

Integrated contraception and sexual health services re-commission

Evidence based equality analysis

Main aims, purpose and outcomes and how does it fit in with the wider aims of the organisation:

Cheshire West and Chester Council inherited the responsibility for commissioning sexual health services when Public Health moved from the Primary Care Trust into the Local Authority. Previous historic arrangements mean that currently this service is commissioned from three National Health Service providers and one voluntary sector provider. Our intention is to seek a single provider for the whole geography.

The existing services have been reviewed and the Council intends to re-commission all sexual health services from 2014. This re-commission will encompass all elements of sexual health services for which Public Health are responsible, for adults and young people, in Cheshire West and Chester.

The scope of the services currently included in this re-commission are:

- Contraception
- Sexually Transmitted Infection testing and treatment
- Human Immunodeficiency Virus (HIV) testing
- Psychosexual counselling
- Outreach services
- Young people's sexual health services
- HIV prevention and support for those with a positive HIV diagnosis

- Sexual health promotion

The above services will also be required to be targeted at key groups: vulnerable/at risk young people, men who have sex with men, under 25's and over 50's.

The specification for this service will have a strong requirement for flexible provision, for effective engagement of young people and adults which puts them at the centre of service developments and promotes self management of their health and wellbeing. This will include ensuring appropriate access for different groups in appropriate and accessible locations. It also has clear requirements in terms of compliance with equality legislation and human rights and to go further in terms of actively reviewing and addressing equality issues on a regular basis. Equality and diversity training for staff will be a requirement in the specification and the provider will have to report on this.

Lead officer: Jayne Fortune, Health Improvement Practitioner Advanced, Public Health

Stakeholders: Existing provider organisations, service users, potential service users, Clinical Commissioning Groups, NHS England, local pharmaceutical committee, local medical committee, Looked After Children's Services, childrens and adults commissioners, Learning Disability Services, safeguarding, elected members, respective Council services (internal procurement, legal, finance).

Equality analysis is a valuable tool to help embed equality into everything we do

While process is important, equality analysis is essentially about outcomes

Lack of evidence of discrimination is not evidence of a lack of discrimination

It is not acceptable to say that a policy is applied uniformly to all groups and is therefore fair and equal. Applying a policy or procedure consistently may result in differential outcomes for different groups.

For each of the areas below, an assessment needs to be made on whether the policy has a positive, negative or neutral impact, and brief details of why this decision was made and notes of any mitigation should be included. Where the impact is negative, this needs to be given a high, medium or low assessment. It is important to rate the impact of the policy based on the current situation (i.e.

disregarding any actions planned to be carried out in future).

High impact – a significant potential impact, risk of exposure, history of complaints, no mitigating measures in place etc.

Medium impact –some potential impact exists, some mitigating measures are in place, poor evidence

Low impact – almost no relevancy to the process, e.g. an area that is very much legislation led and where the Council has very little discretion

	Neutral	Positive	Negative
Target group / area			
Race and ethnicity (including Gypsies and Travellers; migrant workers, asylum seekers etc.)		Potentially positive if creativity in service delivery is encouraged through the re-commission. The service will be expected to provide borough wide service access with targeted interventions with seldom heard groups – this will include Traveller communities etc. It is anticipated appropriate training will be developed in a number of key areas to ensure the selected provider provides an equitable service.	
Disability (as defined by the Equality Act - a person has a disability if they have a physical or mental impairment that has a substantial and long-term adverse effect on their ability to carry out normal day-to-day activities)		Following extensive review of the Sexual Health Needs assessment and the available local equality profiles all services are required to be delivered in a variety of venues (including outreach and community venues). The service is explicitly asked to ensure that there are no barriers to accessing the service and be accessible by various means provided outside of normal office hours including weekends and evenings. The	

		<p>service must be designed to and be sufficiently flexible to meet the demands of young people and adults with Special Educational Needs and disabilities (including printed literature and promotional materials). Accessibility will be a core aspect of the service specification specifically in relation to physical access to buildings and facilities.</p> <p>It is anticipated appropriate training will be developed in a number of key areas to ensure the selected provider provides an equitable service.</p>	
Gender	The new service will be required to demonstrate their ability to offer services equally to both genders.	Following extensive review of the Sexual Health Needs assessment and the available local equality profiles the impact is Positive as the service is being asked to deliver in a wider range of locations.	
Gender reassignment		Due to the nature of the service, there will be staff who are able to ensure a positive service is delivered. The service is required to ensure there is a pathway in place for those who express an interest in gender reassignment are appropriately referred. The Sexual Health Needs assessment and the available local equality profiles have influenced and supported the service specification.	
Religion and belief	The service is required to demonstrate awareness and		

	sensitivity to religious and cultural beliefs.		
Sexual orientation (including heterosexual, lesbian, gay, bisexual)	The service will be required to demonstrate their ability to offer services to people of any sexual orientation.	The service is required to offer support to those identified as being Lesbian, Gay, Bisexual and Transgender (LGBT) and provide targeted outreach services and health promotion to men who have sex with men (MSM). Again The Sexual Health Needs assessment and the available local equality profiles have influenced and supported the service specification in this respect. It is anticipated appropriate training will be developed in a number of key areas to ensure the selected provider provides an equitable service.	
Age (children and young people aged 0 – 24, adults aged 25 – 50, younger older people aged 51 – 75/80; older older people 81+. The age categories are for illustration only as overriding consideration should be given to needs)	The service is required to develop a service model that is conducive to a lifecourse approach to sexual health.	The service is required to provide relevant and effective services for sexually active people of all ages. The service will be accessible to all ages and recognises that people may be sexually active irrespective of age. The specification will have a targeted element aimed at 50 plus in response to a growing need	
Rural communities	The service is required to understand modes of transport and transport routes and acceptable service delivery locations for young people, families, adults and communities which is vital in ensuring flexible, innovative and	Services are required to be delivered in a variety of venues (including outreach and community venues). The service is explicitly asked to ensure that there are no barriers to accessing the service and be accessible by various means provided outside of normal office hours including weekends and evenings.	

	accessible service delivery times/ locations. The location of services should support access on foot, by bicycle and by public transport to prevent access becoming a barrier to accessing services.		
Areas of deprivation	The service is designed to have targeted interventions and levels of support aligned to levels of need and to take account of additional needs associated with social and emotional deprivation.		
Human rights	The service is required to demonstrate compliance with the Human Rights Act as it applies to young people and adults.		
Health and wellbeing (consider both the wider determinants of health such as education, housing, employment, environment, crime and transport, as well as the possible impacts on lifestyles and the effect there may be on health and care services)		The intended outcome of this service is improved health and wellbeing focussed on young people and adults and should have a positive impact on lifestyles for service users, their families and their communities. The service is required to conduct risk assessments and provide brief interventions on a range of wider health issues and make referrals where necessary.	
Procurement/partnership (if project due to be carried out by contractors/partners etc, identify steps taken to ensure equality compliance)	The service will be obliged through contracts to ensure equality compliance and actively review and address	There should be awareness of equality issues amongst staff at all levels. Equality compliance should be improved through embedding equality	

	equality issues on a regular basis.	in new contract.	
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Evidence: Sexual Health Needs Assessment

Action plan:

Actions required	Key activity	Priority	Outcomes required	Officer responsible	Review date
Review recommission	Ensure service is operating as expected	Medium	Equality considerations identified above working as expected	Jayne Fortune	Integ

Sign off	
Lead officer:	Jayne Fortune
Approved by Head of Service:	Caryn Cox
Moderation and/or Scrutiny	
Date:	Virtual moderation by Strategic Commissioning Equality Group March 2014
Date analysis to be reviewed based on rating (high impact – review in one year, medium impact - review in two years, low impact in three years)	Three years

Please forward the completed Equality Analysis to the Equality and Diversity Managers for publishing on the Council's website