APPENDIX C



Equality & Human Rights Impact Assessment (EHRIA)

This Equality and Human Rights Impact Assessment (EHRIA) will enable you to assess the **new**, **proposed or significantly changed** policy/ practice/ procedure/ function/ service** for equality and human rights implications.

Undertaking this assessment will help you to identify whether or not this policy/practice/ procedure/ function/ service** may have an adverse impact on a particular community or group of people. It will ultimately ensure that as an Authority we do not discriminate and we are able to promote equality, diversity and human rights.

Before completing this form please refer to the EHRIA <u>guidance</u>, for further information about undertaking and completing the assessment. For further advice and guidance, please contact your <u>Departmental Equalities Group</u> or <u>equality@leics.gov.uk</u>

**Please note: The term 'policy' will be used throughout this assessment as shorthand for policy, practice, procedure, function or service.

Name of policy being assessed: Department and section: Adults & Communities Strategic Planning & Commissioning Name of lead officer/ job title and others completing this assessment: Contact telephone numbers: Name of officer/s responsible for implementing this policy: Date EHRIA assessment started: 20/06/2016		
Department and section: Adults & Communities Strategic Planning & Commissioning Name of lead officer/ job title and others completing this assessment: Contact telephone numbers: Name of officer/s responsible for implementing this policy: Date EHRIA assessment started: 20/06/2016	Key	/ Details
Department and section: Adults & Communities Strategic Planning & Commissioning Name of lead officer/ job title and others completing this assessment: Contact telephone numbers: Name of officer/s responsible for implementing this policy: Date EHRIA assessment started: 20/06/2016		
Department and section: Adults & Communities Strategic Planning & Commissioning Name of lead officer/ job title and others completing this assessment: Contact telephone numbers: Ontact telephone numbers: Adults & Communities Strategic Planning and Commissioning Officer Ontact telephone numbers: Amanda Price – Interim Head of Service, Strategic Commissioning and Market Development Date EHRIA assessment started: 20/06/2016	Name of policy being assessed:	Integrated commissioning of mental health
Name of lead officer/ job title and others completing this assessment: Contact telephone numbers: Name of officer/s responsible for implementing this policy: Date EHRIA assessment started: Strategic Planning & Commissioning and Commissioning Officer Alison Maullin, Strategic Planning and Commissioning Officer Commissioning Officer Amanda Price – Interim Head of Service, Strategic Commissioning and Market Development		resilience and recovery hubs
Name of lead officer/ job title and others completing this assessment: Contact telephone numbers: Name of officer/s responsible for implementing this policy: Date EHRIA assessment started: Strategic Planning & Commissioning and Commissioning Officer Alison Maullin, Strategic Planning and Commissioning Officer Commissioning Officer Amanda Price – Interim Head of Service, Strategic Commissioning and Market Development		
Name of lead officer/ job title and others completing this assessment: Contact telephone numbers: Name of officer/s responsible for implementing this policy: Date EHRIA assessment started: Strategic Planning & Commissioning and Commissioning Officer Alison Maullin, Strategic Planning and Commissioning Officer Commissioning Officer Amanda Price – Interim Head of Service, Strategic Commissioning and Market Development		
Name of lead officer/ job title and others completing this assessment: Contact telephone numbers: Name of officer/s responsible for implementing this policy: Date EHRIA assessment started: Strategic Planning & Commissioning and Commissioning Officer Alison Maullin, Strategic Planning and Commissioning Officer Commissioning Officer Amanda Price – Interim Head of Service, Strategic Commissioning and Market Development	Department and section:	Adults & Communities
Name of lead officer/ job title and others completing this assessment: Contact telephone numbers: Name of officer/s responsible for implementing this policy: Date EHRIA assessment started: Alison Maullin, Strategic Planning and Commissioning Officer Amanda Price – Interim Head of Service, Strategic Commissioning and Market Development 20/06/2016	Department and section.	
Contact telephone numbers: Name of officer/s responsible for implementing this policy: Date EHRIA assessment started: Commissioning Officer 0116 3055604 Amanda Price – Interim Head of Service, Strategic Commissioning and Market Development 20/06/2016		Character is a mining a commission in
Contact telephone numbers: Name of officer/s responsible for implementing this policy: Date EHRIA assessment started: Commissioning Officer 0116 3055604 Amanda Price – Interim Head of Service, Strategic Commissioning and Market Development 20/06/2016		
Contact telephone numbers: Name of officer/s responsible for implementing this policy: Date EHRIA assessment started: Commissioning Officer 0116 3055604 Amanda Price – Interim Head of Service, Strategic Commissioning and Market Development 20/06/2016	Name of the Laffin and the Laff	Alices Maullin Chatenia Diamina and
Contact telephone numbers: Name of officer/s responsible for implementing this policy: Amanda Price – Interim Head of Service, Strategic Commissioning and Market Development Date EHRIA assessment started: 20/06/2016		
Name of officer/s responsible for implementing this policy: Amanda Price – Interim Head of Service, Strategic Commissioning and Market Development Date EHRIA assessment started: 20/06/2016	others completing this assessment:	Commissioning Officer
Name of officer/s responsible for implementing this policy: Amanda Price – Interim Head of Service, Strategic Commissioning and Market Development Date EHRIA assessment started: 20/06/2016		
Name of officer/s responsible for implementing this policy: Amanda Price – Interim Head of Service, Strategic Commissioning and Market Development Date EHRIA assessment started: 20/06/2016		
implementing this policy: Strategic Commissioning and Market Development Date EHRIA assessment started: 20/06/2016	Contact telephone numbers:	0116 3055604
implementing this policy: Strategic Commissioning and Market Development Date EHRIA assessment started: 20/06/2016	-	
implementing this policy: Strategic Commissioning and Market Development Date EHRIA assessment started: 20/06/2016		
implementing this policy: Strategic Commissioning and Market Development Date EHRIA assessment started: 20/06/2016		
Date EHRIA assessment started: 20/06/2016	Name of officer/s responsible for	Amanda Price – Interim Head of Service,
Date EHRIA assessment started: 20/06/2016	implementing this policy:	Strategic Commissioning and Market
		Development
	Date FHRIA assessment started:	20/06/2016
Data FUDIA	Date Linkin assessment started.	20,00,2010
Data FUDIA		
Data FUDIA and a second a second of the		
	D (
Date EHRIA assessment completed:	Date EHRIA assessment completed:	

Section 1: Defining the policy

Section 1: Defining the policy

You should begin this assessment by defining and outlining the scope of this policy. You should consider the impact or likely impact of the policy in relation to all areas of equality, diversity and human rights, as outlined in Leicestershire County Council's Equality Strategy.

1 What is new or changed in this policy? What has changed and why?

The County Council and CCGs currently each commission separate services for mental health recovery. It is proposed that future services be jointly commissioned, with a locality model and a greater focus on building resilience and community support for people with mental health difficulties (and their carers).

For the County Council, this means reinvestment of currently funded services into a different service model. The new service model will be a partnership between commissioners, service providers and people who use services, to embed the ideas and principles of recovery into local communities and ways of working¹. This will make services fit for the future and support people to build a satisfying and fulfilling life beyond illness² (without necessarily eliminating all the symptoms of that illness).

The proposals have been developed following public consultation by the Clinical Commissioning Collaborative in 2015, and a series of stakeholder workshops between July 2015 and May 2016. They have also been informed by views emerging from the County Council's "Making It Real" workstream, and the mental health focus group convened in June 2016. The statutory partners and stakeholders have been supported in this work through facilitation by ImROC³ (Implementing Recovery through Organisational Change) a programme that is a new approach to helping people with mental health problems.

The final proposals will be shaped by the outcomes of public consultation planned for July – September 2016.

Does this relate to any other policy within your department, the Council or with other partner organisations? *If yes, please reference the relevant policy or EHRIA. If unknown, further investigation may be required.*

The Adult Social Care Strategy 2016-2020 outlines the vision and strategic direction of social care support over the next four years.

¹ http://www.imroc.org/wp-content/uploads/8Supporting-recovery-quality-and-outcomes-briefing-final-for-website-3-March.pdf

² http://www.rcpsych.ac.uk/pdf/recovery%20is%20for%20all.pdf

³ http://www.imroc.org/about-us/

The Medium term Financial Strategy 2016-2020 sets out the financial targets required for the council to achieve a balanced budget. It includes a targeted savings requirement of £150,000 per annum from 2017 onwards. The Better Care Together five year Strategic Plan sets out the aims for health and social care to jointly deliver change in order to improve services through strengthening primary, community and voluntary sector care to deliver integrated support and ensure more people are supported at home or in the community.

Who are the people/ groups (target groups) affected and what is the intended change or outcome for them?

The greatest impact will be upon people with mental health conditions who are currently users of mental health drop ins, inreach support and peer support services. These are provided for people over the age of 18 with a diagnosed mental health condition (there is no upper age limit, but there are separate services for people with a diagnosis of dementia).

