

1. Introduction

- 1.1 An Equality Impact Assessment (EIA) is a careful examination of a proposed policy, strategy, initiative, service or function to see if it could affect some groups unfavourably, especially minority groups who may experience inequality, discrimination, social exclusion or disadvantage. It applies equally to internal and external polices, procedures, services and functions. We are required to undertake EIA for each workstream/initiative within the Turnaround Plan.
- 1.2 The equality duties provide a framework to ensure that unlawful discrimination is eliminated and equality of opportunity promoted. Currently the law requires Equality Impact Assessments to be undertaken in relation to race, disability and gender duties. However the Equality Bill has now completed its journey through Parliament and confirms in law best practice that Equality Impact Assessments cover all aspects of equality. Peterborough PCT's Equalities Schemes require regular Equality Impact Assessments to be undertaken and has always covered all areas of equalities, including race, disability and gender but also covering age, sexual orientation, religious and cultural beliefs
- 1.3 This guidance is to assist staff in undertaking Equality Impact Assessments. when developing or reviewing policies/plans, procedures or guidelines, development and delivery of services and functions. Impact Assessments are required to be undertaken on policies, strategies, services and functions, when these are being developed or reviewed.

2. Purpose and Scope of this Policy

- 2.1 The purpose of the Equality Impact Assessment is to examine the extent to which a policy, strategy, service or function may impact, either negatively or positively, on any groups of the community and, where appropriate, recommend alternative measures to ensure equal access.
- 2.2 Equality Impact Assessments will be carried out:
 - When developing new policies/plans, procedures, services and functions.
 - When reviewing existing policies, strategies, services and functions.

3. Definitions

- 3.1 Peterborough Primary Care Trust has defined a policy as: A policy is a statement which guides decision making based on the organisation's mission, objectives and strategies. It sets out the general aim of the organisation in a specified area and includes objectives, responsibilities and arrangements for implementation and monitoring.
- 3.2 The Commission for Racial Equality defines a policy as: Policies are sets of principles or criteria that define the different ways in which an organisation carries out its role or functions and meets its duties.
 - 3.2 The CRE goes on to state that policies can be formal or informal, written or 'custom and practice', so this can include procedures and guidelines.



The best guidance is to always undertake an Initial Screening Equality Impact Assessment if you are unsure.

- 3.3 Peterborough Primary Care Trust has defined a service as: A department or branch of the organisation that provides specified care.
- 3.4 Peterborough Primary Care Trust has defined a function as: The actions and activities assigned to, or required/expected of, a person, group or organisation.

4. Undertaking the Equality Impact Assessment

4.1 Step 1 Initial Screening

Identify the purpose/aim of the policy, strategy, service and function.

Gather information and data that is already available

Measuring the effectiveness of the impact assessment

An assessment of the impact or effects on different communities

4.2 Step 2 Gathering Information

Talk to the Performance Team to see if there is any local data already in place that gives a breakdown by Ethnicity, disability, age, gender. Check whether any clinical audits have been undertaken. Look to see if there is any national data available.

The evidence gathered should give enable you to make a judgement on whether the policy, service, function is likely to have an adverse impact on any particular group. If the answer is **yes** then a full **Equality Impact Assessment** must be undertaken.

If the answer is **no** then the Initial Screening Form must be passed to the Chief Executives Office (Commissioning) or the Information Governance and Policy Manager (Provision) for publication.



Appendix 1 – Step 1 Initial Screening Form – Equality Impact Assessment

What are the aims and objectives or purpose of the workstream/initiative?	Decommission Equitable Access to Primary Care Service (Alma Road).
Who will benefit from the policy, strategy, service or function?	All registered and un-registered patients living in Peterborough.
Who are the main stakeholders?	PCT, 3-Well, patients currently accessing Alma Road.
What are the desired outcomes?	 The rationalisation of the urgent care services will simplify the route of access. Walk in service provision will no longer be offered in competing locations in Peterborough. Through the continued promotion of other primary care services, there will be good care provision available to all patients – including vulnerable and excluded groups. Savings made from rationalised services contributing to financial turnaround programme.
What factors could detract from the desired outcomes?	 Poor primary care access with GPs not meeting the demand for walk in services. Unregistered population not adequately provided with primary care when needed who may then create demand on other existing services. Health care needs of vulnerable and excluded groups not met by project. The disruption of having to register at a new GP practice and to build relationships with a new GP and other practice staff. In particular this will be a second change for the small number of patients who have recently registered at Alma Road following the Millfield



	Road closure.
	 Some patients may find accessing walk in services similar to those offered by Alma Road difficult due to the extra distance to the City Care Centre
What factors could contribute to the desired outcomes?	 Full engagement from GPs to offer a full primary care walk in service to registered and unregistered patients.
	 Support from GP leaders in Peterborough for the PCT's recommendations based on the fact the Alma Road service is not being fully utilised, and clinical services available elsewhere have the capacity to treat those that are using the service.
	 A well planned patient consultation process to engage with patients making clear the PCTs rationale for recommending the closure of Alma Road.
	 A marketing event as part of the wider consultation process to promote the 11 practices close to Alma Road, the patient services they offer and assistance with registering patients at these practices.
	 PCT to use the GP contract more robustly to ensure all GP practices are offering full essential services to registered and unregistered patients.
	 Use of Choose Well material to educate patients regarding the range of urgent care services still available to patients.
Who is responsible for the policy, strategy, service or function?	Paul Whiteside/Sue Oakman/Kyle Cliff/Diane Siddle/Dr R. Withers/Chris Palmer/Caroline Hall/Richard Mills/Sandra Pryor
Have you consulted on the policy, strategy, service or function? and if so with whom? If not why not?	The consultation process commenced on the 6 th August 2010 for 12 weeks.



Which groups of the population do you think will be affected by this policy, service or function?		No
Minority ethnic people (this includes Gypsy Traveller)		
Women		
Men	\square	
People in religious/faith groups	\square	
Disabled people	\square	
Older people	\square	
Children and young people	\square	
Lesbian, gay, bisexual and transgender people	\square	
People of low income	\square	
People with mental health problems	\square	
Homeless people	\square	
People with caring responsibilities	\square	
People involved in criminal justice system	\square	
Staff	\square	
Any other groups	\square	

Double click over the boxes to enable them to be checked

What information and evidence do you have about the groups that you have selected above?

Information on the patient groups who may be affected by this proposal has been taken from the PCT Joint Strategic Needs Assessment (Chapter 4 – Population and Chapter 5 – Socioeconomic and Cultural Details)

This is further supplemented by minimum datasets from the current providers of Alma Road which provides some additional information on the patient groups currently accessing these services.

Consider: Demographic data, performance information, recommendations of internal and external inspections and audits, complaints information, staff survey reports, stakeholder and public engagement feedback etc



Double click over the boxes to enable them to be checked

What information and evidence do you have about the impact on groups that you have selected above? For example on their access to physical and or mental health services, lifestyle, learning, social or physical environment. Examples may be:

a young person's ability to access young people friendly health services – how do you know that what you are proposing will not impact on this? Vulnerable adults (e.g.rough sleepers or individuals with no fixed abode) unable to register with a GP; services for people with disabilities or older people client centred and easily accessible – how do you know that what you propose will or will not impact –what would be the impact if any? Services respecting religious beliefs – will any changes impact on this...? Information on changes proposed delivered in accessible formats; staff groups not representative of the communities they serve.

The patient groups listed above will not be detrimentally affected due to the proposal as the number of registered patients at Alma Road is relatively low and could easily be accommodated through the large number of close-by GP practices. Patients will be given information about a process of re-registering at these other practices, and NHS Peterborough will facilitate this process.

One local practice (Millfield Medical Centre), provides services specifically for the newly arrived population in Peterborough and have employed additional multi lingual staff to support this work.

Other urgent care services are available to patients. These include the surrounding GP practices as well as the Walk-in Centre at the City Care Centre.

Consider: Demographic data, performance information, recommendations of internal and external inspections and audits, complaints information.



Summary				
 Positive impacts (note the groups affected) The rationalisation of the urgent care services will simplify the route of access. Walk in service provision will no longer be offered in competing locations in Peterborough. Through the continued promotion of other primary care services, there will be good care provision available to all patients – including vulnerable and excluded groups. Savings made from rationalised services contributing to financial turnaround programme. 	 Negative impacts (note the groups affected) The disruption of having to register at a new GP practice and to build relationships with a new GP and other practice staff. Some patients may find accessing walk in services similar to those offered by Alma Road difficult due to the extra distance to the City Care Centre. Unregistered population not adequately provided with primary care when needed who may then create demand on other existing services. . 			
Recommendations It is recommended that the Equitable Access to Primary Medical Care Service (Alma Road) is closed.				

Peterborough	NHS
Primary Care Trust	

Actions to be taken (include name of person responsible for implementing the actions and timescale)				
To be overseen by steering group and unplanned care programme board.				
Does this Plan need to progress to a Full Equality Impact Assessment?				
Managers signature Date				