



Equality Impact Assessment Record Form 2012-16

Section 1: Service Details and Summary of EIA Activity

Title of activity:	Non- renewal of Age UK Darlington contract HE-AT and restructure input into tackling excess winter deaths (EWD) in Darlington
Lead Officer for EIA:	Abbie Metcalfe, Business Officer, Public Health
Telephone:	01325 406586
Service Group:	People
Service or Team:	Public Health
Assistant Director accountable for this EIA	Ken Ross, Public Health Principal
Who else is involved in carrying out the EIA:	Zoe Foster, Interim DAAT Performance Support Judith Stonebridge, Specialty Registrar, Public Health Rachel Osbaldeston, Public Health Portfolio Lead

What stage has the EIA reached? Provide date and a brief note of where you're up to. List any consultation or engagement. Facts, figures and findings go elsewhere.

Stage	Date	Summary of position
Stage 1: Initial officer assessment to identify whole population likely to be affected	October 2015	<i>Whole population, e.g. whole borough, a neighbourhood, a whole demographic group such as older people</i> Population of Darlington, 105,600 (ONS, 2011 census)
Stage 2: Further assessment to identify target population	October 2015	<i>Target population, e.g. rural communities, community centre users in neighbourhood, older users of particular services</i> Population of Darlington who either uses the current HE-AT Project or may be in need of the Heat Project in future. 5,418, or 11.8 per cent, of Darlington households are in fuel poverty. (Department of Energy and Climate Change, 2012 / Public Health Outcomes Framework, 2014).
Stage 3: Further assessment to identify individuals	October 2015	<i>Individuals, e.g. disabled users of a particular rural bus service, mother and toddler group within community centre, older people who will lose service</i> The service is targeted at older people. Current users of the service. Throughout 2014/15, 329 people have received information about the project and its benefits. 154 households have accessed the service and received advice. Currently, 214 people have received information about the project and its benefits as it is the end of June 2015. (Figures

		taken from the performance information submitted from Age UK).
Stage 4: Analysis of Findings	October 2015	Whilst the removal of the service may have an impact on the groups as identified above, the actions identified will mitigate or remove this impact.
Stage 5: Sign-Off	November 2015	Public Health SMT November 2015.
Stage 6: Reporting and Action Planning	January 2016	The EIA will be reviewed in January 2016.

Section 2: The Activity and Supporting Information

Details of the activity (main purpose and aims)

Following the Health and Social Care Act 2012, responsibility for protecting and improving the health and wellbeing of local populations transferred to Local Authorities. A Public Health Grant was provided to enable local areas to deliver this responsibility which includes services to help people stop smoking, reduce their alcohol and drug use and achieve and maintain a healthy weight, work to prevent cancer and protect people from accidents and other risks.

Darlington Borough Council uses the grant in two ways which are to employ a core team of public health staff to deliver the work and mainly to commission services and programmes

In July 2015, the Chancellor of the Exchequer announced that there was to be an across the board 6.2% reduction to the Public Health Grant which will take effect from January 2016. For Darlington, this means a reduction of approximately £0.521 million. This reduction means that changes to the level and types of services that are currently commissioned and provided are unavoidable.

The non-renewal of the contract Age UK Darlington HE-AT and restructure input into tackling excess winter deaths (EWD) in Darlington is due to the above and the current HE-AT contract running until 31 March 2016. It is proposed that the contract will not be renewed after this date. A number of proposals will be submitted to Cabinet to make a decision and this is one of the proposals.

HE-AT works in partnership with Darlington Borough Council, NHS Darlington, Darlington Citizens Advice Bureau, Energy Saving Trust and other interested organisations. This contract is part of a wider range of programmes and contracts that contributes towards improving energy efficiency in private sector housing occupied by vulnerable individuals and towards reducing the financial burden of keeping warm and healthy.

The aim of the service is to increase knowledge, confidence and skills within the local community on energy matters. The service objectives include:

- To provide information, advice, guidance and support on fuel efficient products, energy switching or the range of grants available.
- To assist households to maximise their income through signposting to appropriate welfare rights agencies.
- To provide energy advice training sessions to community groups.
- To work with key health and social care contacts and energy providers to increase staff understanding of the links between health and housing and the process for referring their patients/clients to the service.
- To utilise a range of social marketing interventions to target appropriate population segments as well as informing referrers, partnership personnel and other organisations of the project's progress and outcomes.

- To work with the Darlington GP Clinical Commissioning Group to make them aware of the HE-AT Fuel Poverty project and the impact it can have on their patients.

The Service provides a source of information, advice, guidance and support for Darlington residents, particularly those with an underlying health condition, on fuel efficient products, switching suppliers or the range of grants available to enable homes to be better heated. There is recognition that fuel debt is a major issue for many and the Service offers a referral into welfare rights agencies for a benefits check as necessary. The Service also works with other groups and organisations to offer information, advice and support sessions across the Borough as well as targeting the more deprived wards. The Service is promoted and communicated via a range of media.

Alternative and mitigation

Should the contract not be renewed, the intention is to capitalise on national campaigns, for example Keep Warm, Keep Well this winter and explore opportunities to build on contact with vulnerable groups to disseminate information. Fuel Poverty advice is available on-line and nationally there are a number of campaigns that run every year, which enable people to receive advice and information about fuel poverty and this will continue despite this service not continuing.

Who will be affected by the activity? (groups and numbers)

Whole population

The population is residents living within the Borough of Darlington.

Target population

The Groups currently targeted by the Service are:

- Residents aged 50 plus with a long-term health condition living in Darlington.
- Those aged 85 plus particularly men.
- Those living in the most deprived wards in the Borough of Darlington.

Individuals

Current users of the service figures to be updated after performance Q2 meeting.

What data, research and other evidence or information is available which is relevant to the EIA?

National Context

Public Health England (2013) Cold Weather Plan for England 2013. Making the case: why long term strategic planning for cold weather is essential to health and wellbeing.
 NICE (2014) Excess winter deaths and morbidity and the health risks associated with cold homes.
 Marmot Review Team (2011) The Health Impacts of Cold Homes and Fuel Poverty.
 NICE (2014) Behaviour Change: individual approaches: public health guidance 49.
 Public Health Outcomes Framework (2015).
 Department of Energy and Climate Change (2012).
 Public Health England (2013) Warm Homes Healthy People Fund 2012-13 evaluation report.
 Local Government Association (2013) Tackling fuel poverty through local leadership.

Local Context

Darlington Single Needs Assessment (2011/12 and Update 2013).
 Darlington Health and Wellbeing Strategy 2013-16.
 Darlington Housing Strategy (2012-17).
 Darlington Home Energy Conservation Act (HECA) Further Report (2013).
 One Darlington Perfectly Placed 2008 -2026.

Provider data (2015-16).

Section 3: Officer Assessment

Use this table to record officer views on potential equality impacts. As the activity and assessment develop, views may change – record them here.			
Protected Characteristic	Potential Impact:	Potential level of impact:	Summary of Impact
	Positive Negative Mixed N/A	High Medium Low Nil	
Age	M	L	<p>Age UK is typically associated with the older demographic of the population and work with older client groups. The range of services offered by Age UK enables individuals to be signposted to a number of support services and the HE-AT Project being one of them.</p> <p>By the service not continuing there will be a negative impact on older people, however, there will still be accessible fuel poverty advice available.</p> <p>If the service is no longer specifically available via Age UK, there may be a positive impact as people who under the age of 50 might access Fuel Poverty support and information, if advertising widely.</p> <p>Any actions in terms of mitigation would also be targeted at older people.</p>
Race			There will be no specific impact on this group if the service does not continue.
Sex			There will be no specific impact on this group if the service does not continue.
Gender Reassignment			There will be no specific impact on this group if the service does not continue.
Disability (summary of detail on next page)	N	M	The current service is provided by Age UK Darlington and may involve people who have a disability and are known to Age UK for other services. A negative impact may be a loss of these clients as the service will not be as easily accessible, however, there will still fuel poverty advice available from other outlets.
Religion or belief			There will be no specific impact on this group if the service does not continue.
Sexual Orientation			There will be no specific impact on this group if the service does not continue.
Pregnancy or maternity			There will be no specific impact on this group if the service does not continue.
Marriage/Civil Partnership			There will be no specific impact on this group if the service does not continue.

