

Equality impact assessment for financial plans

Name and role of officers completing the EIA	<p>Jenny Theed, Strategic Director, Children and Specialist Services, Sirona Care & Health</p> <p>Amanda Phillips, Director, Human Resources, Sirona Care & Health</p> <p>Samantha Jones, Corporate Policy Manager – Equality & Diversity, B&NES Council</p> <p>Derek Thorne – Assistant Director, Communications and Corporate Affairs, BANES PCT</p>
Financial Plan	<p>Paulton Minor Injuries Unit – Reduction of Opening Hours</p>
Name of Directorate and Service	<p>Sirona Care and Health</p>
Date of Assessment	<p>27 March 2012</p>

This Equality Impact Assessment (EAI) is used to systematically analyse a financial plan to identify what impact or likely impact it will have on different groups within the community. It should identify any discriminatory or negative consequences for a particular group or sector of the community but will also highlight beneficial impacts.

It is intended that this is used as a working document throughout the EIA process, with a final version including the action plan section being published on Sirona / the Council and/or NHS B&NES' websites.

1. Identify the scope of the financial plan		
	Key questions	Answers / Notes
1.1	<p>Briefly describe the aims of the financial plan including</p> <ul style="list-style-type: none"> • How the financial plan is delivered and by whom • If responsibility for its implementation is shared with other services or organisations • Intended outcomes 	<ul style="list-style-type: none"> • <i>To facilitate the delivery of the service's responsibility within the Sirona Care & Health business plan 2011-2016 to deliver £40K savings to contribute to a total of £9million savings during the five year business plan</i> • <i>To ensure maximum economy, efficiency and effectiveness in the use of financial resources</i> • <i>To facilitate proactive, strategic management of Sirona's budget</i> • NB <i>all Sirona community service areas are being reviewed to ensure they contribute to the Sirona business plan. Medical services are expected to attain lower percentage savings than 'back office' functions.</i>
1.2	<p>Provide brief details of the scope of the financial plan being reviewed, for example:</p> <ul style="list-style-type: none"> • Is it a new financial or review of an existing one? • Is it a national or legislative requirement? • How much room for review is there? 	<p>It is proposed to reduce the Paulton Minor Injuries Unit (PMIU) opening hours from the current 24 hour opening to opening times of 8am – 9.30pm seven days per week.</p> <p>This will help to provide £40K savings with limited disruption to service delivery and patient care.</p> <p>PMIU is not an emergency unit; currently anyone with acute injury will attend an accident and emergency unit (usually Royal United Hospital, Bath (RUH) for Paulton residents). 90%+ current PMIU patients have minor injury 10%- current PMIU patients have minor ailments</p>
1.3	<p>Do the aims of the financial plan conflict with any other financial plan or service activity of the Council or Partnership?</p>	<p>No.</p>

1.4	What steps have you taken to ensure your financial plan does not <i>inadvertently</i> affect another service?	Data collected shows maximum 4 people per week use the PMIU between 9.30pm-8am 'The pressure times' at RUH are from 1pm to 8 pm ie not the proposed hours for the reduction
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2. Consideration of available data, research and information

You need to show that you have made decisions based on evidence. Monitoring data and other information can help you analyse whether you are developing fair financial proposals: a decision which is informed by relevant local and national data about equality is a better quality decision. Please consider the availability of the following as potential evidence:

- Demographic data and other statistics, including census findings
- Recent research findings
- Results from recent consultation or surveys
- Service user monitoring data (including ethnicity, gender, disability, religion/belief, sexual orientation and age)
- Information from relevant groups or agencies, for example trade unions and voluntary and community organisations
- Analysis of records of enquiries about your service, or complaints or compliments about them
- Recommendations of external inspections or audit reports

	Key questions	Data, research and information that you can refer to
2.1	What equality training have those who developed the financial plan received?	Sirona Care & health have a standard that all employees undertake 3 yearly Equality and diversity training. Senior managers involved in the decision making for this proposal are up to date with their training
2.2	What is the equality profile of the employees who will be affected by this financial plan? Are there any particular staffing issues? (e.g. high proportion of female workers etc)	There are three staff that will be affected. It is not appropriate to detail their equality profile as they would easily be identified. All staff are band 6 register nurses with an extensive training component. They are expert practitioners who will be redeployed into the day rota, thus bringing their knowledge and expertise to improve the skills of the day nursing staff. The result will be that the three expert staff will be able to provide treatment to more acutely ill people during day rotas.