The current provision has been the subject of a strategic review, which concluded that there is insufficient monitoring data to determine whether or not the service achieved the required outcomes. It is clear however that the service is not operating to its funded anticipated capacity and that numbers of people using the service have fallen since the model was reconfigured in 2014. Future services will be provided in collaboration with health in order to strengthen preventative approaches within wider mental health services, develop local recovery networks and to minimise duplication across the sector. This will involve reinvestment of health funding into the new model, that is currently used to commission a range of support from voluntary sector providers. This will provide an opportunity to increase capacity whilst managing demand in a joined-up and cost-effective way which will achieve value for money. This will help to ensure that timely support is available for those who need it, whilst supporting resilience and recovery and avoiding dependence on statutory provision.

Will this policy meet the Equality Act 2010 requirements to have due regard to the need to meet any of the following aspects? (Please tick and explain how)

	Yes	No	How?
Eliminate unlawful discrimination, harassment and victimisation	x		The consultation will be open to all and equal consideration will be given to all responses. The consultation will help to gain insight into any areas where discrimination could be occurring.
Advance equality of opportunity between different groups	х		The commissioning proposals aim to offer more equitable access to resilience and recovery support services through a locality model which is flexible to respond to local need, including support for any cohort with identified protected characteristics.

Foster good relations between different groups	x	The proposals outline a community-based model which relies upon the development of "Hubs", and upon local partners and stakeholders working together to promote community relationships and mutual support.

Section 2: Equality and Human Rights Impact Assessment (EHRIA) Screening

Section 2: Equality and Human Rights Impact Assessment Screening

The purpose of this section of the assessment is to help you decide if a full EHRIA is required.

If you have already identified that a full EHRIA is needed for this policy/ practice/ procedure/ function/ service, either via service planning processes or other means, then please go straight to <u>Section 3</u> on Page 7 of this document.

	esearch and Consultation		
5.	Have the target groups been consulted about the following?	Yes	No*
			X
	 a) their current needs and aspirations and what is important to them; 		
			X
	b) any potential impact of this change on them		
	(positive and negative, intended and unintended);		
			X
	c) potential barriers they may face		
6.	If the target groups have not been consulted directly, have representatives been consulted or research explored (e.g. Equality Mapping)?		х
7.	Have other stakeholder groups/ secondary groups (e.g. carers of service users) been explored in terms of potential unintended impacts?	X	
8.	*If you answered 'no' to the question above, please use the what consultation you are planning to undertake, or why yo be necessary.	•	
	A report will go to Cabinet on 18 th July to seek permiss public consultation (25 th July – 25 th September) to estable	ion for a 9 v	veek e's views

on the proposed joint commissioning and its potential impact upon them. This will be done jointly under the "Better Care together" banner, to include the 3 local CCGs (Leicester City, East Leicestershire and Rutland, and West Leicestershire) and the 3 local authorities (Leicester city, Leicestershire County, and Rutland). The results will be separately analysed so that each local authority can understand the outcomes from its own area.

This joint consultation exercise will build upon what has already been learned from the Clinical Commissioning Collaborative's consultation exercise in the summer of 2015, and subsequent stakeholder workshops between July 2015 and May 2016. These activities concluded that locality based resilience and recovery services are preferred and can offer the best opportunity to strengthen preventative approaches within wider mental health services, develop local recovery networks and to minimise duplication across the sector.

The public consultation will be open to the general public and will be promoted through partner organisations to seek as wide a response as possible. There will also be targeted engagement activity through presentations and visits to stakeholder groups (eg mental health drop-ins, carers groups) to ensure that people who may be most affected have every opportunity to understand and respond to the proposals.

	Section 2 B: Monitoring Impact					
9.	Are there systems set up to:	Yes	No			
	a) monitor impact (positive and negative, intended and unintended) for different groups;	х				
	b) enable open feedback and suggestions from different communities	х				

Note: If no to Question 8, you will need to ensure that monitoring systems are established to check for impact on the protected characteristics.

Section 2

C: Potential Impact

10.

Use the table below to specify if any individuals or community groups who identify with any of the 'protected characteristics' may potentially be affected by this policy and describe any positive and negative impacts, including any barriers.

	Yes	No	Comments
Age	Х		Proposals for future commissioning relate to all adults over 18. Leicestershire JSNA 2015 highlights the

			increasing numbers of people over 65 with common mental health disorders.
Disability	X		The proposals relate to the provision of community recovery services for adults with mental health needs. It will be important to examine the proposed model with stakeholders, particularly users of the service and their carers, in order to judge, as far as is possible, its fitness to improve both engagement and outcomes.
Gender Reassignment		X	Ongoing monitoring of future services will be required to ensure that services are accessible and inclusive, and have appropriate links to specialist services.
Marriage and Civil Partnership		х	As above
Pregnancy and Maternity	x		Locality based support can identify people at risk and navigate mothers to more specialist support for mental health conditions arising from pregnancy or childbirth.
Race	X		It is proposed that new services will focus on achieving personal outcomes, and recognised that the local model of delivery may require adjustment to do so (eg targeted information work)
Religion or Belief	х		Locality hubs should be better placed to address the cultural needs of local communities
Sex	х		Men are less likely to access mental health support, therefore there will be a requirement to proactively target resilience initiatives at men aged 15-49 (highest rates of suicide)
Sexual Orientation		X	Ongoing monitoring of future services will be required to