Section 3: Officer Assessment – continued

The Council must consider disabled peoples' impairments when making decisions about 'activities'. This list is provided only as a starting point to assist officers with the assessment process. People with similar impairments may experience completely different impacts. Consider the potential impacts and summarise in the Disability section on the previous page.			
Mobility Impairment			There will be no specific impact on this group if the service does not continue.
Visual impairment			There will be no specific impact on this group if the service does not continue.
Hearing impairment			There will be no specific impact on this group if the service does not continue.
Learning Disability			There will be no specific impact on this group if the service does not continue.
Mental Health			There will be no specific impact on this group if the service does not continue.
Long Term Limiting Illness	N	M	There may be a negative impact on this specific group as residents aged 50 plus with a long term health condition living in Darlington was a Group specifically targeted by this service, however, there will still be accessible fuel poverty advice available.
Multiple Impairments			There will be no specific impact on this group if the service does not continue.
Other - Specify			None.

Potential Cumulative Impacts
None.

Section 4: Engagement Decision

Do you need to engage now, or during the development of the activity, to better understand how the activity might affect people because of their protected characteristics?	Yes / No
If YES, proceed to the next section. If NO, briefly summarise below the reasons why you have reached this conclusion.	
No The contract comes to an end on 31 March 2016 and a decision is yet to be made about whether to renew this contract. From the Officer Assessment, we believe that not continuing this service will impact on a small percentage of the population who are able to access fuel poverty help and advice. We believe that the mitigation for this service not to continue is sufficient. National evidence and local intelligence about service access and local uptake has informed the information provided in this EIA.	

Section 5: Involvement and Engagement Planning

Has the assessment shown that the activity will have a different effect on people because of their protected characteristic(s)? Yes/No			
If yes, please state which groups and how			
Yes, because of the nature of the service that was commissioned the service was targeting age and disability, specifically long-term limiting illness.			
Will the difference advance equality for people with that protected characteristic? Yes/No			
If yes, please state which groups and how			
No.			
Will the difference cause or increase disadvantage for people with that protected characteristic? Yes/No			
If yes, please state which groups and how			
No.			
Involvement and Engagement Plan			
Which organisations, groups and individuals do you need to involve or engage and how?			
Date of plan entry	Organisation, Group or Individuals	Date of event or activity	Type of activity – venue, channels, method and staffing

Section 6: Engagement Findings

This section is not relevant, as engagement was not carried out.

	Date/summary of engagement carried out	Summary of impacts identified
Age		
Disability		
Mobility Impairment		
Visual impairment		
Hearing impairment		
Learning Disability		
Mental Health		
Long Term Limiting Illness		
Multiple Impairments		
Other - Specify		
Race		
Sex		
Gender Reassignment		
Religion or belief		
Sexual Orientation		

Pregnancy or maternity		
Marriage / Civil Partnership		

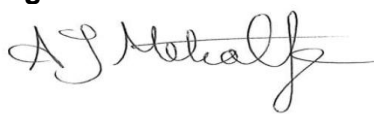

Section 6: Engagement Findings – Continued

Please explain your findings for each area of the Public Sector Equality Duty.

a) Does the activity help to eliminate discrimination, harassment and victimisation?
Not applicable.
b) Does the proposal help to advance equality of opportunity?
Not applicable.
c) Does the proposal help to foster good relations?
Not applicable.

During the engagement process were there any suggestions on how to avoid, minimise or mitigate any negative impacts? If so, please give details.
Not applicable.

Section 7 - Sign-off when assessment is complete

Officer Completing the Form:		
Signed 	Name:	Abbie Metcalfe
	Date:	02.11.15
	Job Title:	Business Officer, Public Health
Assistant Director:		
Signed 	Name:	Ken Ross
	Date:	02.11.15
	Service:	People, Public Health

Section 8: Report Findings to Decision Makers

Any report to decision makers should clearly identify impacts, options and reasons. What does the EIA show? More than one may apply:

a) No negative impact. All opportunities to advance equality have been taken. Monitor progress on implementation.
b) Negative impacts identified. Adjustments to remove barriers or to better advance equality have been proposed.
c) Negative impacts or missed opportunities to advance equality have been identified. If the proposal is for the activity to continue unchanged, justification or compelling reasons have been given.
d) Unlawful discrimination identified. Stop and rethink activity.

Section 9: Action Plan and Performance Management

Not required

What is the negative impact?	Actions required to reduce/eliminate the negative impact (if applicable)	Who will lead on action	Target completion date

Performance Management	
Date of the next EIA review	December 2015
Further review dates	January 2016
Who will lead the review?	Abbie Metcalfe , Business Officer, Public Health

