# 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 or has already been considered, and
- whether or not it is necessary to carry out an impact assessment.

Directorate: Adults and Health	Service area: Health Partnerships	
Lead person:	Contact number: 07891 271 054	
1. Title: Winter At Risk 2022 – community organisation grants		
Is this a:		
□ Strategy / Policy □ Service	ce / Function X Other	
If other, please specify: 11 grants made to community organisations working with vulnerable groups of people		

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

11 'Winter At Risk' grants, ranging from £10,000 - £62,000, to be made to community organisations across the city, with a total value of £314,660, using funding from DCLG to support people who are Clinically Extremely Vulnerable to Covid-19.

The overall outcome for the Winter At Risk grants is "all people with health worries will have high quality information, advice, support and opportunities to protect and look after their social, physical, mental wellbeing". People who were previously CEV continue to experience the negative impacts of the pandemic. For example, social isolation, social anxiety and fear of crowded spaces in the wider vulnerable group and continued disruption to income and working patterns due to vulnerability to Covid. Most affected are on low incomes, in insecure employment or in high risk roles. It is important to note that these ongoing challenges are in the context of a national cost of living crisis including significant increases in energy prices. By not acting to support this vulnerable group of people, we risk of further exacerbating health inequalities over the long term

and increasing demands on our health and social care services in the short term as people's existing health conditions and mental wellbeing continue to deteriorate. We know that when this group of people are specifically supported to manage their own wellbeing, we can reduce demand on health services, improve self-management of long-term health conditions and prevent further vulnerability from developing.

Community organisations will use the funding to offer a range of support and advice for people with health worries (the majority of the group who were asked to shield during the pandemic) including benefits advice, keeping warm and 1:2:1 counselling.

## 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	Х	
equality characteristics?		
Have there been or likely to be any public concerns about the		X
policy or proposal?		
Could the proposal affect how our services, commissioning or		X
procurement activities are organised, provided, located and by		
whom?		
Could the proposal affect our workforce or employment		x
practices?		
Does the proposal involve or will it have an impact on		X
<ul> <li>Eliminating unlawful discrimination, victimisation and</li> </ul>		
harassment		
<ul> <li>Advancing equality of opportunity</li> </ul>		
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)

Our grant making has been conducted with tackling inequalities at the forefront.

In line with the ambition to improve the health of the poorest fastest, in the context of people most likely to be adversely impacted by the cost of living crisis and based on our knowledge of the cohort of people who were most likely to have the worst experiences of being CEV and continue to experience worries about their health, we have prioritised making grants to organisations who work with people who have a greater likelihood of poor health:

- due to inequalities such as lower income
- Due to living in an area of high deprivation
- Who are already experiencing poor health
- Who are part of a particular Community of Interest that are less well served, e.g. migrant communities.

#### 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)

Information and advice for people who are worried about their health that these grants will fund will be accessible across Leeds, targeted in areas of multiple deprivation.

Organisations are known to and trusted by the communities experiencing poorer health outcomes we want to support and the organisations assured us they can deliver their services in ways that are inclusive and welcoming. This information was a part key part of the grant making decision process.

Organisations supporting particular groups of people who are less well served by mainstream services have also been funded, e.g. Solace and Black Health Initiative.

Conversely, organisations in areas where communities are diverse, e.g. Space2, will offer opportunities for people to come together and socialise in a Covid-safe and supportive

way.		
•		

#### Actions

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

Organisations will continue to consider protected characteristics and ensure they are inclusive in the way deliver their advice and support through the Winter At Risk Grants. In person activities will be delivered in a way that supports people who have higher levels of anxiety due to existing ill health to engage.

Information produced by Health Partnerships to promote the advice and support, and materials offering advice and support produced by the funded organisations more broadly will be made available in a range of community languages, both written and spoken.

5. If you are <b>not</b> 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	
Rachael Loftus	Head of Regional Health Partnerships	28 <sup>th</sup> November 2022	
Date screening com	pleted	25 <sup>th</sup> November 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 <a href="mailto:equalityteam@leeds.gov.uk">equalityteam@leeds.gov.uk</a> 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 <b>Directorate</b>	Date sent:
All other decisions – sent to equalityteam@leeds.gov.uk	Date sent: