

Equality, Diversity, Cohesion and Integration (EDCI) 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 or has already been considered, and
- whether or not it is necessary to carry out an impact assessment.

Directorate: Adults and Health	Service area: Public Health
Lead person: Eleanor Clark	Contact number: 0113 378 7844

1. Title: Tender evaluation and contract award of the Tobacco Dependency Service

Is this a:

Strategy / Policy
 Service / Function
 Other

If other, please specify

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

There are currently around 100,000 people in Leeds who smoke, and every year nearly 3,500 people die and around 6,500 are admitted to hospital from a condition relating to smoking. It is the lifestyle factor that impacts the most on reduced life expectancy, health inequalities and ill health, particularly cancer, coronary heart disease and respiratory disease. The impact of tobacco is greatest in the most deprived areas of the city, not just on smokers but also on their families and communities, with smoking accounting for up to nine years of the gap in life expectancy between richest and poorest.

Smoking is also costly to those who smoke, using a significant proportion of their often-limited disposable income, and having a significant negative effect on individual earnings and employment prospects. Current smokers are 5% less likely to be employed than non-smokers and long-term smokers are 7.5% less likely to be employed. Furthermore, it is estimated that 32% of households with a smoker fall below

the poverty line, many of which will contain families, and if those smokers were to quit nearly 7,000 of households in Leeds experiencing poverty could be lifted out of poverty through income returned to the household. Despite good progress in reducing smoking prevalence in Leeds, it remains above the national average and therefore remains a local priority.

A procurement exercise has been undertaken, and following evaluation of the tender submissions, approval is being sought to award the contract to Reed Wellbeing Ltd.

3. Relevance to equality, diversity, cohesion and integration

All the council's strategies and policies, service and functions affect service users, employees or the wider community – city wide or more local. These will also have a greater or 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. Also those areas that impact on or relate to equality: tackling poverty and improving health and well-being.

Questions	Yes	No
Is there an existing or likely differential impact for the different equality characteristics?	✓	
Have there been or likely to be any public concerns about the policy or proposal?		✓
Could the proposal affect how our services, commissioning or procurement activities are organised, provided, located and by whom?		✓
Could the proposal affect our workforce or employment practices?		✓
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 		✓

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)

National and local datasets have been used to assess the impact of smoking across a range of areas, including health, income, employment and environmental in order to determine the need for the service. Alongside this, comprehensive demographic data is collected as part of the current contract, which has highlighted trends among those seeking support. This will continue to be monitored and analysed as a part of contract management.

Method statement questions covered topics including how the service will ensure access is equitable for all groups, and how the provision will be adapted to meet individual needs.

- **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)

The purpose of this service will be to reduce health inequalities, and will prioritise those who live in deprived areas of the city. Within that parameter, the service will be available to all groups.

- **Actions**

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

Through effective service promotion and engagement with key stakeholders.

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
Anna Frearson	Consultant / Chief Office in Public Health	
Date screening completed		16/09/2022

7. Publishing

Though **all** key decisions are required to give due regard to equality the council **only** publishes those related to **Executive Board, Full Council, Key Delegated Decisions** or a **Significant Operational Decision**.

A copy of this equality screening should be attached as an appendix to the decision making report:

- Governance Services will publish those relating to Executive Board and Full Council.
- The appropriate directorate will publish those relating to Delegated Decisions and Significant Operational Decisions.
- A copy of all other equality screenings that are not to be published should be sent to equalityteam@leeds.gov.uk for record.

Complete the appropriate section below with the date the report and attached screening was sent:

For Executive Board or Full Council – sent to Governance Services	Date sent:
For Delegated Decisions or Significant Operational Decisions – sent to appropriate Directorate	Date sent:
All other decisions – sent to equalityteam@leeds.gov.uk	Date sent: