

Equality Impact Assessment

Title of policy or service:	Health Village Integrated Locality Pilot	
Name and role of officer/s completing the assessment:	Mel Simmonds, Strategy & Transformation Manager	
Date of assessment:	13.09.2017	
Type of EIA completed:	Initial EIA 'Screening' <input checked="" type="checkbox"/> or 'Full' EIA process <input type="checkbox"/>	<i>(select one option - see page 4 for guidance)</i>

1. Outline

Give a brief summary of your policy or service

- Aims
- Objectives
- Links to other policies, including partners, national or regional

There are three themes to the project: Integration: bringing together nursing, social work, therapy, medicine and the voluntary sector into one team; Seamless care: ensuring that the patient receives a continuous flow of coordinated care from a single care plan; Communication: working together as one team, but also closely with colleagues in Primary Care, the Hospital, Residential Care, the Voluntary sector, Social Care and Mental Health. The project has been co-designed and sponsored by Rotherham Foundation Trust, Rotherham Metropolitan Borough Council, Rotherham, Doncaster and South Humber Foundation Trust, Voluntary Action Rotherham, and Rotherham Clinical Commissioning Group.

The pilot is an integral element of work that contributes to the delivery of the Place Plan integration agenda.

Identifying impact:

- **Positive Impact:** will actively promote or improve equality of opportunity;
- **Neutral Impact:** where there are no notable consequences for any group;
- **Negative Impact:** negative or adverse impact causes disadvantage or exclusion. If such an impact is identified, the EIA should ensure, that as far as possible, it is either justified, eliminated, minimised or counter balanced by other measures. This may result in a 'full' EIA process.

2. Gathering of Information

This is the core of the analysis; what information do you have that might *impact on protected groups, with consideration of the General Equality Duty*.

(Please complete each area)	What key impact have you identified?			For impact identified (either positive and or negative) give details below:	
	Positive Impact	Neutral impact	Negative impact	How does this impact and what action, if any, do you need to take to address these issues?	What difference will this make?
Human rights	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>		
Age	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Positive: The work of the project tends to focus upon older people due to their greater health needs. Negative: However, this leaves a gap for younger adults. Future roll out options are including how we undertake targeted preventative work with young adults.	It will reduce the likelihood of developing complex health needs in later life and improve quality of life for older people living with long term conditions and other health and social care issues.
Carers	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The integrated approach incorporates the VCS. This includes The Carers Resilience service. This has increased the knowledge and awareness of staff in relation to the needs of carers and ensuring they are supported better.	Creating greater carer resilience and support.
Disability	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>		
Sex	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>		
Race	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>		
Religion or belief	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>		
Sexual orientation	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>		

Gender reassignment	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>		
Pregnancy and maternity	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	The caseloads held within the project tend to be older people due to their complex health needs as they grow older. Therefore, pregnant individuals are less likely to benefit from the services offered by the pilot. The future roll out is considering options as to how to undertake targeted prevention work with younger adults and a longer term consideration is developing integrated family hubs which will provide an integrated delivery model for all age groups.	This will have a positive impact in terms of patient care as they will be treated and considered from a family perspective. The targeted prevention work may create an opportunity to target those with health/social complexities planning to conceive/recently conceived to prevent/reduce the risk of maternal ill health.
Marriage and civil partnership (only eliminating discrimination)	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>		
Other relevant groups	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>		
HR Policies only: Part or Fixed term staff	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		

IMPORTANT NOTE: If any of the above results in '**negative**' impact, a 'full' EIA which covers a more in depth analysis on areas/groups impacted must be considered and may need to be carried out.

Having detailed the actions you need to take please transfer them to onto the action plan below.

3. Action plan				
Issues/impact identified	Actions required	How will you measure impact/progress	Timescale	Officer responsible

Gap in service provision for younger adults, pregnant or those trying to conceive with early indicators of escalating health matters.	1. Evaluation of current delivery model to be undertaken 2. Pilot targeted prevention work	1. Evaluation outcome report 2. No. of younger adults/pregnant/trying to conceive identified as likely to benefit from early intervention, no. of health and social care contacts thereafter in comparison to previous rates.	1. February 2018 2. March 2018	Mel Simmonds, Strategy & Transformation Manager (temporarily)
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4. Monitoring, Review and Publication

When will the proposal be reviewed and by whom?	Lead / Reviewing Officer:	Mel Simmonds, Strategy & Transformation Manager	Date of next Review:	April 2018
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Once completed, this form **must** be emailed to Alison Hague, Corporate Services Manager for sign off:

Alison.hague@rotherhamccg.nhs.uk

Alison Hague signature:	
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EQUALITY IMPACT ASSESSMENT: Initial EIA 'Screening' and 'Full' EIA Processes

EIA FLOWCHART

