Predictive: assessing and analysing proposed changes to services, policies and budgets

Enfield Council
Predictive Equality Impact Assessment (EQIA) - Equality Analysis

JOINT HEALTH AND WELLBEING STRATEGY
2014-2019
FEBRUARY 2014
13. Predictive equality impact assessment/equality analysis template

Please complete this cover sheet

<table>
<thead>
<tr>
<th>Proposed change to service/policy/budget</th>
<th>Joint Health and Wellbeing Strategy 2014-2019</th>
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</thead>
<tbody>
<tr>
<td>Officer completing the assessment</td>
<td>Keezia Obi</td>
</tr>
<tr>
<td>Extension Number</td>
<td>Ext. 5010</td>
</tr>
<tr>
<td>Service</td>
<td>Public Health Strategy</td>
</tr>
<tr>
<td>Department</td>
<td>Health Housing and Adult Social Care (HHASC)</td>
</tr>
<tr>
<td>Date impact assessment completed</td>
<td>13.02.14</td>
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Section 1 – About the service, policy or budget, and proposed change

Q1. Please provide a brief description of the service/policy/budget

The purpose of the Joint Health and Wellbeing Strategy (JHWS) 2014-2019 is to set out how the Enfield Health and Wellbeing Board (HWB) will work with the population of Enfield to improve health and wellbeing across the borough over the next five years. The remit of the JHWS and HWB covers many aspects of life in Enfield; not just the direct impacts on health and wellbeing made by the social and health care system, but also the impacts of the wider determinants of health, such as housing, transport, employment and crime.

The JHWS has been developed jointly by Enfield Council and Enfield Clinical Commissioning Group (CCG), with input from a wide range of stakeholders including the voluntary sector.

Q2. Please provide a brief description of the proposed change(s) to the service/policy/budget

The JHWS sets out 5 priority areas for action:
- Ensuring the best start in life;
- Enabling people to be safe independent and well and delivering high quality health and care services;
- Creating stronger, healthier communities;
- Reducing health inequalities - Narrowing the gap in life expectancy;
- Promoting healthy lifestyles and healthy choices.

A detailed implementation plan of actions is being drawn up against these priority areas, and will be available on the Enfield Council website.

Q3. Does equalities monitoring of your service show that the beneficiaries in terms of the recipients of the service, policy or budget, and the proposed change, include people from the following groups?

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The scope of the JHWS covers all members of the local community. The JHWS action plan will include a range of positive actions designed to improve the health and wellbeing of groups known to be at particular risk of experiencing worse health and wellbeing outcomes. Other JHWS actions should benefit people across all groups within the borough. Targeted interventions will also have a positive impact on the wider health and wellbeing of the local population.

Monitoring of the effect of the strategy will be carried out post implementation.

Q4. If you answered ‘no’ to any of the groups listed in Q3, please state why?

N/A

Q5. How will the proposed change eliminate discrimination, promote equality of opportunity, or promote good relations between groups in the community?

One of the supporting principles that underpin the JWHS is Equality and Diversity. Initiatives supported by Enfield’s HWB aim to promote equality. This will be achieved both by taking positive action to improve the experience of health and wellbeing of particular groups within the borough, and also by working to improve and promote health and wellbeing across the population.
Section 2 – Consultation and communication

Q6. Please list any recent consultation activity with disadvantaged groups carried out in relation to this proposal

| R | Formal consultation on the draft priorities of the JHWS ran from the beginning of October to the end of December 2013. |
| D | Stakeholder and public views on the draft priorities were sought through the following means: |
| G | • An online questionnaire; |
| A | • Hard copy questionnaires, also available in Easy Read and 5 alternative languages (Polish, Bengali, Somali, Turkish and Greek); |
| F | • Token boxes in various locations around the borough; |
| S | • Face to face consultation events. |

The questionnaire was distributed and publicised through the following routes:

- Mail outs to GP surgeries, leisure centres, libraries, sheltered accommodation, care homes, hospitals, voluntary sector organisations, schools, Children’s Centres, and internal and external providers.
- Included in the routine mail outs: Barnet and Chase Farm Hospital newsletter, North Middlesex University Hospital newsletter, GP newsletter, Enfield Voluntary Action (EVA), Over 50’s Forum, and Greek and Greek Cypriot Community of Enfield (GGCCE).
- Customer network emails
- Article in ‘Our Enfield’ borough magazine, adverts in Enfield Independent and Enfield Advertiser, and in the Londra Gazette (Turkish newspaper) and Parikiaki (Greek newspaper)
- Promotion on websites: Enfield Council including the consultation page, Enfield CCG, North Middlesex Hospital, University College London Hospital, Enfield Strategic Partnership (ESP), EVA, Healthwatch.
- Information sent to events: Lancaster Centre, Area forums
- Promotion via social media: Facebook, Twitter

The following public consultation activities were also completed:

- Two general public events held on the 6th December in Edmonton Green and Enfield Town.
- One to One Health and Wellbeing event
- Event with Enfield Mencap
- Carers rights day
- HHASC Open day
- ESP conference
- Enfield Racial Equality Council (EREC) consultation event
- Enfield Youth Parliament
- Stall at Healthwatch launch event
- Stall at Ruth Winston House Health and Wellbeing day
- Stall at EVA AGM
- Enfield Turkish Cypriot Association event

The consultation was also promoted at a range of meetings:

- JSNA/JHWS Communities working group
- CCG Executive Directors meeting
- EREC board meeting
- Various senior management and departmental meetings
Q7. Please state how you have publicised the results of these consultation exercises, and what action you have taken in response

R
Responses have been analysed, and have the findings have influenced the JHWS content and action plan.

Information about the consultation has been included within the JHWS document.

Section 3 – Assessment of impact

Q8. Please describe any other relevant research undertaken to determine any possible impact of the proposed change

The JHWS is informed by the evidence base of the Joint Strategic Needs Assessment (JSNA) which was refreshed in 2013. The JSNA uses national, regional and local quantitative and qualitative data to present a detailed picture of health and wellbeing in Enfield, including projections of population change and service use. This information is presented alongside national research and best practice guidelines, including National Institute of Care Excellence (NICE) guidance as appropriate.

Q9. Please list any other evidence you have that the proposed change may have an adverse impact on different disadvantaged groups in the community

<table>
<thead>
<tr>
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<th>None identified</th>
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<td>None identified</td>
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Q10. Could the proposal discriminate, directly or indirectly, and if so, is it justifiable under legislation? Please refer to the guidance notes under the heading, 7. Useful Definitions

Not anticipated
Q11. Could the proposal have an adverse impact on relations between different groups? If so, please describe

Not anticipated

Q12. How could this proposal affect access to your service by different groups in the community?

As mentioned in Q5, the JHWS principle of Equality and Diversity highlights the HWB commitment to promoting and enhancing equity of access to services across the borough. Through positive action and broadening access, the JWHS should improve rather than hinder equity of access to services.

Q13. How could this proposal affect access to information about your service by different groups in the community?

As part of an on-going conversation with local people about the JHWS and the health and wellbeing, regular information relating to the JHWS and associated actions will be publicised through similar routes used for the initial JHWS consultation. As such, it is envisaged that information about the strategy will continue to be circulated widely, so improving access to information.

Section 4 – Tackling socio-economic inequality

Q14. Will the proposal in any way specifically impact on communities disadvantaged through the following socio-economic factors? Please explain below. If it does not, please state how you intend to remedy this (if applicable to your service), and include it in the action plan

Communities living in deprived wards/areas

One of the strategy priorities is to reduce health inequalities. As such it is intended that the JHWS will influence the wider determinants of health, so have a beneficial effect on all members of the community.

People not in employment, education or training

As above
<table>
<thead>
<tr>
<th>People with low academic qualifications</th>
<th>As above</th>
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<tr>
<td>People living in social housing</td>
<td>As above</td>
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<td>Lone parents</td>
<td>As above</td>
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<tr>
<td>People on low incomes</td>
<td>As above</td>
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<tr>
<td>People in poor health</td>
<td>As above</td>
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<tr>
<td>Any other socio-economic factor</td>
<td>As above</td>
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**Section 5 – Impact on staff**

Q15. How have you consulted, or otherwise engaged with, all relevant staff about this proposal (including any staff on sickness or maternity leave)?

Staff have been made aware of the consultation via:

- An all staff email
- Staff matters and Team Briefs
- Message on Enfield Eye and Enfield Council webpage
- Number of staff events including stalls at the health and wellbeing fair/HHASC open day, ESP conference, presentation to the Council’s Minority Ethnic Stagg Group, and in civic centre canteen

The consultation was also presented at Older Peoples scrutiny panel, HWB, Senior Managers Conference.

Q16. If your proposal involves a staff restructuring, how have you discussed this with relevant trade unions?

N/A - JHWS does not propose staff restructuring.

Q17. Does job matching of existing staff against the new proposed staff structure, following any assimilation process, indicate that any particular groups of staff are adversely affected more than others?

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**Section 6 - Miscellaneous**

**Q19. Is your proposal likely to have an impact on services provided by another Council department or service? If so, have you discussed the possible impact with them?**

The JHWS is overseen by the HWB, a cross-cutting strategic partnership that includes representation from the Council’s HHASC, Children’s, and Environment directorates, alongside representation from Enfield CCG, NHS England, Healthwatch Enfield, and the Voluntary Sector. As such, all partners should be aware of the potential impacts of JHWS implementation.

All practical changes to service provision and other arrangements resulting from the JHWS action plan will need to be discussed between relevant partners, and separate equality impact assessments/analyses (EQIAs) conducted to assess potential impacts of these changes.

**Q20. Do you plan to publicise the results of this assessment? Please describe how you plan to do this**

This EQIA will be published on the Enfield Council website.

The EQIA action plan (section 14) has been included as an appendix of the JHWS.

The assessment will be listed on the Council’s Equality and Diversity Annual Report and the full assessment will be made available on request.

**Q21. How and when will you monitor and review the effects of this proposal?**

The implementation and monitoring of the strategy will be overseen by the HWB, with closer monitoring being delivered by the JHWS Steering Group.

A detailed implementation plan outlining the key programmes of work over the life of the strategy will be developed, and will be implemented in partnership across Enfield Council, Enfield CCG, and key local stakeholders.

The JHWS steering group will also play a key role in the development of an on-going communication and engagement plan.
14. Action plan template for proposed changes to service, policy or budget

Proposed change to, or new, service, policy or budget: **Joint Health and Wellbeing Strategy 2014-2019**

Team: **Public Health Strategy**  Department: **HHASC**  Service manager: **Keezia Obi**

<table>
<thead>
<tr>
<th>Issue</th>
<th>Action required</th>
<th>Lead officer</th>
<th>Timescale</th>
<th>Costs</th>
<th>Comments</th>
</tr>
</thead>
<tbody>
<tr>
<td>Publication of the full consultation report</td>
<td>Publish on the Council’s website. Provide in accessible formats as required.</td>
<td>Public Health</td>
<td>Post final JHWS sign off</td>
<td>To be determined</td>
<td></td>
</tr>
<tr>
<td>Implement JHWS</td>
<td>Produce and agree a detailed action plan and performance framework. New EQIAs to be completed as advised and/or services are changed in response to commissioning decisions.</td>
<td>Health and Wellbeing Board</td>
<td>5 Year Strategy implementation/Action plan</td>
<td>To be determined</td>
<td></td>
</tr>
<tr>
<td>Monitor JHWS action plan and risk register</td>
<td>Health and Wellbeing Board to have oversight of progress against JHWS detailed action plan and status of risk register.</td>
<td>Health and Wellbeing Board Public Health</td>
<td>On-going</td>
<td>No additional funding anticipated</td>
<td></td>
</tr>
<tr>
<td>Continue on-going consultation with community on Health and Wellbeing and impact of strategy</td>
<td>Develop communication and engagement strategy to lay out how the Health and Wellbeing Board will engage with local people.</td>
<td>Public Health</td>
<td>On-going</td>
<td>To be determined</td>
<td></td>
</tr>
<tr>
<td>Review of JHWS</td>
<td>Review strategy to assess outcomes and effectiveness.</td>
<td>Health and Wellbeing Board Public Health</td>
<td>Action plan to be reviewed as strategic needs change. Full strategy review due 2018/19.</td>
<td>No additional funding anticipated</td>
<td></td>
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APPROVAL BY THE RELEVANT ASSISTANT DIRECTOR: **Shahed Ahmad**  SIGNATURE:  

[Signature Image]