

## Appendix 1

(June 2011)

### EQUALITY, HEALTH & AND HUMAN RIGHTS IMPACT ASSESSMENT FORM

This form is to be used in conjunction with the Equality, Health & and Human Rights Impact Assessment Guidelines.

#### Section 1: Policy/Function/Decision (PFD) Details

A **PFD** is understood in the broad sense including the full range of functions, activities and decisions the council is responsible for.

Name of PFD:	West Dunbartonshire CHCP Commissioning Strategy for Rehabilitation Services 2012-2021
Lead Department & other departments/ partners involved:	CHCP
Responsible Officer	Chris McNeill
Impact Assessment Team	Chris McNeill, John Russell, Margaret walker, Janis Howie, Mary Angela McKenna, Ailsa King
Is this a new or existing PFD?	New
Start date: (the assessment should be started prior to PFD development/drafting or at the early stages of review): November 2010	
End date (this should allow for the assessment to inform decision-making): January 2012	
What are the main aims of the <b>PFD</b> ?	To deliver rehabilitation and enablement services in West Dunbartonshire which are person centred and outcome based and which emphasises independence, self management and productive activity. Services aim contribute to early intervention by emphasising enablement and active living.
Who are the main target groups/ who will be affected by the <b>PFD</b> ?	Adults who require range of rehabilitation services provided by the CHCP
Relevance (of <b>PFD</b> to the general equality duties and equality groups, also record if there is no relevance giving reasons/ evidence)	
Yes/ No/ Don't Know Reasons: Yes	
	If yes, complete all sections, 2-9

	If no, complete only sections 8-9
	If don't know, complete sections 2& 3 to help assess relevance
<b>Section 2: Evidence</b> Please list the available evidence used to assess the impact of this PFD, including the sources listed below. Please also identify any gaps in evidence and what will be done to address this.	
<b>Available evidence:</b>	
Consultation/ Involvement with community, including individuals or groups or staff as relevant	<p>Consultation with West Dunbartonshire Acquired Brain Injury Strategy Group, Physical Disability Strategy Group and West Dunbartonshire Older People Strategy Group as well as range of Community Groups from within and including the Public Partnership Forum.</p> <p>A number of planning days and workshop sessions have been conducted with a range of staff across the CHCP to engage with them and ensure they are involved in the design of rehabilitation and enablement services across health and social work.</p> <p>Key Partners including GPs, health and social work , primary care and acute services are members of the Rehabilitation and Enablement Steering Group, the group with the strategic remit to oversee the development and implementation of the final Strategy.</p>
Research and relevant information	<p>CHCP Community Profiles</p> <p>West Dunbartonshire Disability Profile</p> <p>A delivery Framework for Adult Rehabilitation in Scotland 2007</p> <p>Reshaping Care for Older People 2010</p>
Officer knowledge	Range of Officer knowledge considered from all teams which contribute to rehabilitation services with strong emphasis reported for person centred approaches and flexible and enabling services to meet all needs through a tiered approach.
Equality Monitoring information – including service and employee monitoring	Demographic projections related to age and gender considered and impact on rehabilitation considered. Equalities monitoring related to Age, Gender, Disability and Ethnicity is collected through the Single Shared Assessment paperwork.

Feedback from service users, partner or other organisation as relevant	Consultation with West Dunbartonshire Acquired Brain Injury Strategy Group and West Dunbartonshire Older People Strategy Group as well as range of Community Groups from the Public Partnership Forum		
Other			
<b>Are there any gaps in evidence?</b> Please indicate how these will be addressed			
Gaps identified	No		
Measure to address these	No		
<i>Note: Link to Section 6 below Action Plan to address any gaps in evidence</i>			
<b>Section 3: Involvement and Consultation</b> Include involvement and consultation relevant to this PFD, including what has already been done and what is required to be done, how this will be taken and results of the consultation. Please outline details of any involvement or consultation, including dates carried out, protected characteristics. Also include involvement or consultation to be carried out as part of the developing and implementing the policy.			
Details of consultations	Date	Findings	Characteristics
			Race
			Sex
			Gender Reassignment
PPF West Dunbartonshire Acquired Brain Injury Strategy Group Physical Disability	October 2010  2010-2011	There is a need to focus more on the personalisation agenda  There is also a need to ensure that wider issues are included such as suitability and availability of housing, access to transport, leisure services and	Disability

Strategy Group	2010-2011	worklessness	
West Dunbartonshire Older People Strategy Group	2010-2011	There is a need to focus on person centred approaches  There is also a need to ensure that wider issues are included such as suitability and availability of housing, access to transport, leisure services and worklessness	Age
			Religion/ Belief
			Sexual Orientation
			Civil Partnership/ Marriage
			Pregnancy/ Maternity
			Health
			Other
<i>Note: Link to Section 6 below Action Plan</i>			

## Section 4: Analysis of positive and Negative Impacts

Protected Characteristic	Positive Impact	Negative Impact	No impact
Race			√
Sex			√
Gender Re-assignment			√
Disability	√due to consistency of approach and development of pathways for care. Emphasis on co-production and enablement		
Age	√ Due to “joined up service approached and emphasis on community based provision		
Religion/ Belief			√
Sexual Orientation			√
Civil Partnership/ Marriage			√

Pregnancy/ Maternity			√
Socio- economic	√ Due to focus on personalisation and on ensuring that access to services is based on need and circumstances considered e.g aids and adaptations		
Human Rights			
Health	√ Purpose and vision clearly defineP1		
Other			
<i>Note: Link to Section 6 below Action Plan in terms of addressing impacts</i>			

### Section 5: Addressing impacts

Select which of the following apply (use can choose more than one) and give a brief explanation – to be expanded in Section 6: Action Plan

1. No major change	No changes required for strategy
2. Continue the PFD	
3. Adjust the PFD	
4. Stop and remove the PFD	
Give reasons:	
<i>Note: Link to Section 6 below Action Plan</i>	

### Section 6: Action Plan

Please describe any action which will be taken following the assessment in order to;

- reduce or remove any negative impacts,
- promote any positive impacts, or
- gather further information or evidence or further consultation required

Action	Responsible person (s)	Intended outcome	Date for completion	Protected Characteristic
Consideration of equalities issues to be	SS	Development of self – directed support and personalisation	Dependent on legislative	All

addressed in self – directed support and personalisation strategy		strategy which considers equalities issues	<b>timescales</b>	
Ensure Single Shared Assessment Data is reviewed	<b>CM</b>	to confirm equalities positive impact is as expected and to ensure that no adverse impacts identified	<b>Ongoing</b>	ALL
				Gender Reassignment
				Disability
				Age
				Religion/ Belief
				Sexual Orientation
				Civil Partnership/ Marriage
				Pregnancy/ Maternity
				Socio- economic
				Human Rights
				Health
				Other
<b>Are there any negative impacts which cannot be reduced or removed?</b> please outline the reasons for continuing PFD				
No				
<b>Section 7: Monitoring and review</b>				
Please detail the arrangements for review and monitoring of the policy				
How will the PFD be monitored? What equalities monitoring will be put in place?	Via CHCP Service Plans			
When will the policy be reviewed?	2014			



Is there any procurement involved in this PFD? Yes/No	Yes	
<b>Section 8: Signatures</b>		
The following signatures are required:		
Lead/ Responsible Officer:	Signature: S Sengupta	Date: 15/12/2011
EIA Trained Officer:	Signature: A King	Date: 15/12/2011
<b>Section 9: Follow up action</b>		
<b>Service planning:</b> Link to service planning/ covalent – update your service plan/ covalent actions accordingly	Signature:	Date:
Give details: <b>Insert name and number of covalent action and or related PI</b>		
<b>Committee Reporting:</b> complete relevant paragraph on committee report and provide further information as necessary	Signature: S Sengupta	Date: January 2012