

# Equality Analysis (EIA) Form (Appendix 1)

## A) Description

### Name of service, function, policy (or other) being assessed

Herefordshire Pubic Health Nursing Service 0-19 years (up to 25 yrs. for disabled children)

### Directorate or organisation responsible (and service, if it is a policy)

Community wellbeing/Public Health

### Date of assessment

15/12/2022

### Names and job titles of people carrying out the assessment

Julia Stephens - Senior Commissioning Officer

### Accountable person

Matt Pierce – Director for Public Health

### What are the aims or main purpose of the service, function or policy? What does it provide and how does it provide it?

The council is recommissioning the service as the current contract ends March 31<sup>st</sup> 2024. The service will have an indicative budge not exceeding £2,494,127 per annum, funded through the Public Health ring fenced grant.

The Health and Social Care Act 2012 sets out a local authority's statutory responsibility for commissioning public health services for children and young people aged 0 to 19 years. The Best start in life government guidance sets out how the council can improve public health outcomes for children, young people and families.

The public health 0-19 service delivers the Healthy Child Programme which aims to bring together health, education and other key partners to deliver an effective programme for prevention and support. Whilst recognising the contribution of other partners, there are some elements of the programme which require clinical expertise and knowledge that can only be provided through services led and provided by the public health nursing workforce, for example, health visiting and school nursing teams.

The early years (0-5 years element) has regulations which require all families with babies to be offered **5 mandated health visitor reviews** before their child reaches 2 and a half years old. The core public health offer for all children includes: • child health surveillance (including infant physical examination) and development reviews • child health protection

and screening • information, advice and support for children, young people and families or carers • early intervention and targeted support for families with additional needs • health promotion and prevention by the multi-disciplinary team • defined support in early years and education settings for children with additional and complex health needs • additional or targeted public health nursing support as identified in the Joint Strategic Needs Assessment, for example, support for children in care, young carers, or children of military families.

The public health nursing services provide universal and targeted support. Due to their close relationships with families or carers and community settings, including early years and education settings, the service is key in supporting Herefordshire's early help and prevention system. The Healthy Child Programme offers every family an evidence-based intervention programme consisting of screening tests, immunisations, developmental reviews and information and guidance to support parenting and making healthy choices. The programme aims to deliver important health checks and information that children and families need to receive if they are to achieve their optimum health and wellbeing.

The Healthy Child Programme is universal in reach. It sets out a range of public health inputs in local places to build healthy communities for families and children and to reduce inequalities. It includes a schedule of interventions which range from services for all through extra help to intensive support. A core part of the service is the early year's high impact areas which are: • supporting transition to parenthood and the early weeks • supporting maternal and infant mental health • supporting breastfeeding (initiation and duration) • supporting healthy weight and healthy nutrition • improving health literacy; reducing accidents and minor illnesses • supporting health, wellbeing and development. Ready to learn, narrowing the 'word gap' . The 5-19 years high impact areas build on early identification of children in need of support and focus on key priority areas, including: • supporting resilience and wellbeing • improving health behaviours and reducing risk taking • supporting healthy lifestyles • supporting vulnerable young people and improving health inequalities • supporting complex and additional health and wellbeing needs • supporting self-care and improving health literacy. How these are delivered on the ground should reflect local needs and can be adapted to best meet the needs of the population it serves.

The current service was commissioned 4 years ago as a 0-19 years Integrated Public Health Nursing Service. The service has been extended by a further one year and it is time to recommission.

### **Location or any other relevant information**

The service will be countywide.

### **List any key policies or procedures to be reviewed as part of this assessment.**

N/a

### **Who is intended to benefit from the service, function or policy?**

Universal service to Herefordshire families 0-19 years (up to 25 years for disabled children)

## Who are the stakeholders? What is their interest?

Service users  
Service Providers  
Service Providers' employees  
ICB  
GP Practices  
Community & voluntary sector organisations  
Health & Social Care Practitioners  
Elected members  
Early years providers  
Schools  
Other health professionals  
Maternity services

## B) Partnerships and Procurement

**If you contract out services or work in partnership with other organisations, Herefordshire Council remains responsible for ensuring that the quality of provision/ delivery meets the requirements of the Equality Act 2010, i.e.**

- **Eliminates unlawful discrimination, harassment and victimisation**
- **Advances equality of opportunity between different groups**
- **Fosters good relations between different groups**

**What information do you give to the partner/contractor in order to ensure that they meet the requirements of the Act? What information do you monitor from the partner/contractor in order to ensure that they meet the requirements of the Act?**

Herefordshire Council expects all contracted providers to comply with the Equality Act 2010 and have their own Equality policies available.

During the contract period the service will be monitored quarterly to ensure that the required outcomes are delivered and the equality considerations are observed.

**Are there any concerns at this stage that indicate the possibility of inequalities/negative impacts? For example: complaints, comments, research, and outcomes of a scrutiny review. Please describe:**

Negative impacts.

The remodelled service is not intended to have any negative impacts; however, the following considerations will be regularly monitored.

The primary aims of a revised service model are early prevention & promotion of health and wellbeing in children 0-19 years (25 yrs with CWD). The budget for the service is not increasing since the service was last commissioned in 2018 and may be reduced further. This may affect the way the service is delivered with more innovative, cost effective options such as on line consultations with families/young people and options for a revised staffing skill mix. A reduction in budget may affect staffing numbers and there may be a risk of redundancy to existing members of staff.

## C) Information

### **What information (monitoring or consultation data) have you got and what is it telling you?**

An on line consultation took place in the autumn of 2021 with 60 respondents. Face to face consultations took place in the community with over 56 families. Two stakeholders events took place in 2021 & November 2022.

Schools are being further consulted through an on line survey in January 2023, to better understand their views on the service and emerging needs.

Many of the consultees in the early consultation in the autumn 2021 (post pandemic and lockdowns) had a very different experience of the service due to the effects of the pandemic on NHS services and many had new born babies during the pandemic.

To summarize, families were generally not happy with the service that they had received. Feedback reported difficulties in getting hold of the service, calls not being returned, visits not being done on time, inconsistent advice and guidance given, not being aware who their health visitor or school nurse was. Some reported having very good experiences with the service and reported that staff were very supportive, helpful and were in regular contact with them. The school nursing service feedback showed that many primary schools were not aware there was a school nursing service or who their school nurse was. They also reported that when they had had contact with the service it was very good but they were very aware that the service was under resourced and not enough school nurses to support all schools so they didn't tend to use them.

In light of these findings, consultees' feedback was taken on board and the service was immediately put on a service improvement plan. The service has now actioned all the areas of improvement highlighted in the plan. The results have demonstrated that, despite the service meeting the majority of its targets in relation to national performance indicators, the service was not aware of service user feedback or what the experience of the service was for the users.

The Prevention and Early Help in Communities project (early 2022), also undertook consultation and engagement with stakeholders (children, families and organizations) to inform the longer-term strategy of "preventing escalation of need by intervening early to help with over 1,000 consultees consulted. This has all been fed into the analysis of need and will be used to help re-shape the service redesign phase.

## D) Assessment/Analysis

**Describe your key findings (e.g. negative, positive or neutral impacts - actual**

or potential). Also your assessment of risk.

Strand/community	Impact
Race	<p>The impact of the recommissioning and service redesign is assessed as negative. This is a universal service and meets with all families residing in Herefordshire.</p> <p>However, this will be monitored over the contractual term to ensure compliance with the Equality Act and that service users are treated with dignity and respect. Therefore, the impact of the recommissioning of the Public Health Nursing service is assessed as neutral.</p>
Disability	<p>The impact of the recommissioning and service redesign is assessed as negative. This is a universal service and meets with all families residing in Herefordshire.</p> <p>However, this will be monitored over the contractual term to ensure compliance with the Equality Act and that service users are treated with dignity and respect. Therefore, the impact of the recommissioning of the Public Health Nursing service is assessed as neutral.</p>
Age	<p>The impact of the recommissioning and service redesign is assessed as negative. This is a universal service and meets with all families residing in Herefordshire.</p> <p>However, this will be monitored over the contractual term to ensure compliance with the Equality Act and that service users are treated with dignity and respect. Therefore, the impact of the recommissioning of the Public Health Nursing service is assessed as neutral.</p>
Sex	<p>The impact of the recommissioning and service redesign is assessed as negative. This is a universal service for all children and young people 0-19 years (up to 25 years for disabled children).</p> <p>However, this will be monitored over the contractual term to ensure compliance with the Equality Act and that service users are treated with dignity and respect. Therefore, the impact of the recommissioning of the Public Health Nursing service is assessed as neutral.</p>

Faith/religion	<p>The impact of the recommissioning and service redesign is assessed as negative. This is a universal service for all families and children and young people 0-19 years (up to 25 years with). This service is a universal service offer, open to all.</p> <p>However, this will be monitored over the contractual term to ensure compliance with the Equality Act and that service users are treated with dignity and respect. Therefore, the impact of the recommissioning of the Public Health Nursing service is assessed as neutral.</p>
Marriage/civil partnership	<p>This information is not currently collected by the service for the council.</p> <p>The impact of the recommissioning of the service is assessed as neutral.</p> <p>However, this will be monitored over the contractual term to ensure compliance with the Equality Act and that service users are treated with dignity and respect.</p>
Gender reassignment	<p>There is no official estimate of the number of transsexual people either locally or nationally.</p> <p>This information is not currently routinely collected by the service for the council.</p> <p>However, this will be monitored over the contractual term to ensure compliance with the Equality Act and that service users are treated with dignity and respect.</p>
Sexual orientation	<p>There are no single, reliable estimates of sexual orientation in the UK.</p>
Pregnant women & women on maternity leave	<p>The impact of the recommissioning and service redesign is assessed as negative. This is a universal service.</p> <p>However, this will be monitored over the contractual term to ensure compliance with the Equality Act and that service users are treated with dignity and respect.</p>

**E) Consultation**

**Did you carry out any consultation?**

**Yes**

**Describe other research, studies or information used to assist with the assessment and your key findings.**

Data reported from current service provider (quarterly dashboards and management reports). Consultation with the public via survey & on line, consultation via survey with schools, engagement events with stakeholders (x 2).

**Do you use diversity monitoring categories? Yes  No**   
*(if No you should use this as an action as we are required by law to monitor diversity categories)*

**If yes, which categories?**

- Age
- Disability
- Gender Reassignment
- Marriage & Civil Partnership
- Pregnancy & Maternity
- Race
- Religion & Belief
- Sex
- Sexual Orientation

**What do you do with the diversity monitoring data you gather? Is this information published? And if so, where?**

Monitoring data will be collated as part of routine contract management.

**F) Conclusions**

	<b>Action/objective/target OR justification</b>	<b>Resources required</b>	<b>Timescale</b>	<b>I/R/S/J</b>
a)	Ensure that service providers assessors routinely record diversity monitoring indicators and protocols	Staff time, internal and partners	Quarterly as per contract	I
b)	Review feedback from complaints, handbacks etc. during contractual period to see if there is a disproportionate impact on those that share a protected characteristic.	Staff time, internal	Quarterly as per contract	I
c)	Ensure service specification changes indicates potential outreach locations and retains focus on community wide provision.	Staff time, Internal	Prior to procurement	I

- (I)** *Taking immediate effect.*
- (R)** *Recommended to Council/Directors through a Committee or other Report\*.*
- (S)** *Added to the Service Plan.*
- (J)** *To be brought to the attention of the Equality Manager.*