

Durham County Council Equality Impact Assessment

NB: The Public Sector Equality Duty (Equality Act 2010) requires Durham County Council to have 'due regard' to the need to eliminate unlawful discrimination, harassment and victimisation, advance equality of opportunity and foster good relations between people from different groups. Assessing impact on equality and recording this is one of the key ways in which we can show due regard.

Section One: Description and Screening

Service/Team or Section	Overview and Scrutiny, Strategy, Transformation and Partnerships
Lead Officer	Stephen Gwilym – Principal Overview and Scrutiny Officer
Title	Adults Wellbeing and Health OSC – Review of Suicide Rates and Mental Health and Wellbeing in County Durham
MTFP Reference (if relevant)	N/A
Cabinet Date (if relevant)	15 November 2018
Start Date	September 2018
Review Date	July 2019

Subject of the Impact Assessment

Please give a brief description of the policy, proposal or practice as appropriate (a copy of the subject can be attached or insert a web-link):

The review was undertaken between October 2016 and March 2017 following concerns identified by the Adults Wellbeing and Health OSC during consideration of Quarterly Performance Management reports which highlighted that suicide rates for County Durham were above the National and North East average figures.

Members examined statistics around suicides and suicide rates during a three year period 2012-14 in more detail rather than wider mental health illness or public mental health statistics. They also assessed the measures that the Council and its partners have put in place to ensure improved mental health and wellbeing and which aim to reduce the incidence of suicides within County Durham.

Members considered evidence based on 4 key themes of service strategies, policies and plans of Durham County Council; NHS partners and Safe Durham Partnership together with how the community and voluntary sector is involved in supporting suicide prevention and the promotion of mental health and wellbeing.

The Review Group identified key findings and recommendations which include: the importance of developing an early suicide alert system which is able to flag up those individuals at risk of suicide and which could be used to target preventative mental health services to such individuals in a proactive manner; the importance of a co-ordinated partnership approach to ensure access to preventative mental health services and mental health crisis services is timely and responsive.

The need for partners to be able to share information and learning across organisational boundaries has also been highlighted as this is crucial to a co-ordinated approach to the delivery of successful mental health and wellbeing interventions and support services.

The Community and Voluntary sector have a huge role to play in improving health and wellbeing of the population of County Durham and the review heard evidence from a range of CVS organisations. This highlighted positive practice across the County aimed at suicide prevention and tackling some of the wider determinants of health which can adversely impact upon a person's mental health and wellbeing including relationship breakdown, loss of employment, access to housing, financial hardship and education and training. Their ability to continue to deliver projects, services and interventions during what has been a prolonged period of austerity and funding pressures was identified as a concern and the importance of targeting financial resources to those services where demonstrable outcomes can be evidenced was highlighted.

Who are the main stakeholders? (e.g. general public, staff, members, specific clients/service users):

General Public, DCC Staff, DCC Councillors, NHS Partners including CDDFT TEWV FT and North Durham and DDES CCGs, Health service recipients, Durham Constabulary, HMPrisons in County Durham, Community and Voluntary Sector Partners supporting mental health and wellbeing and suicide prevention.

Screening

Is there any actual or potential negative or positive impact on the following protected characteristics?

Protected Characteristic	Negative Impact Indicate: Y = Yes, N = No, ? = unsure	Positive Impact Indicate: Y = Yes, N = No, ? = unsure
Age	N	Y
Disability	N	Y
Marriage and civil partnership	N	Y

(workplace only)		
Pregnancy and maternity	N	Y
Race (ethnicity)	N	Y
Religion or Belief	N	Y
Sex (gender)	N	Y
Sexual orientation	N	Y
Transgender	N	Y

Please provide **brief** details of any potential to cause adverse impact. Record full details and analysis in the following section of this assessment.

N/A

How will this policy/proposal/practice promote our commitment to our legal responsibilities under the public sector equality duty to:

- eliminate discrimination, harassment and victimisation,
- advance equality of opportunity, and
- foster good relations between people from different groups?

The recommendations seek to ensure equity of access to Suicide Prevention services and Improved Mental Health and Wellbeing support services across all communities included all protected characteristics.

There are particular benefits in terms of age and gender as data indicates a higher prevalence of suicide rates for males, and the 40-49 age group. The review identified the challenges faced by the mental health trust such as engagement with hard to reach groups including LGBT+ people and Gypsy and Roma Traveller communities. Identified improvements in suicide prevention could therefore be particularly beneficial for hard to reach groups, for example by a coding system across all A&E department attendees and a review of out of hours mental health crisis services.

Evidence

What evidence do you have to support your findings?

Please **outline** your data sets and/or proposed evidence sources, highlight any gaps and say whether or not you propose to carry out consultation. Record greater detail and analysis in the following section of this assessment.

Evidence supporting the recommendations made by the AHWOSC Review Group came from the Self Harm and Suicide Audit Report 2012-14; County Durham and Darlington NHS Foundation Trust; Tees Esk and Wear Valley NHS FT; Durham Constabulary, HMP service; DCC Public Health and Adult and Health Services; Darlington MIND; If u Care Share, Single Homeless Action Initiative in Durham, County Durham Samaritans and the House of Commons Health Select Committee

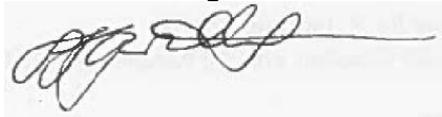
Specific evidence included:-

- Self-Harm and Suicide statistics over the three years 2012-14 broken down by Gender; Age; Employment Status; Living arrangements; method of suicide, Contact with Criminal Justice system, Contact with health services including mental health services
- Information from CDDFT in respect of A&E presentations, admissions, treatment and coding of suspected suicides/self-harm
- Information from TEWV in respect of contact with Mental Health services, assessments and case reviews of Serious Untoward Incidents within the Trust and access to mental health and wellbeing services
- Information from HM Prison service in respect of suicide prevention and awareness training amongst prison staff and the Risk assessment processes within the service
- Information from Durham Constabulary in respect of suicide prevention and awareness training amongst police officers and the Risk assessment processes within the service
- Information from CVS Partners detailing the interventional work, signposting and support services available in respect of suicide prevention and improving mental health and wellbeing

Screening Summary

On the basis of this screening is there:	Confirm which refers (Y/N)
Evidence of actual or potential impact on some/all of the protected characteristics which will proceed to full assessment?	Y
No evidence of actual or potential impact on some/all of the protected characteristics?	

Sign Off

Lead officer sign off: 	Date: 30/10/18
Service equality representative sign off: Equality and Diversity Team leader	Date: 31.10.18

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If carrying out a full assessment please proceed to section two.

If not proceeding to full assessment please return completed screenings to your service equality representative and forward a copy to **equalities@durham.gov.uk**

If you are unsure of potential impact please contact the corporate research and equalities team for further advice at **equalities@durham.gov.uk**

Section Two: Data analysis and assessment of impact

Please provide details on impacts for people with different protected characteristics relevant to your screening findings. You need to decide if there is or likely to be a differential impact for some. Highlight the positives e.g. benefits for certain groups, advancing equality, as well as the negatives e.g. barriers for and/or exclusion of particular groups. Record the evidence you have used to support or explain your conclusions. Devise and record mitigating actions where necessary.

Protected Characteristic: Age		
What is the actual or potential impact on stakeholders?	Record of evidence to support or explain your conclusions on impact.	What further action or mitigation is required?
<p>The review recommendations aim to ensure that the Council undertakes its statutory duty to develop and implement a suicide prevention strategy and action Plan.</p> <p>Recommendations will be of particular benefit in terms of age as data indicates a higher prevalence of suicide rate for the 40-49 age group.</p> <p>The development of an early alert system which potentially identifies those at risk of suicide and allows the targeting of potential interventions to such people.</p> <p>The introduction of a multi-agency approach to share learning from suicides with case conferencing.</p> <p>Linked to the early alert system detailed above - an appropriate coding/flagging system for self-harm/attempted suicide across all A&E department attendees should be promoted which identifies those potentially at risk of</p>	<ul style="list-style-type: none"> • Recommendation one That a suicide prevention strategy and action plan be developed and implemented as part of the refresh of the Public Mental Health Strategy for County Durham and that progress against the action plan be monitored by the AWHOSC. • Recommendation two The existing suicide early alert system, whilst providing excellent support and interventions for those affected by suicide after the event, needs to develop appropriate systems to flag up those at risk of suicide and which could be used to target preventative mental health services and support to such individuals. • Recommendation three A multi-agency approach to develop learning from suicides is needed with case conferences introduced for each incident with shared learning across partner agencies including adult and children's social care and health services, NHS services and those within the criminal justice system. 	

suicide and allows for proactive offers of access to mental health services and support.

A review of the referral process into mental health services will allow for clarity being available to service users on the range of services available, how to access them and the timeframes for accessing services.

A review of accessibility to out-of-hours mental health crisis service to ensure that individuals suffering from crisis episodes have timely access to support and interventions.

The proposed audit of current health and wellbeing support and services within the Community and Voluntary sector should evaluate their effectiveness and enable resources to be targeted at those interventions where demonstrable outcomes for improved mental health and wellbeing and reduced suicide risk are evident.

- **Recommendation four**

The introduction of an appropriate coding/flagging system for self-harm/attempted suicide across all A&E department attendees should be promoted which identifies those potentially at risk of suicide and allows for proactive offers of access to mental health services and support

- **Recommendation five**

The current processes for referral into mental health services be reviewed to ensure that there is clarity available to potential service users to help them to identify the range of services available, whether the services allow for self-referral as well as referral by health professionals and the associated target timeframes for accessing services.

- **Recommendation six**

The accessibility of the out-of-hours mental health crisis service be reviewed to ensure that individuals suffering from crisis episodes have timely access to support and interventions.

- **Recommendation seven**

An audit of current health and wellbeing support and services within the Community and Voluntary sector be undertaken to evaluate their effectiveness and enable resources to be targeted at those interventions where demonstrable outcomes for improved mental health and wellbeing and reduced suicide risk are evident.

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Protected Characteristic: Disability		
What is the actual or potential impact on stakeholders?	Explain your conclusion considering relevant evidence and consultation	What further action or mitigation is required?
As for Age above	As for Age above	

Protected Characteristic: Marriage and civil partnership (workplace only)		
What is the actual or potential impact on stakeholders?	Explain your conclusion considering relevant evidence and consultation	What further action or mitigation is required?
As for Age above	As for Age above	

Protected Characteristic: Pregnancy and maternity		
What is the actual or potential impact on stakeholders?	Explain your conclusion considering relevant evidence and consultation	What further action or mitigation is required?
As for Age above	As for Age above	

Protected Characteristic: Race (ethnicity)		
What is the actual or potential impact on stakeholders?	Explain your conclusion considering relevant evidence and consultation	What further action or mitigation is required?
As for Age above The review identified the challenges faced by the mental health trust such as engagement with hard to reach groups including Gypsy and Roma Traveller communities. Identified improvements in suicide prevention are likely to be particularly beneficial for	As for Age above	

hard to reach groups, for example utilising a coding system across all A&E department attendees and a review of out of hours mental health crisis services.		
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Protected Characteristic: Religion or belief		
What is the actual or potential impact on stakeholders?	Explain your conclusion considering relevant evidence and consultation	What further action or mitigation is required?
As for Age above	As for Age above	

Protected Characteristic: Sex (gender)		
What is the actual or potential impact on stakeholders?	Explain your conclusion considering relevant evidence and consultation	What further action or mitigation is required?
As for Age above Recommendations will be of particular benefit in terms of gender as data indicates a higher prevalence of suicide rate for males.	As for Age above	

Protected Characteristic: Sexual orientation		
What is the actual or potential impact on stakeholders?	Explain your conclusion considering relevant evidence and consultation	What further action or mitigation is required?
As for Age above The review identified the challenges faced by the mental health trust such as engagement with hard to reach groups including LGB people. Identified improvements in suicide prevention are likely to be particularly beneficial for	As for Age above	

hard to reach groups, for example utilising a coding system across all A&E department attendees and a review of out of hours mental health crisis services.		
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Protected Characteristic: Transgender		
What is the actual or potential impact on stakeholders?	Explain your conclusion considering relevant evidence and consultation	What further action or mitigation is required?
<p>As for Age above</p> <p>The review identified the challenges faced by the mental health trust such as engagement with hard to reach groups including transgender people. Identified improvements in suicide prevention are likely to be particularly beneficial for hard to reach groups, for example utilising a coding system across all A&E department attendees and a review of out of hours mental health crisis services.</p>	<p>As for Age above</p>	

Section Three: Conclusion and Review

Summary

Please provide a brief summary of your findings stating the main impacts, both positive and negative, across the protected characteristics.
<p>The Review Group identified key findings and recommendations which, although beneficial for all in need, could be particularly beneficial in terms of age and gender as data indicates a higher prevalence of suicide rates for males, and the 40-49 age group.</p> <p>The review identified the challenges faced by the mental health trust such as engagement with hard to reach groups including LGBT+ people and Gypsy and Roma Traveller communities. Identified improvements in suicide prevention could therefore be particularly beneficial for such hard to reach groups.</p>

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<p>Will this promote positive relationships between different communities? If so how?</p> <p>The recommendations seek to ensure equity of access to Suicide Prevention services and Improved Mental Health and Wellbeing support services across all communities included all protected characteristics.</p>
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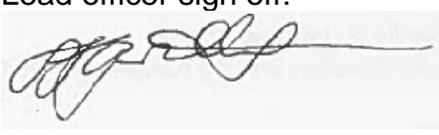
Action Plan

Action	Responsibility	Timescales for implementation	In which plan will the action appear?
Six Month review of progress against recommendations	Director of Adults and Health Services/ Director of Public Health	July 2019	TAP Service Plan

Review

Are there any additional assessments that need to be undertaken? (Y/N)	N
When will this assessment be reviewed? Please also insert this date at the front of the template	July 2019

Sign Off

Lead officer sign off: 	Date: 30/10/18
Service equality representative sign off: Equality and diversity team leader	Date: 31.10.18

Please return the completed form to your service equality representative and forward a copy to equalities@durham.gov.uk