

Equalities Screening Record Form

Date of Screening: October 2011	Directorate: Adult Social Care & Health	Section: Older People & Long Term Conditions
1. Activity to be assessed	Payment by Results in Substance Misuse Services Pilot Project	
2. What is the activity?	<input type="checkbox"/> Policy/strategy <input type="checkbox"/> Function/procedure <input type="checkbox"/> Project <input type="checkbox"/> Review <input checked="" type="checkbox"/> Service <input type="checkbox"/> Organisational change	
3. Is it a new or existing activity?	<input type="checkbox"/> New <input checked="" type="checkbox"/> Existing	
4. Officer responsible for the screening	Jillian Hunt	
5. Who are the members of the EIA team?	Mira Haynes, Alison Cronin, Jo Alderson Jillian Hunt	
6. What is the purpose of the activity?	<p>The current contractual arrangements for Substance Misuse Services are based on a fixed contractual budget. Current performance monitoring focuses on the number of people in treatment and the number that have been retained in treatment for 12 weeks or more and does not focus enough on the need for people to recover from addictions and become re-integrated into society. The proposed changes will mean that the Service Provider will be paid according to a set tariff for each person using the service allocated against an initial up front payment for taking the person on to the caseload followed by payments made against agreed outcomes. Moving to a service based on outcomes aims to increase the number of people leaving treatment drug free, with suitable and stable accommodation, in education employment and training, who have seen improvements in the health and well being and have been diverted from crime. This impact assessment will ensure that the changes to service delivery will not adversely impact any person using the services who falls into one of the nine Protected Characteristics Group as outlines in The Equality Act 2010.</p>	
7. Who is the activity designed to benefit/target?	Any resident of Bracknell Forest aged over 18 who misuses drugs and/or alcohol, their families, friends or carers.	
8. a Racial equality - Is there an impact? What kind of equality impact may there be? Is the impact positive or adverse or is there a potential for both? If the impact is neutral please give a reason.	N	There is a neutral impact related to Racial Equality in respect of this activity. People from other racial backgrounds already access the current services and steps are taken to ensure that they do not feel excluded.
8. b What evidence do you have to support this? E.g equality monitoring data, consultation results, customer satisfaction information etc.	Nationally the ethnicity of people using our services is monitored. In 2010/11 95% of adults in treatment were white British. In previous years the percentage of white British has been lower at 93% which is more reflective of the ethnic breakdown of the population generally. People who use our services from other ethnic backgrounds have been involved in consultations.	
9. a Gender equality - Is there an impact? What kind of equality impact may there be? Is the impact positive or adverse or is there a potential for both? If the impact is neutral please give a reason.	Y √	Women are already an under represented group within our treatment population. The impact of this activity should have a positive impact on this as the new service provider will be expected to increase the number of options for outreach services and also extend the opening hours for the service which will benefit all of the people who use our services.
9. b What evidence do you have to support this?	Only 26% of the people in treatment are female which is similar to the National picture.	
10. a Disability equality - Is there an impact? What kind of equality impact may there be? Is the impact positive or adverse or is there a potential for both? If the impact is neutral please give a reason.	N	There is a neutral impact related to disability equality in respect of this activity. The current services take into account learning, physical, sensory, and mental health disabilities when delivering services and this will continue to be the case.

10. b What evidence do you have to support this?	Information is available in a range of mediums, the building is accessible to people with physical disabilities and there is a mental health practitioner within the team. The new service provider will be expected to continue to ensure that this is the case. Currently less than 1% of our treatment population are disabled.		
11. a Age equality - Is there an impact? What kind of equality impact may there be? Is the impact positive or adverse or is there a potential for both? If the impact is neutral please give a reason.		N	There is a neutral impact in relation to age equality in respect of this activity. This service is for people aged over 18 who misuse drugs and/or alcohol. There is no upper age limit to using the services.
11. b What evidence do you have to support this?	Parents with young children who do not have child care arrangements in place can be seen in a separate building to ensure that children do not come into contact with the wider treatment population. There is a separate services for people under the age of 18. Nationally the drug using population is ageing and this is also the case locally. In 2010/11 23% of the treatment population were aged between 25-29, only 3% were aged 18, 2% 19 and only 1% were over 55.		
12. a Religion and belief equality - Is there an impact? What kind of equality impact may there be? Is the impact positive or adverse or is there a potential for both? If the impact is neutral please give a reason.		N	There is a neutral impact in relation to religion and belief equality in respect of this activity. Service providers are required to ensure that they take into account the differing needs in respect of religion or belief.
12. b What evidence do you have to support this?	As a service we celebrate different religions festivals with events which people who use the services can attend and learn more about customs and beliefs. Each year we hold an event to celebrate Dwali as this is a festival celebrated by staff members. Members of staff prepare authentic Indian food for people to sample and provide information on Dwali. We also ensure that the diaries that we provide to people who use the services contain the dates of all the major religious festivals.		
13. a Sexual orientation equality - Is there an impact? What kind of equality impact may there be? Is the impact positive or adverse or is there a potential for both? If the impact is neutral please give a reason.		N	There is a neutral impact in relation to sexual orientation in respect of this activity.
13. b What evidence do you have to support this?	National data is collected in respect of sexual orientation to ensure that there is equality of access.		
14. Please give details of any other potential impacts on any other group (e.g. those on lower incomes/carers/ex-offenders) and on promoting good community relations.	There are specific services for carers and these will continue to form part of the new contract. There are specific outcomes in respect of reducing offending/re-offending.		
15. If an adverse/negative impact has been identified can it be justified on grounds of promoting equality of opportunity for one group or for any other reason?	The focus on increasing the number of women in treatment as women are underrepresented in treatment which is a national trend.		
16. If there is any difference in the impact of the activity when considered for each of the equality groups listed in 8 – 14 above; how significant is the difference in terms of its nature and the number of people likely to be affected?	There is no difference in the impact on any of the nine protected characteristics groups as a result of the launch of this pilot.		
17. Could the impact constitute unlawful discrimination in relation to any of the Equality Duties?	Y	N √	No
18. What further information or data is required to better understand the impact? Where and how can that information be obtained?			

19. On the basis of sections 7 – 17 above is a full impact assessment required?	Y	N √	There is a neutral impact on eight of the nine protected characteristic group. There will be a positive impact in respect of female services users but there will not be an adverse impact related to this.
20. If a full impact assessment is not required; what actions will you take to reduce or remove any potential differential/adverse impact, to further promote equality of opportunity through this activity or to obtain further information or data? Please complete the action plan in full, adding more rows as needed.			
Action	Timescale	Person Responsible	Milestone/Success Criteria
Increase the number of outreach options available to increase the number of women accessing the service.	April 2012 – end of contract	Commissioner/Service provider	An increase in the percentage of women accessing the service
Continue to ensure that the service providers provide the Council with equality monitoring data by protected characteristics.	Ongoing	Commissioner/Service provider	Regular equality monitoring reports
21. Which service, business or work plan will these actions be included in?	Adult Social Care & Health, Substance Misuse Strategy		
22. Have any current actions to address issues for any of the groups or examples of good practice been identified as part of the screening?	As this is a pilot project it will be used to inform good practice		
23. Chief Officers signature.	Signature:  Date: 12 th October 2011		
24. Which PMR will this screening be reported in?	Q3 Adult Social Care PMR 2011-12		