		ensure that services are accessible and inclusive, and have appropriate links to specialist services.
Other groups e.g. rural isolation, deprivation, health inequality, carers, asylum seeker and refugee communities, looked after children, deprived or disadvantaged communities	X	The proposed locality model is intended to achieve much closer involvement with local communities and facilitate access to support for people who may face additional barriers to recovery. The proposed support will be available to carers of people with mental health difficulties, and will support parity of esteem of mental and physical health problems through an holistic approach to wellbeing.
Community Cohesion	х	The proposals require making best use of community resources and networks and should therefore promote community cohesion.

11.

Are the human rights of individuals <u>potentially</u> affected by this proposal? Could there be an impact on human rights for any of the protected characteristics? **(Please tick)**

Explain why you consider that any particular <u>article in the Human Rights Act</u> may apply to your policy/ practice/ function or procedure and how the human rights of individuals are likely to be affected below: [NB. Include positive and negative impacts as well as barriers in benefiting from the above proposal]

	Yes	No	Comments
Part 1: The Convention- Right	s and I	Freedo	oms
Article 2: Right to life		Х	
Article 3: Right not to be tortured or treated in an inhuman or degrading way	х		A requirement of the proposals is to promote mental health awareness and thereby reduce stigma.
Article 4: Right not to be subjected to slavery/ forced labour		х	
Article 5: Right to liberty and security		Х	
Article 6: Right to a fair trial		Х	

	Article 7: No punishment without law		X			
	Article 8: Right to respect for private and family life	Х		people to living inde communit	esals aim to recover are ependently sy, and for to make in	nd remain in their their carers
	Article 9: Right to freedom of thought, conscience and religion		х			
	Article 10: Right to freedom of expression		Х			
	Article 11: Right to freedom of assembly and association		Х			
	Article 12: Right to marry		X			
	Article 14: Right not to be discriminated against	Х		aim to ens		intentions of access
	Part 2: The First Protocol					
	Article 1: Protection of property/ peaceful enjoyment		X			
	Article 2: Right to education		х			
	Article 3: Right to free elections		Х			
Secti						
	ecision	000n f	to I	Yes	No	Unknown
12.	Is there evidence or any other re suggest that:	ason	ıo	res	NO	Unknown
	a) this policy could have a different affect or adverse impact on any section of the community;				x	
	b) any section of the community may face barriers in benefiting from the proposal				x	
13.	Based on the answers to the que policy	estions	s abo	ve, what is the	e likely impa	act of this
	No Impact Positive Impact	t x	Neut	ral Impact	Negative Impact Ur	Impact or

	: If the decision is 'Negative Impac quired.	t' or 'Impact Not Known	' an EHRIA Report
14.	Is an EHRIA report required?	Yes x	No 🗔
	A full EHRIA report and action plan will be produced, in recognition that this is a proposed change to current services and impacts should therefore be assessed in detail and addressed appropriately.		

Section 2: Completion of EHRIA Screening

Upon completion of the screening section of this assessment, you should have identified whether an EHRIA Report is required for further investigation of the impacts of this policy.

Option 1: If you identified that an EHRIA Report <u>is required</u>, continue to <u>Section 3</u> on Page 7 of this document to complete.

Option 2: If there are <u>no</u> equality, diversity or human rights impacts identified and an EHRIA report <u>is not required</u>, continue to <u>Section 4</u> on Page 14 of this document to complete.

Section 4: Sign off and scrutiny

Upon completion, the Lead Officer completing this assessment is required to sign the document in the section below.

It is required that this Equality and Human Rights Impact Assessment (EHRIA) is scrutinised by your <u>Departmental Equalities Group</u> and signed off by the Chair of the Group.

Once scrutiny and sign off has taken place, a depersonalised version of this EHRIA should be published on Leicestershire County Council's website. Please send a copy of this form to louisa.jordan@leics.gov.uk, Members Secretariat, in the Chief Executive's department for publishing.

Section 4 A: Sign Off and Scrutiny
Confirm, as appropriate, which elements of the EHRIA have been completed and are required for sign off and scrutiny.
Equality and Human Rights Assessment Screening $\boxed{\chi}$
Equality and Human Rights Assessment Report
1 st Authorised Signature (EHRIA Lead Officer): La Meda. Date: 29 TH June 2016
2 nd Authorised Signature (DEG Chair):
Date: