

Equality, Diversity, Cohesion and Integration Screening



As a public authority we need to ensure that all our strategies, policies, service and functions, both current and proposed have given proper consideration to equality, diversity, cohesion and integration.

A **screening** process can help judge relevance and provides a record of both the **process** and **decision**. Screening should be a short, sharp exercise that determines relevance for all new and revised strategies, policies, services and functions.

Completed at the earliest opportunity it will help to determine:

- the relevance of proposals and decisions to equality, diversity, cohesion and integration.
- whether or not equality, diversity, cohesion and integration is being/has already been considered, and
- whether or not it is necessary to carry out an impact assessment.

Directorate: Resources	Service area: PPPU/PU
Lead person: Catherine Farrell	Contact number: 07891 271569

1. Title:

Is this a:

☐

Strategy / Policy

☒

Service / Function

☐

Other

If other, please specify

2. Please provide a brief description of what you are screening

The Health and Social Care Act 2012 will reorganise the structure of the NHS and devolve certain public health responsibilities. This consequently means the Strategic Health Authorities and Primary Care Trusts will be abolished in April 2013. Health care commissioning responsibilities will pass to Clinical Commissioning Groups and a new NHS Commissioning Board. In Leeds, public health responsibilities will pass to:

- Leeds City Council;
- the NHS Commissioning Board; and
- Public Health England (a new executive agency of the Department of Health).

Public Health England will bring together public health change at a national level, such as preparing for emergencies e.g. flu epidemics, and, will have overall responsibility for protecting the health of the population.

Leeds City Council will take on public health duties including health improvement, health

protection and health and social care service.

The transition to this new working model means that assets, liabilities (including staff and contracts) and responsibilities will transfer (as appropriate) to the three organisations by the end of March 2013 so a new operating model can commence from 1 April 2013.

3. Relevance to equality, diversity, cohesion and integration

All the council's strategies/policies, services/functions affect service users, employees or the wider community – city wide or more local. These will also have a greater/lesser relevance to equality, diversity, cohesion and integration.

The following questions will help you to identify how relevant your proposals are.

When considering these questions think about age, carers, disability, gender reassignment, race, religion or belief, sex, sexual orientation and any other relevant characteristics (for example socio-economic status, social class, income, unemployment, residential location or family background and education or skills levels).

Questions	Yes	No
Is there an existing or likely differential impact for the different equality characteristics?		X
Have there been or likely to be any public concerns about the policy or proposal?		X
Could the proposal affect how our services, commissioning or procurement activities are organised, provided, located and by whom?	X	
Could the proposal affect our workforce or employment practices?	X	
Does the proposal involve or will it have an impact on <ul style="list-style-type: none">• Eliminating unlawful discrimination, victimisation and harassment• Advancing equality of opportunity• Fostering good relations		X

If you have answered **no** to the questions above please complete **sections 6 and 7**

If you have answered **yes** to any of the above and;

- Believe you have already considered the impact on equality, diversity, cohesion and integration within your proposal please go to **section 4**.
- Are not already considering the impact on equality, diversity, cohesion and integration within your proposal please go to **section 5**.

4. Considering the impact on equality, diversity, cohesion and integration

If you can demonstrate you have considered how your proposals impact on equality, diversity, cohesion and integration you have carried out an impact assessment.

Please provide specific details for all three areas below (use the prompts for guidance).

- **How have you considered equality, diversity, cohesion and integration?**

(think about the scope of the proposal, who is likely to be affected, equality related information, gaps in information and plans to address, consultation and engagement activities (taken place or planned) with those likely to be affected)

The transition of public health duties, responsibilities and functions from Primary Care Trust to Public Health England, Leeds City Council and NHS Commissioning Boards will come into effect from 1 April 2013. This will change the shape of the organisations, their commissioning arrangements and delivery of services at a national and local level.

The move into the council focuses on a whole society approach for tackling public health for the people of Leeds. The aims of the reorganisation are:

- 1) Improve health of population
- 2) Increase life expectancy
- 3) Reduce health inequalities

Outcomes will be measured through the new Outcomes framework and will be reported to the Health and Wellbeing Board as appropriate.

The key stakeholders potentially affected by the transition are:

- 1) service users of contracts
- 2) employees of Primary Care Trust
- 3) the wider community.

The transition is being project managed and the council's project management methodology will ensure that due consideration is given to equality and diversity issues at the appropriate time and built in appropriately. The programme is being managed as two distinct projects: the wider transition, and the transfer into the council. Both have established governance arrangements and work stream leads for the key aspects of the project. For the transfer these are: communications, legal, Information Communication and Technology contracts, finance, accommodation and Human Resources. For the transition these are: core offer, intelligence, member development, operating model, NHS Commissioning Board and Public Health England, communications and engagement, and workforce and organisational development. For the transfer this approach has meant an identified individual within the council and NHS are working jointly to progress the work stream to ensure all equality and diversity issues are identified and addressed and specified timescales are met. Both groups produce checkpoint reports to monthly project group meetings and these are summarised in highlight reports to Programme Board.

At present we are awaiting guidance from central government on a number of aspects of the transition which will help to inform our approach. We are regularly checking government websites and news alerts from related public health updates. We have also made contact with colleagues in other councils to share best practice and track progress, and have built up a network of contacts to share news updates as it becomes available. Leeds is progressing well with

arrangements.

Significant effort is being made to ensure that contracts will seamlessly transfer to the council and there will not be any noticeable difference to the service user. The service provider will notice a change in the organisation paying for the service. In due course we will be writing to service providers to inform them of this (once due diligence checks on contracts transferring across are complete). Over time the move into the council will help to join up and enhance service delivery which will benefit users. In the short term contracts may be extended (where possible) to limit disruption to services but as contracts are due for renewal, new contract arrangements will be made which may result in new providers delivering services. Where this is the case service users will be consulted and/or informed of changes to service provision as appropriate.

Where service users are utilising NHS buildings e.g. accessing the resource centre, due to relocation into council premises, users will be given advanced notice of changes and made aware of alternative facilities they can use although this may be in a different location. Accommodation options appraisal will consider user requirements to make new premises as accessible as possible. User needs will be interpreted from consulting the staff involved in providing the services/facilities. It should be noted user needs will be met as far as is practically possible but within the limitations of the premises and budget available.

The transfer of staff into the council will require consultation on the change to their accommodation and on the transfer of their terms and conditions. The communications and human resources work streams will work together to provide advice and undertake the consultation (for example workshops) and communicate with staff so they are aware of developments and feel comfortable with the transfer. Closer to the time of transfer, staff will receive an induction and learning sessions to help them understand council policies and procedures.

Discussions have already been taking place with relevant staff on the requirements of premises to ensure it meets staff requirements and (where relevant) enables access to facilities for service users (for example the resource centre).

The Director of Public Health continues to send out regular emails to staff to update them on progress of the transition so they are kept informed.

- **Key findings**

(think about any potential positive and negative impact on different equality characteristics, potential to promote strong and positive relationships between groups, potential to bring groups/communities into increased contact with each other, perception that the proposal could benefit one group at the expense of another)

Overall the public health transition will have a positive impact on all equality groups and provide opportunities and benefits through improved service delivery and reducing health inequalities.

As mentioned in the previous section, services will continue to be delivered as normal in the short term so service users will receive a seamless service as the transition takes place. In the longer term contract renewals will trigger new procurements which may affect which provider is delivering a service and the nature of the service being delivered – this will be done with the requirements of the service user in mind and they will be consulted/informed as appropriate.

Primary Care Trust employees transferring into the council will be consulted on specific aspects of the transfer at an appropriate time. As we are close to determining the location of the buildings they will be moving into, the human resources and communications work stream leads will work together to consult with and communicate this to staff. Work stream leads will produce detailed action plans as appropriate, which will demonstrate how equality and diversity has been considered and will be actioned in the delivery of project activities.

Over time it is anticipated the council will undertake a strategic review of Primary Care Trust and council contracts to see how they can be aligned. This will be to enhance service delivery and ensure services are delivered in an effective and coordinated way, which may affect the provider market. At such time further Equality Impact Assessments would be undertaken to ensure equality and diversity issues are identified, considered and sufficiently addressed.

Due to the co-location of public health and council staff across the city, there will be increased joint working which will improve services through integration and the sharing of knowledge, expertise and best practice. This will enable staff to work more closely with communities and help to tackle health inequalities on a more local level.

It is not anticipated that any one group would benefit at the expense of another group.

- **Actions**

(think about how you will promote positive impact and remove/ reduce negative impact)

- 1) Timely consultation with stakeholder groups as appropriate (for example through staff briefings and work shops)
- 2) Continuation of due diligence checks on contracts transferring across to the council, and then communicating with service providers
- 3) Regularly checking for newly published governance guidance to inform the development of the programme
- 4) Regular contact with colleagues in other authorities to share best practice and track progress
- 5) Regular project group meetings take place to ensure open communication across work streams to ensure actions are completed, joint working is occurring as needed to progress the work required for transition/transfer, and issues can be identified and sufficiently addressed
- 6) Project management methodology and governance arrangements will continue to be implemented
- 7) Further detailed action plans will be developed by work stream leads as appropriate, to ensure due regard has been given to equality and diversity at an operational level for key aspects of the project.

5. If you are **not already considering the impact on equality, diversity, cohesion and integration you **will need to carry out an impact assessment.****

Date to scope and plan your impact assessment:	
Date to complete your impact assessment	
Lead person for your impact assessment (Include name and job title)	

6. Governance, ownership and approval

Please state here who has approved the actions and outcomes of the screening

Name	Job title	Date
Helena Phillips	Chief Officer – Shared Services	

7. Publishing

This screening document will act as evidence that due regard to equality and diversity has been given. If you are not carrying out an independent impact assessment the screening document will need to be published.

If this screening relates to a Key Delegated Decision, Executive Board, full Council or a Significant Operational Decision then the paperwork should be emailed to Corporate Governance and will be published along with the relevant report.

A copy of all other Equality and Diversity, Cohesion and Integration Impact Assessment's should be sent to equalityteam@leeds.gov.uk. For record keeping purposes it will be kept on file (but not published).

Date screening completed	
If relates to a Key Decision - date sent to Corporate Governance	
Any other decision – date sent to Equality Team (equalityteam@leeds.gov.uk)	