female, transgender)	<input type="checkbox"/> x Yes	<input type="checkbox"/> No	Details:	See section 9
c) People from different	<input type="checkbox"/> x	<input type="checkbox"/> No	Details:	See section 9

religions or beliefs	Yes			
d) Disabled people with: <ul style="list-style-type: none"> ▪ Physical impairments (inc. g wheelchair users) ▪ Sensory impairment ▪ Mental illness ▪ Learning disabilities 	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Some not others <input type="checkbox"/> Not Applicable		Details:	See section 9
e) People of different ages (children up to 18 and adults)	<input type="checkbox"/> x Yes	<input type="checkbox"/> No	Details:	See section 9
f) People of various sexual orientation; lesbian, gay, bisexual	<input type="checkbox"/> x Yes	<input type="checkbox"/> No	Details:	See section 9
g) Carers (Adults & Young Carers)	<input type="checkbox"/> x Yes	<input type="checkbox"/> No	Details:	See section 9 (adult carers only)
h) Collective consultation, where this was open to all stakeholders including staff, patients, carers, members of the general public and partners organisations	<input type="checkbox"/> x Yes	<input type="checkbox"/> No	Details:	Baseline assessment and 5 Workshop process as described in section 9.
13. Evidence from Staff:				
<p>Do you have any evidence or reason to believe that this policy / function / service / project etc, has or could result in an adverse/negative impact on people from Equality Target Groups listed in sections 10, 11 and 12 of this form?</p> <p>This includes anecdotal evidence and information from Staff involvement events, Staff Surveys, Grievances, Health & Safety, Risk, Access & Facilities Audits, Patient & Public Involvement, PEAT Reports</p>				

Please list the evidence and / or reason below:

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Please Note – Section 15 should only be completed if you are assessing a function (service).

15. Staff training and other miscellaneous issues... N/A Strategy document

a) Have all staff attended training on Equality & Diversity within the last 2 years?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	Details:	
b) Have all managers attended training on Equality & Diversity within the last 2 years?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	Details:	
c) Are you confident that these trained managers apply the criteria of the 'Two Ticks' Positive About Disabled People accreditation in all recruitment and workforce situations?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	Details:	
d) Have all staff attended training on Disability Awareness within the last 2 years?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	Details:	
e) Have all staff attended training on Deaf Awareness within the last 2 years?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	Details:	

f) Do all staff know how to access language interpreter and translation services?				
▪ Face to face?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	Details:	
▪ Translation	<input type="checkbox"/> Yes	<input type="checkbox"/> No		
▪ Telephone	<input type="checkbox"/> Yes	<input type="checkbox"/> No		
g) Are professional language interpreters always engaged during confidential consultations (including legal meetings, care planning and reviews) with patients and carers?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	Details:	
h) Are professional British sign language interpreters always engaged during confidential consultations (including legal meetings, care planning and reviews) with patients and carers?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	Details:	
i) Do all staff know how to access and use an induction loop facility (fixed or portable)?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	Details:	
j) Is the building where the service is located wheelchair accessible?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	Details:	
k) Does the reception area have an induction loop system?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	Details:	
l) Does the building have a unisex wheelchair accessible “disabled” toilet?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	Details:	
m) Does the building have car parking spaces reserved for Blue Badge Holders?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	Details:	
n) Does the building have any additional facilities for disabled people such as a wheelchair, hoist, specialist bath, etc?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	Details:	
o) Does it have any other facilities for people from Equality Target Groups such as prayer and faith resources, etc?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	Details:	

<p>p) Is there anything else that has been undertaken to support equality & diversity such as guidelines, policies, etc?</p>	<input type="checkbox"/> Yes	<input type="checkbox"/> No	Details:	
<p>16. Who was involved? List the people who were involved in this assessment. (Staff, staff side representatives, service users, carers, partner agencies / organisations)</p>				
<p>Findings from the workshops have been collated into the strategy which is reporting to Departmental Management Team of CWAC and PCT Board.</p>				
<p>17. What supporting evidence was used? List the evidence which was used during this assessment (Including staff or service monitoring data, staff or service user satisfaction surveys, reports, etc)</p>				
<p>A total of 1,410 questionnaires were distributed to a range of professionals with a 15% response rate and 120 questionnaires were distributed to carers with a 52.5% response rate as part of the Baseline Assessment undertaken by the Alzheimer's Society. Joint Strategic Needs Assessment and input from key stakeholders at the 5 workshops.</p>				
<p>18. What is the Trust doing to support Equality & Diversity in relation to the policy / function / service / project? List the evidence such as guidelines, training, etc.</p>				
<p>Both organisations are raising the awareness of Equality and Diversity.</p>				
<p>19. Action Plan – List all actions (large and small) that have been identified during the assessment and include a named person and date for completion.</p>				
Action	Name Lead	Date to be Achieved		

<p>Future actions to be determined following reporting to the DMT and PCT Board.</p>		
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20. Following Equality Impact Assessment, what is your assessment?

<p>Have you identified any issues that you consider could have an adverse/negative impact on people from Equality Target Groups?</p>	<input type="checkbox"/> Yes	<input type="checkbox"/> xNo
<p>If NO you can introduce (if new) or continue to use (if existing) the policy / function / service / project etc</p>		
<p>If YES then use the Risk Rating Matrix to assess the level of risk associated to the policy / function / service / project</p>		
<div style="border: 1px solid black; padding: 5px; text-align: center;"> IMPACT (if the incidence were to occur) </div>	<div style="border: 1px solid black; padding: 5px;"> <p style="text-align: center;">LIKELIHOOD (of the incidence occurring or being repeated)</p> <div style="display: flex; align-items: center; justify-content: center;"> <div style="flex-grow: 1; border-bottom: 1px solid black; position: relative;"> <div style="position: absolute; right: 0; top: -5px;">→</div> </div> </div> <div style="display: flex; justify-content: space-around; margin-top: 5px;"> Remote Possible Likely Highly Likely Certain </div> </div>	<div style="border: 1px solid black; padding: 5px; text-align: center;"> INSERT YOUR RISK SCORE HERE </div>
		<div style="border: 1px solid black; width: 100px; height: 20px; margin: 0 auto;"></div> <p style="text-align: center; margin-top: 5px;">SCORE</p>

			(20% chance)	(60% chance)	(90% Chance)		
Score		1	2	3	4	5	IMPACT (I)
Insignificant	1	1 (GREEN)	2 (GREEN)	3 (GREEN)	4 (GREEN)	5 (GREEN)	LIKELIHOOD (L)
Minor	2	2 (GREEN)	4 (GREEN)	6 (AMBER)	8 (AMBER)	10 (AMBER)	OVERALL SCORE (I x L)
Significant	3	3 (GREEN)	6 (AMBER)	9 (AMBER)	12 (AMBER)	15 (AMBER)	GREEN / AMBER / RED
Serious	4	4 (GREEN)	8 (AMBER)	12 (AMBER)	16 (RED)	20 (RED)	
Catastrophic	5	5 (RED)	10 (RED)	15 (RED)	20 (RED)	25 (RED)	

YOUR RISK ASSESSMENT SCORE WILL DICTATE WHAT YOU NEED TO DO WITH THE POLICY / FUNCTION / SERVICE / PROJECT etc

SCORE	STATUS	ACTION
GREEN	New and existing	You can introduce (if new) or continue to use (if existing) the policy / function / service / project etc whilst undertaking the actions listed in Section 18
AMBER	New	Only introduce the policy/function/service/project etc after undertaking the actions listed in Section 18.
	Existing	Contact the Equality & Diversity Advisor to discuss the priorities of further actions listed in the Section 18
RED	New	Do not introduce this measure until further investigation has been completed. Contact the Equality & Diversity Advisor to discuss further actions
	Existing	Contact the Equality & Diversity Advisor immediately to discuss the priorities

21. Monitoring and Review of this policy / function / service / function etc

a) Who will be responsible for monitoring this policy / function / service / project etc?

Name:	Jane Middleton
Job Title:	Head of Integrated Strategic Commissioning
Email:	Jane.middleton@cheshirewestandchester.gov.uk
Tel No:	01244 976775

b) Please name the Committee / Sub-Committee that will receive the report for monitoring this

policy / function / service / project etc?	
	DMT and PCT Board.
c) When will this policy / function / service / project etc be reviewed?	
	Deadline for completion of Dementia Strategy is 31 March 2010.
d) Who will be responsible for coordinating the review of this policy / function / service / project etc?	
Name:	Cathy Davis
Job Title:	Head of Mental Health and Learning Disabilities
Email:	Cathy.Davis@wcheshirepct.nhs.uk
Tel No:	01244 650304
<p>Please return the completed assessment to the Equality & Diversity Lead:- Andy Meadows, Head of Corporate Service & Business, Western Cheshire Primary Care Trust, 1829 Building, Countess of Chester Health Park, Liverpool Road, Chester, CH2 1HL Email: andy.meadows@wcheshirepct.nhs.uk Tel: 01244 650407</p>	

THIS SECTION IS FOR COMPLETION BY THE PRIMARY CARE TRUST'S EQUALITY & DIVERSITY LEAD / EQUALITY & DIVERSITY ADVISOR ONLY	
Title of policy / function / service / project etc being assessed	
Date policy / function / service / project etc completed	

SUMMARY OF OUTCOME OF THIS IMPACT ASSESSMENT		
Was any adverse impact found?		<input type="checkbox"/> Yes <input type="checkbox"/> No
If YES, what was the level of risk identified using the Trusts Risk Assessment Toolkit	<input type="checkbox"/> Green	
	<input type="checkbox"/> Amber	
	<input type="checkbox"/> Red	
Action Required		
Officer undertaking the review of this Impact Assessment?		
	Name:	
	Job Title:	
	Email:	
	Tel No:	
	Date:	
Date when compliance against Equality Impact Assessment was monitored		