

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: Public Health | Service area: Sexual Health/ Health Protection |
| Lead person: Hannah Sowerbutts | Contact number: 0113 3786060 |

1. Title: Fast Track Cities: A commitment to end all new cases of HIV by 2030.

Is this a:

- Strategy / Policy**
 Service / Function
 Other

If other, please specify

Becoming a Fast Track City is a declaration of commitment. The Fast Track Cities Leadership Group and an associated work plan will be developed to support the ambitions.

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

The strategic development of the Fast Track City Initiative

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? | 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 main focus of a Fast Track City approach is to understand who the most at risk populations are for HIV, Hepatitis and TB; exploring clinical barriers to testing and treatment as well as listening to the lived experiences of communities most affected by blood-borne viruses, understanding the stigma and discrimination that they experience and using this to inform initiatives within the action plan.

Although we have access to good quality clinical data there is a clear need for more insight and intelligence based on peoples lived experiences. This will be addressed

through:

- Services users and third sector partners will be members of the Leadership Group and/or subgroups
- Sub-group focusing on lived experience, stigma and discrimination
- Wider consultation and engagement with people most at risk of blood borne viruses

- **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)

Our local data tells us that men that have sex with other men, black African communities and people from some newly migrated communities face inequalities in relation to exposure to HIV, Hepatitis and TB. Data also shows that people from black African communities and some newly migrated communities are more likely to have a late diagnosis of HIV.

Black African communities (in particular women) as well as Transfolke are under-represented within PrEP Provision: a drug that can be taken to prevent the user contracting HIV.

Wards within the city that have the highest number of people living with HIV within them also have high rates of deprivation.

Initial service user engagement with people living with HIV has shown that people are discriminated against within the community but also within healthcare settings because of their HIV status.

A golden thread throughout all of the Fast Track City work is to tackle stigma and discrimination that people living with blood borne viruses and TB may face by normalising testing & treatment, educating and upskilling the workforce and dispelling myths and promoting facts within communities and the wider public.

- **Actions**

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

As well as improving clinical pathways for testing and treatment a fundamental ambition of the initiative is to tackle stigma and discrimination relating to blood borne viruses through listening to and involving people with lived experience.

All learning and insight will be written up where possible and shared locally, regionally and nationally to maximise the opportunity to improve outcomes for most at risk populations.

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 |
|---------------------------------|--|----------|
| Hannah Sowerbutts | Head of Public Health – Health Protection | 24.05.23 |
| Date screening completed | | 24.05.23 |

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: 21/6/23 |
| For Delegated Decisions or Significant Operational Decisions – sent to appropriate Directorate | Date sent: |
| All other decisions – sent to equalityteam@leeds.gov.uk | Date sent: |