

Fairness and Equalities Impact Assessments F&EIAs (2015)

This form presents evidence that equalities, Welsh language and fairness have been considered when taking policy and service delivery decisions in Newport City Council.

Our Equalities focus is taken from the Equalities Act 2010: we consider the nine protected equalities characteristics- age, gender reassignment, disability, marriage and civil partnership, pregnancy and maternity, race, religion and belief, sex, sexual orientation.

Under the General Equality Duty we have a duty to:

- Eliminate unlawful discrimination, harassment and victimisation
- Advance equality of opportunity and
- Foster good relations across the nine protected characteristics.

Under the Welsh Language Measure 2011 the Welsh language cannot be treated any less favourably than the English language

In Newport we focus on Fairness through the following themes: Health, Poverty, Skills and Work, Domestic Abuse and Tackling Area Based Deprivation.

Service Area	Head of Service	Person responsible for the Assessment:	Date of Assessment 09.12.16 Version (if applicable) 1
People	Chris Humphrey	Gareth Cooke	

1. What is the policy/ service being assessed?

Review and retendering of Frailty Care Support Team (Hospital Discharge Service)

2. What is the purpose of the policy/ service change?

To ensure that people who can be discharged from hospital, are able to in a timely manner. To ensure that people are prevented from unnecessary hospital admission by offering low to moderate short term support.

To ensure that the service is able to continue to manage demand, a review of Frailty Care Support Team is required. This will ensure that pathways are developed and that people get the right support at the right time. The review will involve looking at how each element of the pathway operates to ensure people get the services they need.

3. Protected Characteristics

Protected Characteristic	Who are the customers/service users/ potential service users?	If we take this decision what is the potential impact? The impact may be either positive or negative Explain how people may be affected and give the evidence for this	Action Plan to address issues raised What changes or practical measures would reduce adverse impact on particular groups. What changes would increase positive impacts e.g. improve access or opportunity May be revisited post consultation	Who is responsible?	Timeframe to review
Age	People aged 50+	Positive as people will benefit from accessing a refined pathway process		Patrica Bartley	3 monthly – December 2017
Gender	No data available	No data available	No data available		

reassignment					
Disability	<p>Older people who are frail</p> <p>People with long term conditions</p>	<p>As this is a jointly funded service with ABUHB and Frailty, a reduction of £16,063 per annum will impact on service capacity, but as this service is aimed at low level support following a hospital discharge, there should be no impact on delayed transfers of care</p>	<p>A retender would give a wide range of providers the opportunity to propose new models of service delivery, and link in with existing services across Newport</p>		
Marriage/Civil Partnership	No data available	No data available	No data available		
Pregnancy and Maternity	No data available	No data available	No data available		
Race	<p>Older people who are frail</p> <p>People with long term conditions</p>	<p>As this is a jointly funded service with ABUHB and Frailty, a reduction of £16,063 per annum will impact on service capacity, but as this service is aimed at low level support following a</p>	<p>A retender would give a wide range of providers the opportunity to propose new models of service delivery, and link in with existing services across Newport</p>		

		hospital discharge, there should be no impact on delayed transfers of care			
Religion/belief (or the absence of)	Older people who are frail People with long term conditions	As this is a jointly funded service with ABUHB and Frailty, a reduction of £16,063 per annum will impact on service capacity, but as this service is aimed at low level support following a hospital discharge, there should be no impact on delayed transfers of care	A retender would give a wide range of providers the opportunity to propose new models of service delivery, and link in with existing services across Newport		
Sex	No data available	No data available	No data available		
Sexual Orientation	No data available	No data available	No data available		
Welsh language	Older people who are frail People with long term conditions	We would expect as part of our existing contractual arrangements, that all organisations meet their requirements of the Welsh Language Act.	All future services commissioned will continue to take legislation and policy into account when delivering services	Project Manager – Gareth Cooke with support from Commissioning Team	September 2017 onwards

4. Who has the service consulted regarding the proposed change? When should new consultation take place?

NB: It is essential that service users and other interested parties are involved in the planning process at the earliest opportunity. Consultation at an initial stage should be along broad themes. It is appropriate to ask what services are valued, how services could be changed and or what could be done differently. This feedback should then inform your business case proposals and the F&EIA. When specific proposals have been drawn up, they too will need to be consulted upon. All stakeholders and their views need to be represented.

Discussions with the existing service provider have taken place, which have, and will continue to help shape the service moving forward.

Staff within the service have not yet been consulted, but will be pending the decision within the business case.

5. What evidence/ data has been used to complete this F&EIA (This will include local and national guidance)

Information provided by organisations involved.

Spatial data through Unified Needs Assessment, Newport Overview and Unified Needs Assessment.

The driving force behind the proposed change is the Social Services and Well Being (Wales) Act.

6. How will the relevant groups be advised of the changes and the F&EIA?

Regular meetings to review the process and progress

7 How will the policy/ practice make Newport more or less fair in relation to:

- Health Inequalities
- Child Poverty
- Skills and Work
- Tackling Domestic Violence
- Alcohol and Substance misuse
- Homelessness
- Armed Forces Veterans

The proposed changes are unlikely to impact on Skills and Work, Homelessness, Alcohol and Substance Misuse or Armed Forces Veterans.

There is no evidence available regarding the impact on domestic abuse or child poverty. However, as financial pressures are a trigger for both domestic abuse and child poverty, there may be a correlation, for example some of the services we commission help vulnerable people access benefits. If people are waiting longer for a commissioned service to help them apply for benefits, then this could slightly increase this risk. However by remodelling services, we aim to meet an ever growing demand for such support.

By remodelling this service, we will also provide greater equity to people experiencing health inequalities, so that people with a diverse range of health conditions can be supported.

8. How will the service / policy affect local areas of the city?

Will it have a positive or negative impact in terms of fairness and addressing local area deprivation (you will need to use spatial data available through the Newport Profile and specific Ward Profiles to address this question)?

Not applicable

9. In summary, how does the changed service /policy promote good community relations (cohesion)?

Not applicable

10. In summary, how does the changed service /policy promote equality?

Due to an increasing demand for services across the sector, we are unable to sustain the current service model. By remodelling services, we will be able to ensure that people who need support, can access it.

11. In summary, how does the changed service /policy eliminate discrimination?

The whole focus of preventative services such as the Frailty Care Support Team is to eliminate discrimination and to provide support to vulnerable people. This will continue to be the focus of services port October 2017.

Completed by/ Date: Gareth Cooke 9th December 2016

Signed off by/ Date: