

Equality & Health Impact Assessment (EqHIA)

Document control

Title of activity:	Adult Social Care and Support Planning Policy
Lead officer:	Movita Hussain – Practice Development Manager, Adult Services
Approved by:	Barbara Nicholls, Director – Adults Services
Date completed:	9th March 2023
Scheduled date for review:	9th March 2025

Please note that the Corporate Policy & Diversity and Public Health teams require at least **5 working days** to provide advice on EqHIAs.

Did you seek advice from the Corporate Policy & Diversity team?	Yes / No
Did you seek advice from the Public Health team?	Yes / No
Does the EqHIA contain any confidential or exempt information that would prevent you publishing it on the Council's website?	Yes / No

Please note that EqHIAs are **public** documents and must be made available on the Council's [EqHIA webpage](#).

Please submit the completed form via e-mail to EqHIA@havering.gov.uk thank you.

1. Equality & Health Impact Assessment Checklist

Please complete the following checklist to determine whether or not you will need to complete an EqHIA and ensure you keep this section for your audit trail. If you have any questions, please contact EqHIA@havering.gov.uk for advice from either the Corporate Diversity or Public Health teams. Please refer to the Guidance in Appendix 1 on how to complete this form.

About your activity

1	Title of activity	Adult Social Care and Support Planning Policy		
2	Type of activity	Policy and Procedure		
3	Scope of activity	<p>The policy comprehensively outlines how Havering Adults Social Care Services implements, is at all times compliant and undertakes its statutory responsibilities in relation to The Care Act 2014.</p> <p>The document supports professional competency and standard requirements, quality assurance frameworks, professional support and guidance for casework and staff wellbeing.</p> <p>The policy links into existing corporate policy in relation to equalities, risk and staff health and safety and wellbeing.</p>		
4a	Are you changing, introducing a new, or removing a service, policy, strategy or function?	Yes	If the answer to <u>any</u> of these questions is 'YES' , please continue to question 5.	If the answer to <u>all</u> of the questions (4a, 4b & 4c) is 'NO' , please go to question 6.
4b	Does this activity have the potential to impact (either positively or negatively) upon people (9 protected characteristics)?	No		
4c	Does the activity have the potential to impact (either positively or negatively) upon any factors which determine people's health and wellbeing?	No		
5	If you answered YES:	Please complete the EqHIA in Section 2 of this document. Please see Appendix 1 for Guidance.		

6	If you answered NO:	
---	---------------------	--

Completed by:	Movita Hussain, Practice Development Manager, Adults Service Directorate
Date:	9/3/23

2. The EqHIA – How will the strategy, policy, plan, procedure and/or service impact on people?

Background/context:
<p>This policy will replace the existing ASC Support planning policy and has been reviewed to promote the principles of <i>Better Living</i> and to confirm Havering’s response to meeting its statutory requirements in relation to The Care Act 2014.</p> <p>The purpose of this policy is to ensure:</p> <ul style="list-style-type: none"> • the tasks of adult social care assessment, care and support planning, and review are undertaken in a manner that is at all times compliant with the Council's duties under the Care Act 2014; • equitable treatment and fairness in the provision of funded care and support; • sufficient and appropriate regard is given to individual circumstances and personal preference, as well as the resources available to the Council, when determining the value of an individual’s personal budget; • adult social care and support is delivered with a focus on strengths based practice, prevention, wellbeing and equity. <p>This policy does not describe a major change in approach – it clarifies the policy of the Council in relation to the Council’s duties under the Care Act and the requirements on the Council to work effectively with healthcare and partner agencies to deliver an integrated approach to assessment and care planning.</p> <p>The EqHIA outlines the importance of recognising the impact of intersectionality within its workforce and the changing demographics of the residents within Havering. With this in mind, the document will be reviewed as the understanding of intersectionality and impacts on the workforce, residents, community groups, resources and services evolve.</p>
<i>*Expand box as required</i>

Who will be affected by the activity?

All staff who fall with the remit of the Adult Social Care Directorate – this includes full time, part time and agency staff.

Havering Council is responsible for the delivery of care and support for adults ordinarily resident in the area. The Council may under certain circumstances be additionally responsible for urgent non-resident cases and in cases where there is a cross border dispute with another authority. Adult' generally refers to individuals aged 18 or over. Individuals with eligible needs may include:

- older people 65 years of age and over
- people with a physical and/or sensory disability;
- people with a learning disability;
- people with a cognitive disability;
- people with a mental health problem;
- young people in transition;
- informal carers.

Further details about the Council's duties and responsibilities in relation to identifying people who have ordinary residence in Havering for the purposes of the provision of Adult Social Care can be found in Sections 39 – 41 of the Care Act, chapter 19 of the Care & Support Statutory Guidance, the Care & Support (Ordinary Residence) (Specified Accommodation) Regulations 2014, and The Care & Support (Disputes Between Local Authorities) Regulations 2014.

Most importantly, it supports a culture of best practice, which promotes better outcomes for Havering residents.

Havering ASC will need to continue to work with internal and external partners, health and communities/groups to ensure services and the workforce is 'fit for purpose' to meet the challenges and changes that will present to the organisation both in the short and long-term future.

**Expand box as required*

Protected Characteristic - Age: Consider the full range of age groups

<i>Please tick (✓) the relevant box:</i>		Overall impact:
Positive	✓	This policy impacts the following age groups: People over aged 18 or over who are employed on a permanent, temporary or agency basis within LBH Adult Social Care Services. Residents aged 18 or over who have eligible needs.
Neutral		
Negative		

**Expand box as required*

Evidence:

The policy provides a framework of the Councils statutory responsibilities in relation to a person's age and The Care Act 2014, in relation to its residents and the responsibilities required by the ASC workforce.

Since the last census Havering has had an overall increase of 10% in its population, this includes an 8% increase of people aged 15-64 years of age and a 9% increase of those aged 65 years and over. It further reports that Havering has 17.6% of people aged over 65 years and 2.7% of people are aged 85 years and over.

According to the 2021 census Havering has the second highest population of older people aged 65+ in London and the lowest proportion of working age adults in London.

Further information in the census stated that 21.0% of residents are retired - the highest rate in London.

As well as growing, the age profile of the Havering population is also projected to change with proportionally greater growth amongst older age groups. For example, the number of people aged 85 and above living in Havering is expected to increase by 2.4K (32%) from 7.5K in 2020 to 9.9K by 2030 – information from BHR JSNA profile: LB Havering – October 2022.

This evidences the potential growth in demand for access to Adults Social Care Services and Support, but also the possible opportunities in relation to how the Borough can 'utilise' skills of this group in relation to volunteering or other opportunities.

The workforce have access to guidance, support, training and development to ensure they are appropriately skilled to undertake their role, as well as ensuring their wellbeing is maintained. This is via a number of areas such as; management support, supervision, training and development opportunities, reflective practice, wellbeing sessions, specific staff forums and health and safety training. This supports them in ensuring best practice within their role and relates to the 9 protected characteristics and 2 domains within this EqHIA.

**Expand box as required*

Sources used:

To note sources below were all used in relation to supporting the evidence for the individual protected characteristics and 2 domains within this EqHIA.

- Care Act 2014 - [Care Act 2014 \(legislation.gov.uk\)](https://www.legislation.gov.uk/ukpga/2014/16/contents)
- Children Act 1989 - [Children Act 1989 \(legislation.gov.uk\)](https://www.legislation.gov.uk/ukpga/1989/27/contents)
- [Children and Families Act 2014 \(legislation.gov.uk\)](https://www.legislation.gov.uk/ukpga/2014/16/contents)
- [Data Protection Act 2018 \(legislation.gov.uk\)](https://www.legislation.gov.uk/ukpga/2018/12/contents)
- [Human Rights Act 1998 \(legislation.gov.uk\)](https://www.legislation.gov.uk/ukpga/1998/42/contents)
- [Equality Act 2010 \(legislation.gov.uk\)](https://www.legislation.gov.uk/ukpga/2010/15/contents)
- [Health and Social Care Act 2012 \(legislation.gov.uk\)](https://www.legislation.gov.uk/ukpga/2012/12/contents)

- [The Care and Support \(Charging and Assessment of Resources\) Regulations 2014 \(legislation.gov.uk\)](https://www.legislation.gov.uk)
- [The Care and Support \(Direct Payments\) Regulations 2014 \(legislation.gov.uk\)](https://www.legislation.gov.uk)
- [Strengths-based approaches | SCIE](#)
- [Havering Census 2021 – ONS](#)
- [Havering Social Care Academy](#)
- [Havering Adult Social Care policies and Supporting Documents](#)
- LBH Equality and Diversity Policy
- <https://intranet.havering.gov.uk/human-resources/hr-policy-library/>
- [BHRJSNA2022 Havering Profile.pdf \(haveringdata.net\)](#)

**Expand box as required*

Protected Characteristic - Disability: Consider the full range of disabilities; including physical mental, sensory and progressive conditions

Please tick (✓) the relevant box:

Positive

Neutral

Negative

Overall impact:

The policy upholds the requirements of identifying any areas of a person's disability when undertaking the Councils responsibilities in determining eligibility and support in relation to The Care Act.

**Expand box as required*

Evidence:

The framework underpins the principles of local and national policy in relation to a person's disability in relation to the Councils statutory responsibilities under The Care Act 2014, in relation to its residents and the responsibilities required by the ASC workforce.

Information from the Office of national statistics states that the Census 2021 evidences that 15.3% of Havering residents have disabilities, similar to London (15.6%) but lower than England (17.7%).

It also stated there were there were disparities in disability prevalence within Havering dependent on the geographical area you lived in, e.g. There were nearly three times more households with a disabled person in Harold Hill East (1,605 households) compared to Emerson Park (596 households).

Havering had the highest number of people providing unpaid care of all local authorities across London.

According to the 2012 Census, in Havering, 2.7% of residents provide over 50 hours of care a week, 1.7% provide 20-49 hours and 4.4% provide 19 or less hours of unpaid care. The highest number of unpaid carers in Havering reside the same 3 neighbourhoods that have the highest proportion of households where at least one member has a disability.

It should be noted that while there is no current statistical evidence, it is reported via Adults social Care services that people are living in the community with a high level of complex needs and the numbers of younger adults requiring high levels of care and support in relation to complex need requirements has increased.

This evidences the need for ASC and other directorates to continue to work closely with other areas of the Council, such as commissioning to ensure services are available, targeted and appropriate to resident's requirements, to improve social and health equity across all areas of disability, inclusive of neurodiversity and mental health.

**Expand box as required*

Sources used:

- As above

**Expand box as required*

Protected Characteristic - Sex/gender: Consider both men and women

Please tick (✓) the relevant box:

Positive	<input checked="" type="checkbox"/>
Neutral	<input type="checkbox"/>
Negative	<input type="checkbox"/>

Overall impact:

The policy upholds the requirements of identifying any areas of a person's sex and/or gender when undertaking the Councils responsibilities in determining eligibility and support in relation to The Care Act.

**Expand box as required*

Evidence:

The policy underpins the principles of local and national policy in relation to a person's sex and/or gender in relation to the Councils statutory responsibilities under The Care Act 2014.

The 2021 Census has reported that Havering's population is 51.8% women and 48% men, this is an increase from the last Census of 10% for women and 11% for men.

People have the freedom and right to self-identification of their gender including non-binary, if required internal staff are able to access support to develop their understanding via training or from representatives from specific staff forums.

**Expand box as required*

Sources used:

- As above

**Expand box as required*

Protected Characteristic - Ethnicity/race: Consider the impact on different ethnic groups and nationalities

Please tick (✓) the relevant box:

Positive

✓

Neutral

Negative

Overall impact:

The policy upholds the requirements of identifying any areas in relation to a person's ethnicity and/or race when undertaking the Councils responsibilities in determining eligibility and support in relation to The Care Act.

**Expand box as required*

Evidence:

The framework underpins the principles of local and national policy in relation to a person's ethnicity and/or race in relation to the Councils statutory responsibilities under The Care Act 2014 and the responsibilities required by the ASC workforce.

The 2021 Census states that;

- 33.5% of people in Havering identify as non-White British, which is an increase from 16.7% in 2011.
- 66.49% of people identify as White British, which is the second highest figure in London behind Bromley(66.51%).
- 87.8% of usual Havering residents identified with at least one UK national identity (English, Welsh, Scottish, Northern Irish, British and Cornish).
- People selecting a non-UK identity only, accounted for 10.3% of the Havering population in 2021, which is an increase from 5.7% in 2011. Among those who described a non-UK national identity, the most common response was those describing "Romanian" as their national identity 2.0% up from 0.2% in 2011.
- 90.1% of residents aged 3 and over describe their main language as English, the next main languages being, Romanian 2.3% and Lithuanian 0.9%.
- 4.8% of households have no members where their main language is English;

In 2021, White British remains the most common ethnic group in Havering, with 66.5% (174,232) of the population identifying in this group, down from 83.3% (197,615) in 2011. The next most common ethnic group is Asian, accounting for 10.7% (28,150) of the population, up from 4.9% (11,545) in 2011.

The information evidences a huge demographic change in diversity for people living in Havering over the last 10 years and indicates that it will continue to change and become more diverse.

The statistical information highlights the need for Havering to continue to offer good quality appropriate services for people who English is not their first language, such as; interpreting services, production of materials in appropriate languages, to ensure people are not disadvantaged in being able to access appropriate services.

Havering ASC will continue to work with internal and external partners, health and communities/groups to ensure services and the workforce is 'fit for purpose' to meet the challenges and changes that will present to the organisation both in the short and long-term future in relation to the changing demographics in Havering.

This policy will need to ensure it continues to be current in meeting its statutory responsibilities in relation to the changing demographics of Havering's population and underrepresented groups, specifically in relation to ethnicity, nationality and race and will continue to work with appropriate internal and external partners, emerging and growing communities and community groups.

**Expand box as required*

Sources used:

- As above

**Expand box as required*

Protected Characteristic - Religion/faith: Consider people from different religions or beliefs including those with no religion or belief

<i>Please tick (✓) the relevant box:</i>	
Positive	✓
Neutral	
Negative	

Overall impact:
The policy upholds the requirements of identifying any areas in relation to a person's religion and/or faith when undertaking the Councils responsibilities in determining eligibility and support in relation to The Care Act.

**Expand box as required*

Evidence:

The framework underpins the principles of local and national policy in relation to a person's religion and/or faith in relation to the Councils statutory responsibilities under The Care Act 2014 and the responsibilities required by the ASC workforce.

The Census of 2021 reported that;

- The most commonly reported religion in Havering is Christian with 52.2%, this is a reduction from 65.6% in 2011.
- No religion was the second most common response, with 30.6% identifying in this category, up from 22.6% in 2011.

- Other religions accounted for 11.7% of the total Havering population, which is an increase from 5.1% in 2011.

In view of the presented statistical information, Havering will need to ensure it continues to be aware of peoples and communities religious needs, support services and requirements.

**Expand box as required*

Sources used:

- As above

**Expand box as required*

Protected Characteristic - Sexual orientation: Consider people who are heterosexual, lesbian, gay or bisexual

Please tick (✓) the relevant box:

Positive	<input checked="" type="checkbox"/>
Neutral	<input type="checkbox"/>
Negative	<input type="checkbox"/>

Overall impact:

The policy upholds the requirements of identifying any areas in relation to a person’s sexual orientation when undertaking the Councils responsibilities in determining eligibility and support in relation to The Care Act.

**Expand box as required*

Evidence:

The framework underpins the principles of local and national policy in relation to a person’s sexual orientation in relation to the Councils statutory responsibilities under The Care Act 2014 and the responsibilities required by the ASC workforce.

According to information within the most recent Census, Havering has the lowest number (1.95%), of residents aged 16 and over in London who identify as LGB+orientation (“Gay or Lesbian”, “Bisexual” or “Other sexual orientation”). It also has the 5th lowest proportion of residents aged 16 and over reporting that the gender that they identify with now is different to their sex registered at birth.

The data is useful, as it will assist the Council and partners in supporting anti - discrimination duties under the Equality Act 2010 and identifying any barriers experienced by individuals, linked to their sexual orientation or gender identity.

**Expand box as required*

Sources used:

- As above

**Expand box as required*

Protected Characteristic - Gender reassignment: Consider people who are seeking, undergoing or have received gender reassignment surgery, as well as people whose gender identity is different from their gender at birth	
<i>Please tick (✓) the relevant box:</i>	
Positive	<input checked="" type="checkbox"/>
Neutral	<input type="checkbox"/>
Negative	<input type="checkbox"/>
<p>Overall impact:</p> <p>The policy upholds the requirements of identifying any appropriate areas in relation to a person's gender reassignment when undertaking the Councils responsibilities in determining eligibility and support in relation to The Care Act.</p> <p style="text-align: right;"><i>*Expand box as required</i></p>	
<p>Evidence:</p> <p>The framework underpins the principles of local and national policy in relation to a person's gender reassignment in relation to the Councils statutory responsibilities under The Care Act 2014 and the responsibilities required by the ASC workforce.</p> <p>It is recognised that people have the freedom and right to change their gender. Organisationally, the understanding of people's experience and what support they may require is evolving, if required internal staff are able to access support to develop their understanding via training or from representatives from specific staff forums.</p> <p style="text-align: right;"><i>*Expand box as required</i></p>	
<p>Sources used:</p> <ul style="list-style-type: none"> • As above <p style="text-align: right;"><i>*Expand box as required</i></p>	

Protected Characteristic - Marriage/civil partnership: Consider people in a marriage or civil partnership	
<i>Please tick (✓) the relevant box:</i>	
Positive	<input type="checkbox"/>
Neutral	<input checked="" type="checkbox"/>
Negative	<input type="checkbox"/>
<p>Overall impact:</p> <p>The changes to the policy are unlikely to impact on any resident or staff member because of their marriage/civil partnership status.</p> <p style="text-align: right;"><i>*Expand box as required</i></p>	
<p>Evidence:</p> <p>The policy does not have any specific impact due to marriage/civil partnership status. Any service offered such as assessment, is offered in line with the principles of anti-discriminative practice.</p> <p>The workforce has appropriate policies and procedures in place in relation to this area to support the person in relation to their role and legal rights.</p> <p style="text-align: right;"><i>*Expand box as required</i></p>	

Sources used:

- As above

**Expand box as required*

Protected Characteristic - Pregnancy, maternity and paternity: Consider those who are pregnant and those who are undertaking maternity or paternity leave

<i>Please tick (✓) the relevant box:</i>		Overall impact: This policy is unlikely to impact on any resident or staff member because of pregnancy, maternity and paternity status.
Positive	<input type="checkbox"/>	
Neutral	<input checked="" type="checkbox"/>	
Negative	<input type="checkbox"/>	

**Expand box as required*

Evidence:

The policy does not have specific impact due to pregnancy, maternity and paternity status on people living in the Borough.

The workforce has appropriate policies and procedures in place in relation to this area to support the person in relation to their role and any risk identified.

**Expand box as required*

Sources used:

- As above

**Expand box as required*

Socio-economic status: Consider those who are from low income or financially excluded backgrounds

<i>Please tick (✓) the relevant box:</i>		Overall impact: The policy upholds the requirements of identifying any appropriate areas in relation to a person's socio-economic status when undertaking the Councils responsibilities in determining eligibility and support in relation to The Care Act.
Positive	<input checked="" type="checkbox"/>	
Neutral	<input type="checkbox"/>	
Negative	<input type="checkbox"/>	

**Expand box as required*

Evidence:

The framework underpins the principles of local and national policy in relation to a person's socio-economic status in relation to the Councils statutory responsibilities under The Care Act 2014 and the responsibilities required by the ASC workforce.

The 2021 Census stated that 59.5% of residents in Havering currently have a job, an increase from 58.9% in 2011 and 3.6% of residents are unemployed, which is the fourth lowest rate in London and an improvement from the rate of 5.0% in 2011.

The policy evidences how Havering ASC implements The Care Act 2014 statutory requirements fairly and is not dependent on a person's socio-economic status.

**Expand box as required*

Sources used:

- As above

Health & Wellbeing Impact: Consider both short and long-term impacts of the activity on a person's physical and mental health, particularly for disadvantaged, vulnerable or at-risk groups. Can health and wellbeing be positively promoted through this activity? Please use the Health and Wellbeing Impact Tool in Appendix 2 to help you answer this question.

Please tick (✓) all the relevant boxes that apply:

Positive	✓
Neutral	
Negative	

Overall impact:

**Expand box as required*

Do you consider that a more in-depth HIA is required as a result of this brief assessment? Please tick (✓) the relevant box

Yes No

Evidence:

This policy and procedure may have a positive impact on a resident's health and wellbeing, as it enables the person to be aware of the areas of eligibility that they meet under The Care Act criteria as well as the identification of individual outcomes, individual strengths and support to meet their individual needs.

The framework also sets out the Council requirements for the ASC workforce and supports the workforce in being clear in relation to their role and responsibilities.

**Expand box as required*

Sources used:




- As above

**Expand box as required*

3. Outcome of the Assessment

The EqHIA assessment is intended to be used as an improvement tool to make sure the activity maximises the positive impacts and eliminates or minimises the negative impacts. The possible outcomes of the assessment are listed below and what the next steps to take are:

Please tick (✓) what the overall outcome of your assessment was:

	1. The EqHIA identified <u>no significant concerns</u> OR the identified <u>negative concerns</u> have already been <u>addressed</u>		Proceed with implementation of your activity
	2. The EqHIA identified some <u>negative impact</u> which still needs to be <u>addressed</u>		COMPLETE SECTION 4: Complete action plan and finalise the EqHIA
	3. The EqHIA identified some <u>major concerns</u> and showed that it is <u>impossible to diminish negative impacts</u> from the activity to an acceptable or even lawful level		Stop and remove the activity or revise the activity thoroughly . Complete an EqHIA on the revised proposal.

4. Action Plan

The real value of completing an EqHIA comes from the identifying the actions that can be taken to eliminate/minimise negative impacts and enhance/optimize positive impacts. In this section you should list the specific actions that set out how you will address any negative equality and health & wellbeing impacts you have identified in this assessment. Please ensure that your action plan is: more than just a list of proposals and good intentions; sets ambitious yet achievable outcomes and timescales; and is clear about resource implications.

Protected characteristic / health & wellbeing impact	Identified Negative or Positive impact	Recommended actions to mitigate Negative impact* or further promote Positive impact	Outcomes and monitoring**	Timescale	Lead officer
Age	Positive	To ensure document is reviewed in line with any new statistical information, changes in legislation or local changes that impacts on the changing demographic in relation to age.	Periodic Policy Reviews Engaging with appropriate services in the Council, wider community and health that support people in the community, challenge and address inequalities.	Every 2 years As opportunities and/or need arise.	Movita Hussain
Disability	Positive	To ensure document is reviewed in line with any new statistical information, changes in legislation or local changes that impacts on the changing demographic in relation to disability.	Periodic Policy Reviews Engaging with appropriate services in the Council, wider community and health that support people in the community, challenge and address inequalities.	Every 2 years As opportunities and/or need arise.	Movita Hussain
Sex/Gender	Positive	To ensure document is reviewed in line with any new statistical information, changes in legislation or local changes that impacts on the changing demographic in relation to a person's sex/gender.	Periodic Policy Reviews Engaging with appropriate services in the Council, wider community and health that support people in the	Every 2 years As opportunities and/or need arise.	Movita Hussain

			community, challenge and address inequalities.		
Ethnicity/Race	Positive	To ensure document is reviewed in line with any new statistical information, changes in legislation or local changes that impacts on the changing demographic in relation to a person's ethnicity/race.	Periodic Policy Reviews Engaging with appropriate services in the Council, wider community and health that support people in the community, challenge and address inequalities.	Every 2 years As opportunities and/or need arise.	Movita Hussain
Religion/Faith	Positive	To ensure document is reviewed in line with any new statistical information, changes in legislation or local changes that impacts on the changing demographic in relation to a person's religion/faith.	Periodic Policy Reviews Engaging with appropriate services in the Council, wider community and health that support people in the community, challenge and address inequalities.	Every 2 years As opportunities and/or need arise.	Movita Hussain
Sexual orientation	Positive	To ensure document is reviewed in line with any new statistical information, changes in legislation or local changes that impacts on the changing demographic in relation to a person's sexual orientation.	Periodic Policy Reviews Engaging with appropriate services in the Council, wider community and health that support people in the community, challenge and address inequalities.	Every 2 years As opportunities and/or need arise.	Movita Hussain
Gender reassignment	Positive	To ensure document is reviewed in line with any new statistical information, changes in legislation or local changes that impacts on the changing demographic in relation to a person's gender reassignment	Periodic Policy Reviews Engaging with appropriate services in the Council, wider community and health that support people in the community, challenge and address inequalities.	Every 2 years As opportunities and/or need arise.	Movita Hussain

Socio-economic status	Positive	To ensure document is reviewed in line with any new statistical information, changes in legislation or local changes that impacts on the changing demographic in relation to a person's socio-economic status.	Periodic Policy Reviews Engaging with appropriate services in the Council, wider community and health that support people in the community, challenge and address inequalities.	Every 2 years As opportunities and/or need arise.	Movita Hussain
Health & Wellbeing	Positive	To ensure document is reviewed in line with any new statistical information, changes in legislation or local changes that impacts on the changing demographic in relation to a person's health and wellbeing.	Periodic Policy Reviews Engaging with appropriate services in the Council, wider community and health that support people in the community, challenge and address inequalities.	Every 2 years As opportunities and/or need arise.	Movita Hussain

Add further rows as necessary

* You should include details of any future consultations and any actions to be undertaken to mitigate negative impacts

** Monitoring: You should state how the impact (positive or negative) will be monitored; what outcome measures will be used; the known (or likely) data source for outcome measurements; how regularly it will be monitored; and who will be monitoring it (if this is different from the lead officer).

5. Review

In this section you should identify how frequently the EqHIA will be reviewed; the date for next review; and who will be reviewing it.

Review:

To be reviewed a minimum of every two years.

Scheduled date of review: April 2025

Lead Officer conducting the review: Movita Hussain, Practice Development Manager, Adults Services

**Expand box as required*

Please submit the completed form via e-mail to EqHIA@havering.gov.uk thank you.

Appendix 1. Guidance on Undertaking an EqHIA

This Guidance can be deleted prior to publication.

What is it?

The Equality & Health Impact Assessment (EqHIA) is a tool to ensure that your activity meets the needs of individuals and groups that use your service, whilst at the same time ensuring a person's chance of leading a healthy life is the same wherever they live and whoever they are. We want to ensure that the activities of the Council are 'fit for purpose' and meet the needs of Havering's increasingly diverse communities and employees. This robust and systematic EqHIA process ensures that any potential detrimental effects or discrimination is identified, removed, or mitigated and positive impacts are enhanced.

When to Assess:

An EqHIA should be carried out when you are changing, removing or introducing a new service, policy, strategy or function; for simplicity, these are referred to as an "activity" throughout this document. It is best to conduct the assessment as early as possible in the decision-making process.

Guidance: Equality & Health Impact Assessment Checklist

The Checklist in Section 1 asks the key questions,

4a) Are you changing, introducing a new, or removing a service, policy, strategy or function?

4b) Does this activity (policy/strategy/service/decision) have the potential to impact (either positively or negatively) upon people (9 protected characteristics)?

4c) Does this activity (policy/strategy/service/decision) have the potential to impact (either positively or negatively) upon any factors which determine people's health and wellbeing?

- If the answer to ANY of the questions 4a, 4b or 4c of the Checklist is 'YES' then you must carry out an assessment. e.g. Proposed changes to Contact Centre Opening Hours
'YES' = you need to carry out an EqHIA
- If the answer to ALL of the questions, 4a or 4b of the Checklist is NO, then you do not need to carry out an EqHIA assessment. e.g. Quarterly Performance Report
'NO' = you DO NOT need to carry out an EqHIA. Please provide a clear explanation as to why you consider an EqHIA is not required for your activity.

Using the Checklist

The assessment should take into account all the potential impacts of the proposed activity, be it a major financial decision, or a seemingly simple policy change. Considering and completing this EqHIA will ensure that all Council plans, strategies, policies, procedures, services or other activity comply with relevant statutory obligations and responsibilities. In particular it helps the Council to meet its legal obligation under the [Equality Act 2010 and the Public Sector Equality Duty](#) and its public health duties under the [Health and Social Care Act 2012](#).

Having Due Regard

To have due regard means that in making decisions and in its other day-to-day activities, the Council must consciously consider the need to:

- Eliminate unlawful discrimination, harassment and victimisation
- Advance equality of opportunity between different groups
- Foster good relations between different groups
- Reduce inequalities in health outcomes

Combining Equality and Health Impact Assessment:

[Equality Impact Assessments \(EIAs\)](#) provide a systematic way of ensuring that legal obligations are met. They assess whether a proposed policy, procedure, service change or plan will affect people different on the basis of their 'protected characteristics' and if it will affect their human rights. Currently there are **nine protected characteristics** (previously known as 'equality groups' or 'equality strands'): age, disability, sex/gender, ethnicity/race, religion/faith, sexual orientation, gender reassignment, marriage/civil partnership, and pregnancy/ maternity/paternity.

An activity does not need to impact on all 9 protected characteristics – impacting on just one is sufficient justification to complete an EqHIA.

[Health Impact Assessments \(HIAs\)](#) consider the potential impact of any change or amendment to a policy, service, plan, procedure or programme on the health and wellbeing of the population. HIAs help identify how people may be affected differently on the basis of where they live and potential impacts on health inequalities and health equity by assessing the distribution of potential effects within the population, particularly within vulnerable groups. 'Health' is not restricted to medical conditions, or the provision of health services, but rather encompasses the wide range of influences on people's health and wellbeing. This includes, but is not limited to, experience of discrimination, access to transport, housing, education, employment - known as the 'wider determinants of health'.

This [Equality and Health Impact Assessment \(EqHIA\)](#) brings together both impact assessments into a single tool which will result in a set of recommendations to eliminate discrimination and inequality; enhance potential positive impacts and mitigate where possible for negative impacts. In conducting this EqHIA you will need to assess the impact (positive, neutral or negative) of your activity on individuals and groups with **protected characteristics** (this includes staff delivering your activity), **socio-economic status** and **health & wellbeing**. Guidance on what to include in each section is given on the next pages.

Guidance: What to include in background/context

In this section you will need to add the background/context of your activity, i.e. what is the activity intending to do, and why?

Make sure you include the scope and intended outcomes of the activity being assessed; and highlight any proposed changes. Please include a brief rationale for your activity and any supporting evidence for the proposal. Some questions to consider:

- What is the aim, objectives and intended outcomes?
- How does this activity meet the needs of the local population?
- Has this activity been implemented in another area? What were the outcomes?
- Is this activity being implemented as per best practice guidelines?
- Who were the key stakeholders in this activity?

*Note that the boxes will expand as required

Guidance: Who will be affected by the activity?

The people who will be affected may be

Residents: pay particular attention to vulnerable groups in the population who may be affected by this activity

Businesses/ manufacturing / developers / small, medium or large enterprises

Employees: e.g. Council staff for an internal activity, other statutory or voluntary sector employees, local businesses and services

*Note that the boxes will expand as required

Guidance: What to include in assessing a Protected Characteristic e.g. AGE

Please tick (✓) the relevant box:

Positive

Neutral

Negative

Overall impact: In this section you will need to consider and note what impact your activity will have on individuals and groups (including staff) with protected characteristics based on the data and information you have. You should note whether this is a positive, neutral or negative impact.

It is essential that you note all negative impacts. This will demonstrate that you have paid 'due regard' to the Public Sector Equality Duty if your activity is challenged under the Equality Act.

*Note that the boxes will expand as required

Evidence: In this section you will need to document the evidence that you have used to assess the impact of your activity.

When assessing the impact, please consider and note how your activity contributes to the three aims of the Public Sector Equality Duty (PSED) as stated in the section above.

It is essential that you note the full impact of your activity, so you can demonstrate that you have fully considered the equality implications and have paid 'due regard' to the PSED should the Council be challenged.

- If you have identified a **positive impact**, please note this.
- If you think there is a **neutral impact** or the impact is not known, please provide a full reason why this is the case.
- If you have identified a **negative impact**, please note what steps you will take to mitigate this impact. If you are unable to take any mitigating steps, please provide a full reason why. All negative impacts that have mitigating actions must be recorded in the **Action Plan**.
- **Please ensure that appropriate consultation with affected parties has been undertaken and evidenced**

Sources used: In this section you should list all sources of the evidence you used to assess the impact of your activity. This can include:

- Service specific data
- Population, demographic and socio-economic data. Suggested sources include:
 - o Service user monitoring data that your service collects
 - o [Havering Data Intelligence Hub](#)
 - o [Office for National Statistics \(ONS\)](#)

If you do not have any relevant data, please provide the reason why.

*Note that the boxes will expand as required

Guidance: What to include in assessing Health & Wellbeing Impact:

Please tick (✓) all the relevant boxes that apply:

Positive

Neutral

✓

Negative

Overall impact: In this section you will need to consider and note whether the proposal could have an overall impact on, or implications for, people's health and wellbeing or any factors which determine people's health.

How will the activity help address inequalities in health?

Include here a brief outline of what could be done to enhance the positive impacts and, where possible, mitigate for the negative impacts.

*Note that the boxes will expand as required

Do you consider that a more in-depth HIA is required as a result of this brief assessment? Please tick (✓) the relevant box

Yes No

Evidence: In this section you will need to outline in more detail how you came to your conclusions above:

- What is the nature of the impact?
- Is the impact **positive** or **negative**? It is possible for an activity to have **both positive and negative impacts**. Consider here whether people will be able to access the service being offered; improve or maintain healthy lifestyles; improve their opportunities for employment/income; whether and how it will affect the environment in which they live (housing, access to parks & green space); what the impact on the family, social support and community networks might be
- What can be done to mitigate the negative impacts and/or enhance the positive impacts?
- If you think there is a **neutral impact**, or the impact is not known, please provide a brief reason why this is the case.
- What is the likelihood of the impact? Will the impact(s) be in weeks, months or years? In some cases the short-term risks to health may be worth the longer term benefits.
- Will the proposal affect different groups of people in different ways? A proposal that is likely to benefit one section of the community may not benefit others and could lead to inequalities in health.

Please use the Health & Wellbeing Impact Tool in Appendix 2 as a guide/checklist to assess the potential wider determinants of health impacts.

This tool will help guide your thinking as to what factors affect people's health and wellbeing, such as social support, their housing conditions, access to transport, employment, education, crime and disorder and environmental factors. It is not an exhaustive list, merely a tool to guide your assessment; there may be other factors specific to your activity.

Some questions you may wish to ask include:

- Will the activity impact on people's ability to socialise, potentially leading to social isolation?
- Will the activity affect a person's income and/or have an effect on their housing status?
- Is the activity likely to cause the recipient of a service more or less stress?
- Will any change in the service take into account different needs, such as those with learning difficulties?
- Will the activity affect the health and wellbeing of persons not directly related to the service/activity, such as carers, family members, other residents living nearby?
- If there is a short-term negative effect, what will be done to minimise the impact as much as possible?

- Are the longer-term impacts positive or negative? What will be done to either promote the positive effects or minimise the negative effects?
- Do the longer term positive outcomes outweigh the short term impacts?

*Note that the boxes will expand as required

Sources used: In this section you should list all sources of the evidence you used to assess the impact of your activity. This could include, e.g.:

Information on the population affected

- Routinely collected local statistics (e.g. quality of life, health status, unemployment, crime, air quality, educational attainment, transport etc.)
- Local research/ Surveys of local conditions
- Community profiles

Wider Evidence

- Published Research, including evidence about similar proposals implemented elsewhere (e.g. Case Studies).
- Predictions from local or national models
- Locally commissioned research by statutory/voluntary/private organisations

Expert Opinion

- Views of residents and professionals with local knowledge and insight

*Note that the boxes will expand as required

Guidance: Outcome of the Assessment

On reflection, what is your overall assessment of the activity?

The purpose of conducting this assessment is to offer an opportunity to think, reflect and **improve** the proposed activity. It will make sure that the Council can evidence that it has considered its due regard to equality and health & wellbeing to its best ability.

It is not expected that all proposals will be immediately without negative impacts! However, where these arise, what actions can be taken to mitigate against potential negative effects, or further promote the positive impacts?

Please tick one of the 3 boxes in this section to indicate whether you think:

1. all equality and health impacts are adequately addressed in the activity – proceed with your activity pending all other relevant approval processes
2. the assessment identified some negative impacts which could be addressed – please complete the Action Plan in Section 4.
3. If the assessment reveals some significant concerns, this is the time to stop and re-think, making sure that we spend our Council resources wisely and fairly. There is no shame in stopping a proposal.

*Note that the boxes will expand as required

Guidance: Action Plan

For each protected characteristic/health & wellbeing impact where an impact on people or their lives has been identified, complete one row of the action plan. You can add as many further rows as required.

State whether the impact is Positive or Negative

Briefly outline the actions that can be taken to mitigate against the negative impact or further enhance a positive impact. These actions could be to make changes to the activity itself (service, proposal, strategy etc.) or to make contingencies/alterations in the setting/environment where the activity will take place.

For example, might staff need additional training in communicating effectively with people with learning difficulties, if a new service is opened specifically targeting those people? Is access to the service fair and equitable? What will the impact on other service users be? How can we ensure equity of access to the service by all users? Will any signage need changing? Does the building where the service being delivered comply with disability regulations?

Guidance: Review

Changes happen all the time! A service/strategy/policy/activity that is appropriate at one time, may no longer be appropriate as the environment around us changes. This may be changes in our population, growth and makeup, legislative changes, environmental changes or socio-political changes.

Although we can't predict what's going to happen in the future, a review is recommended to ensure that what we are delivering as a Council is still the best use of our limited resources. The timescale for review will be dependent on the scale of the activity.

A major financial investment may require a review every 2-3 years for a large scale regeneration project over 10-15 years.

A small policy change may require a review in 6 months to assess whether there are any unintended outcomes of such a change.

Please indicate here how frequently it is expected to review your activity and a brief justification as to why this timescale is recommended.

Appendix 2. Health & Wellbeing Impact Tool

Will the activity/service/policy/procedure affect any of the following characteristics? Please tick/check the boxes below

The following are a range of considerations that might help you to complete the assessment.

Lifestyle YES <input type="checkbox"/> NO <input type="checkbox"/>	Personal circumstances YES <input type="checkbox"/> NO <input type="checkbox"/>	Access to services/facilities/amenities YES <input type="checkbox"/> NO <input type="checkbox"/>
<input type="checkbox"/> Diet <input type="checkbox"/> Exercise and physical activity <input type="checkbox"/> Smoking <input type="checkbox"/> Exposure to passive smoking <input type="checkbox"/> Alcohol intake <input type="checkbox"/> Dependency on prescription drugs <input type="checkbox"/> Illicit drug and substance use <input type="checkbox"/> Risky Sexual behaviour <input type="checkbox"/> Other health-related behaviours, such as tooth-brushing, bathing, and wound care	<input type="checkbox"/> Structure and cohesion of family unit <input type="checkbox"/> Parenting <input type="checkbox"/> Childhood development <input type="checkbox"/> Life skills <input type="checkbox"/> Personal safety <input type="checkbox"/> Employment status <input type="checkbox"/> Working conditions <input type="checkbox"/> Level of income, including benefits <input type="checkbox"/> Level of disposable income <input type="checkbox"/> Housing tenure <input type="checkbox"/> Housing conditions <input type="checkbox"/> Educational attainment <input type="checkbox"/> Skills levels including literacy and numeracy	<input type="checkbox"/> to Employment opportunities <input type="checkbox"/> to Workplaces <input type="checkbox"/> to Housing <input type="checkbox"/> to Shops (to supply basic needs) <input type="checkbox"/> to Community facilities <input type="checkbox"/> to Public transport <input type="checkbox"/> to Education <input type="checkbox"/> to Training and skills development <input type="checkbox"/> to Healthcare <input type="checkbox"/> to Social services <input type="checkbox"/> to Childcare <input type="checkbox"/> to Respite care <input type="checkbox"/> to Leisure and recreation services and facilities
Social Factors YES <input type="checkbox"/> NO <input type="checkbox"/>	Economic Factors YES <input type="checkbox"/> NO <input type="checkbox"/>	Environmental Factors YES <input type="checkbox"/> NO <input type="checkbox"/>
<input type="checkbox"/> Social contact <input type="checkbox"/> Social support <input type="checkbox"/> Neighbourliness <input type="checkbox"/> Participation in the community <input type="checkbox"/> Membership of community groups <input type="checkbox"/> Reputation of community/area <input type="checkbox"/> Participation in public affairs <input type="checkbox"/> Level of crime and disorder <input type="checkbox"/> Fear of crime and disorder <input type="checkbox"/> Level of antisocial behaviour <input type="checkbox"/> Fear of antisocial behaviour <input type="checkbox"/> Discrimination <input type="checkbox"/> Fear of discrimination <input type="checkbox"/> Public safety measures <input type="checkbox"/> Road safety measures	<input type="checkbox"/> Creation of wealth <input type="checkbox"/> Distribution of wealth <input type="checkbox"/> Retention of wealth in local area/economy <input type="checkbox"/> Distribution of income <input type="checkbox"/> Business activity <input type="checkbox"/> Job creation <input type="checkbox"/> Availability of employment opportunities <input type="checkbox"/> Quality of employment opportunities <input type="checkbox"/> Availability of education opportunities <input type="checkbox"/> Quality of education opportunities <input type="checkbox"/> Availability of training and skills development opportunities <input type="checkbox"/> Quality of training and skills development opportunities <input type="checkbox"/> Technological development <input type="checkbox"/> Amount of traffic congestion	<input type="checkbox"/> Air quality <input type="checkbox"/> Water quality <input type="checkbox"/> Soil quality/Level of contamination/Odour <input type="checkbox"/> Noise levels <input type="checkbox"/> Vibration <input type="checkbox"/> Hazards <input type="checkbox"/> Land use <input type="checkbox"/> Natural habitats <input type="checkbox"/> Biodiversity <input type="checkbox"/> Landscape, including green and open spaces <input type="checkbox"/> Townscape, including civic areas and public realm <input type="checkbox"/> Use/consumption of natural resources <input type="checkbox"/> Energy use: CO2/other greenhouse gas emissions <input type="checkbox"/> Solid waste management <input type="checkbox"/> Public transport infrastructure