2.3	If there are proposed staffing reductions: what are the potential knock-on effects of this on other service areas including other public services where we collectively serve our citizens?	All three staff will be redeployed into existing vacancies. There will be no redundancies.
2.4	What is the equality profile of service users who will be affected by this financial plan?	<p>Ethnicity of patients attending PMIU over last 12 months</p> <ul style="list-style-type: none"> 80.22% White British 18.35% Not recorded 0.82% White other 0.19% White Irish 0.13% Not stated 0.06% Asian or Asian British Indian 0.05% Mixed white and Black African 0.05% Other Black background 0.03% Other Asian 0.02% Mixed White and Black Caribbean 0.02% Mixed White and Asian 0.02% Mixed other 0.02% Asian or Asian British Pakistani 0.02% Asian or Asian British Bangladeshi 0.02% Black or Black British African

2.5	What do you know about service users' needs in relation to this service area? (e.g. results of customer satisfaction surveys, results of previous consultations)	<p>Table 5: Estimated Resident Population for B&NES Mid 2004¹</p> <table border="1"> <thead> <tr> <th data-bbox="792 212 981 240">Ethnic Group</th> <th data-bbox="1496 212 1765 336">Total Population in B&NES⁸ (Mid 2004 estimates) 000's</th> <th data-bbox="1832 212 1995 240">Percentage</th> </tr> </thead> <tbody> <tr> <td data-bbox="792 355 927 384">All people</td> <td data-bbox="1592 355 1671 384">172.2</td> <td data-bbox="1883 355 1944 384"></td> </tr> <tr> <td data-bbox="792 392 1077 421">People: White: British</td> <td data-bbox="1592 392 1671 421">158.3</td> <td data-bbox="1883 392 1944 421">91.9</td> </tr> <tr> <td data-bbox="792 435 1055 464">People: White: Irish</td> <td data-bbox="1608 435 1655 464">1.3</td> <td data-bbox="1883 435 1944 464">0.75</td> </tr> <tr> <td data-bbox="792 477 1151 505">People: White: Other White</td> <td data-bbox="1608 477 1655 505">5.2</td> <td data-bbox="1883 477 1944 505">3.0</td> </tr> <tr> <td data-bbox="792 520 1352 549">People: Mixed: White and Black Caribbean</td> <td data-bbox="1608 520 1655 549">0.7</td> <td data-bbox="1883 520 1944 549">0.4</td> </tr> <tr> <td data-bbox="792 563 1319 592">People : Mixed: White and Black African</td> <td data-bbox="1608 563 1655 592">0.2</td> <td data-bbox="1883 563 1944 592">0.1</td> </tr> <tr> <td data-bbox="792 606 1211 635">People: Mixed: White and Asian</td> <td data-bbox="1608 606 1655 635">0.6</td> <td data-bbox="1883 606 1944 635">0.3</td> </tr> <tr> <td data-bbox="792 649 1160 678">People: Mixed: Other Mixed</td> <td data-bbox="1608 649 1655 678">0.5</td> <td data-bbox="1883 649 1944 678">0.3</td> </tr> <tr> <td data-bbox="792 692 1279 721">People: Asian or Asian British: Indian</td> <td data-bbox="1608 692 1655 721">1.0</td> <td data-bbox="1883 692 1944 721">0.6</td> </tr> <tr> <td data-bbox="792 735 1319 764">People: Asian or Asian British: Pakistani</td> <td data-bbox="1608 735 1655 764">0.3</td> <td data-bbox="1883 735 1944 764">0.2</td> </tr> <tr> <td data-bbox="792 778 1359 807">People: Asian or Asian British: Bangladeshi</td> <td data-bbox="1608 778 1655 807">0.2</td> <td data-bbox="1883 778 1944 807">0.1</td> </tr> <tr> <td data-bbox="792 821 1352 850">People: Asian or Asian British: Other Asian</td> <td data-bbox="1608 821 1655 850">0.3</td> <td data-bbox="1883 821 1944 850">0.2</td> </tr> <tr> <td data-bbox="792 865 1330 893">People: Black or Black British: Caribbean</td> <td data-bbox="1608 865 1655 893">0.7</td> <td data-bbox="1883 865 1944 893">0.4</td> </tr> <tr> <td data-bbox="792 908 1294 936">People: Black or Black British: African</td> <td data-bbox="1608 908 1655 936">0.6</td> <td data-bbox="1883 908 1944 936">0.3</td> </tr> <tr> <td data-bbox="792 951 1350 979">People: Black or Black British: Other Black</td> <td data-bbox="1608 951 1655 979">0.1</td> <td data-bbox="1883 951 1944 979">0.06</td> </tr> <tr> <td data-bbox="792 994 1420 1023">People : Chinese or other ethnic group: Chinese</td> <td data-bbox="1608 994 1655 1023">1.4</td> <td data-bbox="1883 994 1944 1023">0.8</td> </tr> <tr> <td data-bbox="792 1037 1391 1066">People : Chinese or other ethnic group: Other</td> <td data-bbox="1608 1037 1655 1066">0.8</td> <td data-bbox="1883 1037 1944 1066">0.5</td> </tr> <tr> <td data-bbox="792 1080 965 1109">Ethnic Group</td> <td data-bbox="1608 1080 1655 1109"></td> <td data-bbox="1883 1080 1944 1109"></td> </tr> </tbody> </table>	Ethnic Group	Total Population in B&NES ⁸ (Mid 2004 estimates) 000's	Percentage	All people	172.2		People: White: British	158.3	91.9	People: White: Irish	1.3	0.75	People: White: Other White	5.2	3.0	People: Mixed: White and Black Caribbean	0.7	0.4	People : Mixed: White and Black African	0.2	0.1	People: Mixed: White and Asian	0.6	0.3	People: Mixed: Other Mixed	0.5	0.3	People: Asian or Asian British: Indian	1.0	0.6	People: Asian or Asian British: Pakistani	0.3	0.2	People: Asian or Asian British: Bangladeshi	0.2	0.1	People: Asian or Asian British: Other Asian	0.3	0.2	People: Black or Black British: Caribbean	0.7	0.4	People: Black or Black British: African	0.6	0.3	People: Black or Black British: Other Black	0.1	0.06	People : Chinese or other ethnic group: Chinese	1.4	0.8	People : Chinese or other ethnic group: Other	0.8	0.5	Ethnic Group		
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¹ Estimated Resident Population Mid 2004, Office for National Statistics, Crown Copyright 2006.

2.6	Are there any gaps in the data, research or information that is available? What additional information would assist you in developing your financial plan?	The Emergency Care Network (the health providers' professional network) are charged with raising issues and implications arising from other providers' changes in service delivery.
2.7	What consultation have you carried out on your financial plan?	Consultation has been carried out with League of Friends (14 participants); GP cluster; GP commissioning group; staff group; the 'dip sampling' equality representatives group (scheduled for 27.3.2011)

3. Assessment of impact

	<p>Based upon any data you have analysed, or the results of consultation or research, use the spaces below to list how the financial plan:</p> <ul style="list-style-type: none"> ● Meets any particular needs of each of the equality groups or helps promote equality in some way. ● Could have a negative or adverse impact for each of the equality groups 		
	Identify the impact / potential impact of the financial plan on	Examples of how the financial plan promotes equality	Examples of potential negative or adverse impact and what steps have been or could be taken to address this
3.1	Age – different age groups	Waking nursing service covers the whole of Bath & North East Somerset Council area. It provides home visits to anyone needing nursing care during night time.	Parents with children with minor ailments use PMIU (children who have acute symptoms) will usually be referred to RUH.
3.2	Disability – Disabled people (ensure consideration of a range of impairments including both physical and mental impairments)	The dementia care programme is in consultation on providing a carer support line at night time.	Neutral
3.3	Gender – women and men	The proposed 'Virtual children ward' will provide nursing staff to children at home rather than asking children to present at	Data shows that men use the PMIU more the women – men also known to use daytime GP services less than women.

3.4	Gender identity - transgender people	PMIU.	Neutral
3.5	Race – People from black and minority ethnic groups	The Bath & NE Somerset Emergency Medical Service (BEMS), the emergency out of hours doctor service will continue to be available from PMIU until 11.30pm.	
3.6	Religion / belief – people of different religious/faith groups and those with no religion or belief	NHS Direct is available 24 hours for minor ailments / injuries.	Neutral
3.7	Rural communities – people living in rural communities		Data shows that the majority of people travel to PMIU using private transport, occasionally travelling by taxi. If they use private transport and they wish to receive treatment out of hours they will be asked to go to the RUH independently. If they show acute symptoms they will be transferred by ambulance to RUH free of charge (this is current normal practice). If the symptoms are minor they will either use one of the out of hours services or be asked to present during opening hours.
3.8	Sexual orientation - lesbian, gay, bisexual & heterosexual people		Neutral
3.9	Socio-economically disadvantaged – people who are disadvantaged due to factors like family background, educational attainment, neighbourhood and employment status.		If a patient presents at PMIU out of hours and shows acute symptoms they will be transferred by ambulance to RUH free of charge (this is current normal practice). If the symptoms are minor they will either use one of the out of hours services or be asked to present during opening hours.

4. Monitoring and review

4.1	What arrangements have you put in place to monitor the <i>actual</i> effect of your financial plan following its implementation?	The emergency care network and GP groups will be monitoring the effect of night time closure of PMIU. Routine patient 'all user' surveys will include questions about the reduction in opening hours of PMIU.
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5. Bath and North East Somerset Council & NHS B&NES Equality Impact Assessment Improvement Plan

The outcome of this EIA will fall into one of four categories:
Please tick which is appropriate:

1	No major change required	X
2	Adjustments to remove barriers identified by EIA or to better promote equality	
3	Continue despite having identified some potential for adverse impact or missed opportunities to promote equality	
4	Stop and rethink	

List actions below that you plan to take as a result of this EIA. These actions should be based upon the analysis of data, any gaps in the data you have identified, and any steps you will be taking to address any negative impacts or remove barriers. The actions need to be built into your financial plan and future service planning framework. Actions/targets should be measurable, achievable, realistic and time framed. (Add rows as appropriate)

Issues identified	Actions required	Progress milestones	Officer responsible	By when
People presenting at PMIU out of hours without access to telephone	Option of installing a free phone for local taxi firms / NHS Direct, BEMS, RUH etc		J Theed	May 2012
Need to review the impact of night time closure	Emergency Care Network and GP groups will be asked to review effects over time.		J Theed	6 months after new opening hours introduced

5. Sign off and publishing

Once you have completed this form, it needs to be 'approved' by your Divisional Director or their nominated officer. Following this sign off, send a copy to the Equality Team (equality@bathnes.gov.uk), who will publish it on Sirona / the Council's and/or NHS B&NES' website. Keep a copy for your own records.

Signed off by:  (Director)

Date: 21 March 2012

Print Name: JENNY THEED