Durham County Council – Altogether Better equality impact assessment form

NB: Equality impact assessment is a legal requirement for all strategies plans, functions, policies, procedures and services. We are also legally required to publish our assessments. You can find help and prompts on completing the assessment in the guidance from page 7 onwards.

Section one: Description and initial screening

Section overview: this section provides an audit trail.

Service/team or section: Healthier Communities – Social Inclusion- AWBH

Lead Officer: Strategic Manager – Healthier Communities | Start date: September 2011

Subject of the Impact Assessment: (please also include a brief description of the aims, outcomes, operational issues as appropriate)

The Health & Wellbeing Partnership brings together different organisations in County Durham to improve people's health and wellbeing. We are focused on reducing health inequalities in the county and leading on the health and wellbeing related objectives and targets set by partners in County Durham, including those in the SCS.

Partnership aims:

□ Provides high-level leadership and co-ordination of the health and wellbeing agenda across County Durham

□ Acts as a sub-group of The County Durham Partnership (CDP) working to produce positive outcomes across all lead thematic partnerships with a focus on narrowing the gap in life expectancy both within County Durham and between County Durham and England, achieving reductions in health inequalities

□ Links together national, regional and local strategies relating to health and wellbeing

□ Plans and delivers in relation to shared objectives, particularly those agreed in the context of the CDP which are related to health and wellbeing

□ Co-ordinates, monitors and manages performance so that service improvements are delivered and targets met; to take appropriate action where this is not happening

□ Reports progress to the CDP Board as required.

□ Promotes full engagement of all sectors that represent local people, including the voluntary and community sector

□ Ensures effective communication of health and wellbeing related issues to all partners including the CDP Board.

The purpose of the Altogether Healthier Delivery Plan is to set out a major programme of partnership work to reduce health inequalities and bring about change in County Durham. The plan considers the impact of the wider determinants of health and proposes a range of partnership actions.

The Delivery Plan has been developed by a working group from partner agencies and considered best practice and evidence for health improvement in the form of NICE public health guidance, DH and other national guidance, local policies / plans, joint strategic needs assessment and best practice.

The Delivery Plan comprises three key priorities which are:

- To Improve Life Expectancy
- To Reduce Health Inequalities
- To Improve Mental Health and Wellbeing of the Population

For each of the priorities there are key delivery objectives. The delivery objectives for the Delivery Plan are:

- Reduce Mortality from Circulatory Diseases
- Reduce Mortality from Cancers
- Reduce the Harm Caused by Alcohol
- Reduce the Harm Caused by Drugs
- Reduce Obesity Levels
- Increase Physical Activity
- Increase Social Inclusion
- Maximise Independence
- Reduce Suicides

The Health and Wellbeing Partnership has selected the key priorities and objectives based upon evidence of effectiveness, local intelligence relating to health needs and alignment to partners and corporate strategic plans such as the Durham County Council Corporate Plan and the Sustainable Communities Strategy – 2010/11

The priorities and objectives were chosen from evidence based assessment of health need within County Durham. Drafts were presented to all partners at the Health and Wellbeing Partnership board, and feedback considered before final agreement being

reached. The stakeholders are represented by the members of the partnership, with each organisation determining consultion as appropriate. Membership at the time of production of the delivery plan includes - AAP health representatives; County Durham Sport; Drug and Alcohol Action Team (DAAT); Durham County Council Strategic Housing Representation; Durham County Council, Adults, Wellbeing and Health directorate; Durham County Council, Portfolio Holder for Healthy Communities; Health Networks Representative (5 representatives in total); Local Involvement Network (LINk); Mental Health Partnership Arrangements; One Voice Network Representative; Teenage Pregnancy Board; The Alcohol Harm Reduction Group; The Children's Trust; The Learning Disabilities Partnership Board; The Partnership Board for Older Adults.

Who are the main stakeholders: General public / Employees / Elected Members / Partners/ Specific audiences/Other (please specify) –

The main stakeholders are Elected Members, Employees, Partners including Durham Constabulary, NHS County Durham and Darlington, County Durham and Darlington Foundation Trust, Tees Esk and Wear Valley Foundation Trust, third sector agencies such as Pioneering Care Partnership, Mind and Groundwork Northeast, County Durham Sport, the General Public, County Durham Partnership

`Is a copy of the subject attached? Yes

If not, where could it be viewed?

Initial screening

Prompts to help you:

Who is affected by it? Who is intended to benefit and how? Could there be a different impact or outcome for some groups? Is it likely to affect relations between different communities or groups, for example if it is thought to favour one particular group or deny opportunities for others? Is there any specific targeted action to promote equality?

Is there an actual/potential negative or positive impact on specific groups within these headings? Indicate :Y = Yes, N = No, ?=Unsure

Gender Y Disability Y Age	YRace/ethnicityYReligionYSexualYor beliefor belieforientationY	,
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How will this support our commitment to promote equality and meet our legal responsibilities?

Reminder of our legal duties:

- Eliminating unlawful discrimination & harassment
- Promoting equality of opportunity
- Promoting good relations between people from different groups
- Promoting positive attitudes towards disabled people and taking account of someone's disability, even where that involves treating them more favourably than other people
- o Involving people, particularly disabled people, in public life and decision making

The objectives of the Delivery Plan are to ensure that health inequalities are addressed and reduced for all population groups. The actions contained within the plan fully support our commitment to equality through a broad range of clinical and lifestyle interventions. Some interventions are directly targeted at groups with protected characteristics such as those with learning disabilities, parents of young children and pregnant women, whilst others are intended to engage people to widen participation and uptake of services and activities that directly contribute to health and wellbeing for all.

What evidence do you have to support your findings?

County Durham is amongst the most deprived unitary authorities nationally, particularly in relation to health :-

- Male and female life expectancy is significantly lower in County Durham than in England
- Life expectancy is 8 years lower for men and 6 years lower for women in the most deprived areas of County Durham than in the least deprived areas (APHO Slope Index of Inequality for Life Expectancy by Deprivation Deciles, 2011)
- Premature mortality rates for the main causes of health inequalities such as cancer, heart disease and stroke continue to fall but remain higher than nationally
- Death from circulatory diseases, heart diseases, stroke and cancers occur across the county at a younger age, than the national average.

The Health and Wellbeing Partnership's Delivery Plan is designed to tackle the major contributors to health inequalities in our county. It is a high level plan and many of the actions contained within it represent core business for the council and partner agencies. The nature of the Delivery Plan means that it is too high level and cross-cutting for a full screening however for those actions relevant to Durham County Council there are processes in place which are embedded within the Council's own planning and financial systems to ensure that any changes or reduction to these services are impact assessed.

The Altogether Healthier Delivery Plan highlights more than just action plans for the SCS, it documents the Health and Wellbeing Partnership (H&WBP) key principles. The communication and marketing of the delivery plan will be crucial to galvanise engagement, forge strong links with local programmes and promote joint ownership of the delivery plan to partner agencies. A variety of channels and tools to communicate in different ways for different stakeholder groups will be considered in order to reach out to key partners in the health and wellbeing partnership.

Delivery Plan Marketing and Promotion

Discussions with key partners at various meetings have informed the delivery plan. (This has taken place involving Health Networks which include voluntary and community sector partners.)

□ The plan will be available to a number of groups such as the CDP thematic groups, health networks, local children's boards, GP led commissioning and councils for voluntary services

□ The plan will be uploaded onto the Altogether Healthier area of the County Durham Partnership website.

Decision: Proceed to full impact assessment – Yes Date: September 2011 If you have answered 'No' you need to pass the completed form for approval & sign off.

Section two: Identifying impacts and evidence- Equality and Diversity

Section overview: this section identifies whether there are any impacts on equality/diversity/cohesion, what evidence is available to support the conclusion and what further action is needed.

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	Identify the impact: does this	Explain your conclusion, including	What further
	increase differences or does	relevant evidence and consultation you	action is required?
	it aim to reduce gaps for	have considered.	(Include in Sect. 3
	particular groups?		action plan)
Gender	The plan seeks to address	The balance of males and females within the	1. Equality monitoring
	needs of all sections of the	County is fairly evenly split and there are	and measures
	population.	239,908 (48.62 percent) males and 253,562	considered as part of
	For example at a population level	(51.38 percent) females living in County	evaluation of impact
	the council will develop the	Durham (Census 2001). Women make up a	of interventions.
	delivery of Health Checks in	larger proportion of the older (65+) population.	

	 partnership with NHS agencies and ensure that these are targeted to communities where health inequalities are greater. Similarly some interventions are designed to meet the specific needs of gender groupings such as actions to reduce smoking in women who are pregnant and developing a countywide breastfeeding friendly venues programme. Additionally there is an action to target male emotional wellbeing. Actions will lead to an increase in levels of participation in healthy lifestyle interventions and access to services designed to improve wellbeing. 	It is noted that gender issues include pregnancy and maternity, marriage and civil partnership and transgender. The Joint Strategic Needs Assessment (JSNA) outlines evidence around health inequalities and key priorities for population health in County Durham. Life expectancy for men living in the most deprived areas of the County is over 6 years lower than for men living in the least deprived areas. For women it is nearly 5 years lower (Health Profile 2010). The recent Scrutiny Review of Health Inequalities which focused upon physical activity noted that male participation in County Durham has increased, however female participation has decreased. Barriers to participation in physical activities include lack of awareness, time, low aspirations, transport, cost, suitability, lack of role models, and in particular for women, lack of childcare.	
Age	The plan seeks to address the needs of various age groups. There are direct links with the priority theme of 'Altogether Better for Children and Young People' For example there are interventions designed to reduce children and young people's	County Durham has an ageing population. By 2026, the numbers of people aged 65 and over will increase by almost 50 percent, whilst those aged over 85 will increase by over 115 percent (JSNA). The health profile for County Durham 2010 identifies that many of its health indicators are significantly worse than the England average. These include: obese adults, early deaths:	As 1.

	exposure to second hand smoke, increasing physical activity for all ages within communities and measures to address obesity and nutrition for children in families, working age adults and those living in residential care. The delivery objective 'Maximising Independence' involves achieving independence for older and vulnerable people through rehabilitation / intermediate care and providing support for people with housing and other needs to live independently.	heart disease and stroke, early deaths: cancer, deaths from smoking, adults who smoke, hip fractures in over 65's, binge drinking adults, hospital stays for alcohol related harm and mental illness. The distribution of premature death across County Durham is unequal. It is greater in the more deprived wards. Barriers to participation in physical activities include time for adults with work and caring responsibilities, and often cost and transport for children and young people. (Scrutiny Review of Health Inequalities)	
Disability	The plan is intended to reduce gaps through supporting individuals and agencies to improve population health by increasing life expectancy and promoting wellbeing, with a view to limiting or delaying the onset of ill-health and disability. The plan will ensure access to a range of services and lifestyle interventions to assist with well being across the population. Close partnership working with the NHS will ensure targeted activities for people with learning	County Durham has a higher percentage of permanently sick and disabled people than the North East average, representing a quarter of the working age population. (Further details available from JSNA) Barriers for participation for people with disabilities include access and lack of transport.	As 1. Needs of disabled people to be taken into account when developing lifestyle interventions that support behaviour change.

	 disabilities, people who have experienced mental ill health and those with physical disabilities. For example: increasing choice and control through a range of personalised services, provision of training, mentoring and employment opportunities The plan includes a range of social marketing measures which are directed towards specific population groups and geographies to improve access and raise awareness. The plan includes actions to improve access to leisure and physical activities for people with disabilities. 		
Race/Ethnicity	 The plan aims to reduce gaps for ethnic minority groups. For example there is an action to target mental health improvement towards specific BME groups. Ethnicity monitoring is currently disparate making it difficult to assess general impact. Activity linked to Gypsy/Roma Travellers 	According to the 2001 Census, black and minority ethnic people represent around 1% of the population with the three largest minority groups being Irish, Indian and Chinese. However, it is estimated that the percentage has doubled in recent years, primarily due to an increase in the number of migrant workers from Eastern European countries. Durham city is more diverse in terms of ethnicity due to the student population. There is also a significant population of Gypsies and Travellers who are	As 1. The Health Needs assessment for Gypsy/Roma Travellers has been completed. Action planning for the health needs assessment will be undertaken.

	is measured.	either migrant or settled in the county. There are gaps in evidence. More performance monitoring needs to be in place to illustrate the impact of activity so that we could see whether certain actions have contributed to an improved quality of life for BME groups.	
Religion or belief	Monitoring in terms of religion or belief does not routinely take place. However religion and belief is a known resilience factor for positive mental wellbeing. Service delivery will be based upon best practice and facilitate the positive aspects of religion and belief.	In County Durham over 83% of people state their religion as Christian, around 1% as either Buddhist, Hindu, Jewish, Muslim or Sikh and 16% as having either no religion or not stating their religion (Census 2001).	As 1.
Sexual orientation	Services and delivery are available to the whole population including all gay, lesbian and bi- sexual groups. Although specific work with the LGB community in relation to reducing suicide and reducing harm from drugs and alcohol is	No accurate data is available about the number of lesbian, gay and bisexual people living in County Durham. However Government and Stonewall estimates state that between 5% and 7% of the population is lesbian, gay or bisexual. This would amount to between 25,000 and 35,000 people in County Durham.	As 1.
	not explicitly referenced in the HWBP delivery plan, we need to ensure that this work is built into subsidiary plans.	Studies show that lesbian, gay and bisexual people show higher levels of anxiety, depression and suicidal feelings than heterosexuals. (Stonewall)	Actions relating to LGB community and alcohol harm reduction are built onto the existing alcohol harm

Monitoring in terms of sexual orientation does not routinely take place. Social Marketing activity is specifically aimed at different population groups to improve access and raise awareness.		reduction plan. We will ensure LGB issues are considered in the developing Public Health strategy to tackle mental health and wellbeing.
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How will this promote positive relationships between different communities?

The Delivery Plan aims to meet the population health needs of all groups and communities within County Durham. Action taken to reduce health inequalities directly impacts upon the wellbeing of individuals and their communities. Improved population health has economic benefits which contributes to the on-going sustainability of communities.

Actions to improve access to opportunities for physical activities and to widen participation in physical activity will also support community wellbeing.

The Delivery Plan contains specific actions to develop health champions and utilise community groups and the third sector to support communities to develop their own wellbeing.

Section three: Review and Conclusion

Summary: please provide a brief overview, including impact, changes, improvements and any gaps in evidence.

The Delivery Plan is specifically intended to improve the health and wellbeing for people across all protected characteristics within County Durham utilising a partnership approach in which DCC and NHS County Durham are instrumental. The actions contained within the plan have been influenced by national and local research and consultation.

DCC Actions are monitored on a quarterly basis to ensure progress is continually measured and remedial action taken. This includes corporate and service plan monitoring as well as equality monitoring.

Whilst the Delivery Plan does not appear to suggest a negative outcome for any specific population groups, it will be the impact

assessment of the delivery mechanisms which will be the most important element to ensuring that services are readily accessible by those with disabilities and are available and equitable to all population groups. Separate impact assessments by service groups should be undertaken when changes to services are planned and there are mechanisms within DCC to ensure that this will occur.

Additionally it should be noted that some actions within the Health and Wellbeing Partnership Delivery Plan also feature within the Corporate Plan which has also been Equality Impact Assessed.

Those actions in the Delivery Plan which are the led by partner agencies and community groups will be impact assessed according to their organisational policies.

It is important that all interventions are evaluated to assess whether they are reaching those most in need and are cost effective. Evidence suggests social marketing can be a powerful tool for achieving tangible and measurable impact on behaviours. A separate equality impact assessment has been undertaken on the use of social marketing. Health Impact Assessments also support this process, identifying the impact on health that key decisions/policies have. Therefore ensuring that programmes do not have a negative impact on health locally. Health Impact Assessment screenings have taken place on the overarching Sustainable Communities Strategy, Local Transport Plan 3 and Housing Strategy.

Action to be taken	Officer responsible	Target Date	In which plan will this action appear
1. Promote awareness of plan – communication strategy (e.g. County Durham News, press release, member seminars, council website)	Julia Bates Partnerships Officer – DCC Michelle Baldwin Public Health Practitioner- Partnerships – NHS County Durham	March 2012	Healthier Communities Team Plan
Equality monitoring and measures considered as part of evaluation of impact of interventions.	Director of Public Health	To be determined	Joint Strategic Needs Assessment/ Health Improvement Plan
Equality measures to be considered by other agencies within the Health and Wellbeing Partnership	Director of Public Health	To be determined	
Other formats/languages and a document summary			

available upon request.	
When will this assessment be reviewed?	To be Determined – the Delivery Plan will be reviewed by 2013 following transfer of public health activities to DCC in accordance with the Health and Social Care Bill currently progressing through Parliament. This includes the need for a Health and Wellbeing Strategy and may displace this Delivery Plan. Additionally the Government is due to publish a new Outcomes Performance Framework which may act as a catalyst for further change to this plan
Are there any additional assessments that need to be	Yes:
undertaken in relation to this assessment?	1) Evaluative framework assessing impact of physical activity
	programmes; and
	2) Use of social marketing
Lead officer:	Date:
Service equality representative:	Date:

Please email your completed Impact Assessment to the Equality team - equalities@durham.gov.uk.