



EQUALITY IMPACT ASSESSMENT/ ANALYSIS (EqIA)

Warwickshire Health and Wellbeing Strategy

Equality Impact Assessment/ Analysis (EqIA)

Group	Communities (Strategy is led by the Warwickshire Health and Wellbeing Board which is a multi-agency Board)
Business Units/Service Area	Public Health (Strategy is led by the Warwickshire Health and Wellbeing Board which is a multi-agency Board)
Plan/ Strategy/ Policy/ Service being assessed	Warwickshire Health and Wellbeing Strategy
Is this is a new or existing policy/service? If existing policy/service please state date of last assessment	New strategy following on from the previous interim strategy
EqIA Review team – List of members	Nicola Wright, Catherine Rigney
Date of this assessment	21/08/2014
Signature of completing officer (to be signed after the EqIA has been completed)	
Are any of the outcomes from this assessment likely to result in complaints from existing services users and/ or members of the public? If yes please flag this with your Head of Service and the Customer Relations Team as soon as possible.	NO
Name and signature of Head of Service (to be signed after the EqIA has been completed)	John Linnane 
Signature of GLT Equalities Champion (to be signed after the EqIA is completed and signed by the completing officer)	

A copy of this form including relevant data and information to be forwarded to the Group Equalities Champion and the Corporate Equalities & Diversity Team



*Working for
Warwickshire*

Form A1

INITIAL SCREENING FOR STRATEGIES/POLICIES/FUNCTIONS FOR EQUALITIES RELEVANCE TO ELIMINATE DISCRIMINATION, PROMOTE EQUALITY AND FOSTER GOOD RELATIONS



High relevance/priority



Medium relevance/priority



Low or no relevance/ priority

Note:

1. Tick coloured boxes appropriately, and depending on degree of relevance to each of the equality strands
2. Summaries of the legislation/guidance should be used to assist this screening process

Business Unit/Services:	Relevance/Risk to Equalities																										
State the Function/Policy /Service/Strategy being assessed:	Gender			Race			Disability			Sexual Orientation			Religion/Belief			Age			Gender Reassignment			Pregnancy/ Maternity			Marriage/ Civil Partnership (only for staff)		
	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓
Warwickshire Health and Wellbeing Strategy			✓		✓		✓				✓			✓		✓				✓			✓			✓	
Are your proposals likely to impact on social inequalities e.g. child poverty for example or our most geographically disadvantaged communities? The strategy aims to reduce health and social inequalities and for deprived or vulnerable communities to achieve better outcomes.																											YES
Are your proposals likely to impact on a carer who looks after older people or people with disabilities?																											YES

The strategy outlines 'better support and information for carers of disabled people to empower them to live the lives they want and achieve their full potential' as an outcome, as well as referencing the personalisation and integration agenda in relation to carers and the care they deliver and receive.



Form A2 – Details of Plan/ Strategy/ Service/ Policy

Stage 1 – Scoping and Defining

(1) What are the aims and objectives of Plan/Strategy/Service/Policy?

Looking after the health and wellbeing of the population of Warwickshire is not the responsibility of one single body. Statutory and non-statutory organisations, including the voluntary sector, across the county all play a part in impacting on our health and wellbeing and influencing our behaviour.

The Health and Wellbeing Strategy provides Warwickshire – residents and organisations – with a picture of what the Health and Wellbeing Board (its members and wider partners) will need to deliver over the next 5 years and how we will work together to achieve this.

The Warwickshire Health and Wellbeing Board has agreed three priorities that will inform how we will work together, develop actions and report on our progress on improving the health and wellbeing of Warwickshire.

The Health and Wellbeing Strategy Priorities are:

- Promoting independence
- Community resilience
- Integration and working together

(2) How does it fit with Warwickshire County Council's wider objectives?

- One Organisational Plan Ambitions:
 - Our communities and individuals are safe and protected from harm and are able to remain independent for longer
 - The health and wellbeing of all in Warwickshire is protected
 - Resources and services are targeted effectively and efficiently whether delivered by the local authority, commissioned, or in partnership.

(3) What are the expected outcomes?	<p>The Health and Wellbeing Strategy makes a difference by:</p> <ul style="list-style-type: none"> • The Strategy provides clarity for public, community and voluntary sector providers of the Warwickshire Health and Wellbeing Board's priorities for its delivery of health and wellbeing across the county • Providing a framework for organisations to use when commissioning, redesigning and decommissioning services • Enabling Warwickshire to use existing assets and resources of partners, including workforce, communities and information to reshape services • Influencing the wider determinants of health and wellbeing through joint working across the county.
(4) Which of the groups with protected characteristics is this intended to benefit? (see form A1 for list of protected groups)	<p>Disability Age Pregnancy/ Maternity</p>
<u>Stage 2 - Information Gathering</u>	

(1) What type and range of evidence or information have you used to help you make a judgement about the plan/ strategy/ service/ policy?

A comprehensive literature review has been carried out to include a wide range of relevant national policy and strategy around health and social care. Specifically referenced is the Better Care Fund, The Children and Families Act and The Care Act.

Local consultation is being carried out to gather the views of local residents, organisations and stakeholder groups. The Health and Wellbeing Board and active observers have been involved in the consultation on the strategy over the past year.

Data and information from the Warwickshire Joint Strategic Needs Assessment (JSNA) has been widely utilised; initially this was to inform the decision making on the priorities. JSNA data has also been used throughout the chapters in order to identify the priority groups.

<p>(2) Have you consulted on the plan/ strategy/ service/policy and if so with whom?</p>	<p>The Health and Wellbeing Strategy consultation process involves a two-step process with initial consultation aimed at members of the Health and Wellbeing Board members and active observers. A copy of the pre-consultation summary can be obtained by contacting the EqIA report authors. This second stage is a full public and stakeholder consultation on the draft strategy.</p> <p>The first stage of the consultation, took place during July via a qualitative questionnaire that was sent to approximately 30 recipients (Health and Wellbeing Board members and active observers). The survey asked recipients what they understood by the concepts of the three priorities, which groups should be included within each and if there are any key messages that should be communicated around each priority. Responses were received from a combination of Board members and active observers which have informed the writing of the Strategy.</p> <p>The second stage of the consultation includes a public questionnaire conducted in line with the Warwickshire County Council engagement protocols. This took place from 18th August 2014 to 8th October 2014. This includes general questions on the draft strategy, as well as specific questions on each topic area. The results of this consultation were incorporated into the Strategy during its development and informed the topic areas and content of each section.</p> <p>There is also a workshop for Health and Wellbeing Board members and key stakeholders.</p>
<p>(3) Which of the groups with protected characteristics have you consulted with?</p>	<p>Race Age Sexual Orientation Gender Reassignment Gender Religion/Belief Disability</p>

<u>Stage 3 – Analysis of impact</u>			
(1) From your data and consultations is there any adverse or negative impact identified for any particular group which could amount to discrimination? If yes, identify the groups and how they are affected.	RACE NO	DISABILITY NO	GENDER NO
	MARRIAGE/CIVIL PARTNERSHIP NO	AGE NO	GENDER REASSIGNMENT NO
	RELIGION/BELIEF NO	PREGNANCY MATERNITY NO	SEXUAL ORIENTATION NO
(2) If there is an adverse impact, can this be justified?	N/A		
(3)What actions are going to be taken to reduce or eliminate negative or adverse impact? (this should form part of your action plan under Stage 4.)	N/A		

(4) How does the plan/strategy/service/policy contribute to promotion of equality? If not what can be done?	The Strategy aims to improve the health and wellbeing of all. This may mean targeting resources to those vulnerable groups who need services the most.
(5) How does the plan/strategy/service/policy promote good relations between groups? If not what can be done?	The third priority of the strategy focuses on integration and working together. This entire priority is dedicated to putting the person at the centre of care, and encourages organisations to work together by aligning services to ensure they receive seamless and appropriate care. This is also supported by the Better Care Fund.
(6) Are there any obvious barriers to accessing the service? If yes how can they be overcome?	N/A

(7) What are the likely positive and negative consequences for health and wellbeing as a result of this plan/strategy/service/policy?

Positive consequences include:

- Ensuring the best possible start to life for children, young people and their families
- Support for young people who are most vulnerable and ensuring their transition into adulthood is positive
- Enabling people to effectively manage and maintain their physical and mental health and wellbeing
- Ensuring that people with disabilities have the same choice, control and freedom as any other citizen – at home, at work and as members of the community
- Enabling older people fulfil the tasks of independent living, maintaining social connections, and allowing people to have choice and control over how they live their lives
- Increasing the resilience and capacity of our communities, enabling them to better support themselves, vulnerable individuals and families
- Promoting positive lifestyle behaviour changes and encourage individuals and communities to take responsibility for their own health
- Targeting limited resources where they are most needed and bridge the gap in health and social inequalities where they exist across the county
- Engaging with and seek the views of individuals and communities and use neighbourhood data and analytics to ensure that the needs of communities are fully understood
- Supporting communities to participate in and influence the shaping and transforming of local services
- Residents to develop coping skills for the prevention of stress, depression and anxiety
- Improving educational attainment, particularly with those pupils that are eligible for free school meals
- Maximising opportunities for local economic and job development
- Supporting people to remain healthy and independent, in their own homes for longer
- Supporting people to get the right service at the right time and in the right place
- Improving accessibility and visibility of ‘front doors’ to support people, to make the right choice, the easiest choice, informed by customer journey examples
- Improving care coordination in the community for high risk/cost patients

<p>(8) What actions are going to be taken to reduce or eliminate negative or adverse impact on population health? (This should form part of your action plan under Stage 4.)</p>	<p>There are no expected adverse impacts on population health as a result of this strategy.</p>
<p>(9) Will the plan/strategy/service/policy increase the number of people needing to access health services? If so, what steps can be put in place to mitigate this?</p>	<p>One of the aims of the strategy is to reduce the need for and dependency on health and social care services. This will be achieved through the strategy priorities of promoting independence and community resilience.</p>

(10) Will the plan/strategy/service/policy reduce health inequalities? If so, how, what is the evidence?

The Health and Wellbeing Board is responsible for leading locally on tackling health inequalities, by providing a forum for councillors, commissioners and communities to work with wider partners to address the determinants of health, reduce health inequalities and strengthen our communities.

The Strategy refers to the importance of information and data sharing, in order to help in understanding the health and wellbeing needs of everyone and the quality of the treatment and care provided, and reducing inequalities in the care provided.

The Strategy refers to a number of national strategies and targets aiming to improve health and wellbeing and reduce health inequalities highlight the importance of involving local communities. The Strategy outlines a commitment to working with our communities, involving them in local decision making and co-producing services that will improve their health, wellbeing and resilience. This links to the Strategy's reference to targeting limited resources where they are most needed in order to bridge the gap in health and social inequalities where they exist across the county, by:

- Focusing on prevention, early help and targeted support. Our most vulnerable communities will be supported through targeted interventions which encourage independence and improved wellbeing

Providers and commissioners measuring their outcomes using validated tools and measures.

Stage 4 – Action Planning, Review & Monitoring

If No Further Action is required then go to – Review & Monitoring

(1) Action Planning – Specify any changes or improvements which can be made to the service or policy to mitigate or eradicate negative or adverse impact on specific groups, including resource implications.

EqlA Action Plan

Action	Lead Officer	Date for completion	Resource requirements	Comments

(2) Review and Monitoring
State how and when you will monitor policy and Action Plan

The strategy will have action plans completed by all partners at regular intervals, minimally annually.

Please annotate your policy with the following statement:

‘An Equality Impact Assessment/ Analysis on this policy was undertaken on (date of assessment) and will be reviewed on (date three years from the date it was assessed).