

**Equality Impact Assessment (EqIA)**

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| This EqIA is for: | *Nottingham and Nottinghamshire Suicide Prevention Strategy 2019-2023* |

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| Details are set out: | *Nottingham and Nottinghamshire Suicide Prevention Strategy and Action Plan 2019-2023* |

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| Officers undertaking the assessment: | *Hannah Bone F2 Doctor*  *Steph Knowles Public Health & Commissioning Manager* |

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| Assessment approved by: | *Catherine Pritchard (Public Health Consultant)* | Date: 15/02/2022 |

The Public Sector Equality Duty which is set out in the Equality Act 2010 requires public authorities to have due regard to the need to: Eliminate unlawful discrimination, harassment and victimisation; Advance equality of opportunity between people who share a protected characteristic and those who do not; Foster good relations between people who share a protected characteristic and those who do not.

The purpose of carrying out an Equality Impact Assessment is to assess the impact of a change to services or policy on people with protected characteristics and to demonstrate that the Council has considered the aims of the Public Sector Equality Duty.

**Part A: Impact, consultation and proposed mitigation**

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| **1** | **What are the potential impacts of the proposal?** *Has any initial consultation informed the identification of impacts?* |
| Nottingham City and Nottinghamshire Suicide Prevention Strategic Steering Group have produced the Suicide Prevention Strategy and Action Plan for 2019-2023. It builds on the previous strategies of 2015-2018 and 2009-2012. It reflects new and updated priorities and guidance. It has been developed in line with national policy, including the Suicide Prevention Strategy for England written by the Department of Health and Social Care.  The Nottingham and Nottinghamshire Suicide Prevention Strategic Steering Group is comprised of key partners from across Nottingham and Nottinghamshire, including Bassetlaw, who work collaboratively to develop, implement and monitor the Strategy and Action Plan. The Suicide Prevention Strategic Steering Group reports into the Nottingham and Nottinghamshire Integrated Care System (ICS), Mental Health and Social Care Board and both Nottingham and Nottinghamshire Health and Wellbeing Boards. The Strategy and refreshed Action Plan has bee approved by the County and City Health and Wellbeing Boards.  The overall aim of the Nottingham City and Nottinghamshire Suicide Prevention Strategy is to decrease the rate of suicide and self-harm in the local populations by proactively improving the populations mental health and wellbeing and by responding to known risks for suicide. The Strategy comprehensively sets out the factors associated with suicide and those groups who may be at increased risk of suicide including consideration to age, gender, physical and mental health and disability. The refreshed Action Plan includes new actions relating to older adults, children and young people, and people with Autism and neurodiversity.  The Strategy has identified five local priorities which are key areas for action:   * At risk groups: identifying early those groups at risk of suicide, and ensure they have access to evidence-based interventions (men, men in contact with the criminal justice system, children and young people, students and those with self-harm as a risk factor). * Use of data: making the best use of data in a timely manner to inform activity. * Bereavement support: ensuring availability of prompt bereavement support for those affected by suicide. * Staff training: providing effective training for frontline staff to recognise and respond to suicide risks. * Media: engagement with the media to ensure responsible reporting in line with guidance.   In 2020, the Nottingham and Nottinghamshire Suicide Prevention Strategic Steering Group was successful in securing funding for three years from NHS England and Improvement as part of the national Wave 4 suicide prevention improvement programme to further develop suicide prevention work across the Nottinghamshire Integrated Care System (ICS) through the appointment of a dedicated programme manager and additional key priorities of work. Wave 4 is underpinned by engagement with people with lived experience of suicide through their own suicidal thoughts, attempts or bereavement by suicide.  Nottingham and Nottinghamshire Wave 4 Suicide Prevention Programmes key themes align to the local strategic priorities and reflect known local need:   * Coproduction and engagement. * Improving the competency, compassion, knowledge and skills of the workforce and communities through training. * Universal and targeted communication and public awareness campaigns. * Prevention and targeted support for high-risk groups. * Further improving local intelligence through enhancing real time surveillance.   The Wave 4 programme is underpinned by engagement and co-production with people with lived experience to inform developments. The Wave 4 programme has a focus on the groups: men, children and young people, LGBTQ+ and ages 35-64. Activities include targeted communications, support and campaigns.  There are other groups covered in the Wave 4 Programme that are not part of the protected characteristics. This includes deprivation, those with no contact with mental health and domestic violence/ substance misuse. Targeted suicide prevention support and communications are planned to be developed for these specific groups. Small grant support will work with people less likely to be in contact with mental health services and provide services and support in a community setting where people are already accessing other support. This will also be available within the most deprived communities. Training will also be developed for non-statutory services such as domestic abuse and substance misuse services to support identification of suicide risk and appropriate responses.  The overall impact of the Suicide Prevention Strategy and Action Plan is to decrease the rate of self-harm and suicide. This will target at risk groups and the whole population. Those with protected characteristics are included in this, suggesting an overall positive impact. | |

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| **2** | **Protected Characteristics: Is there a potential positive or negative impact based on:** |

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| Age |  |  |  |
| Disability |  |  |  |
| Gender reassignment |  |  |  |
| Pregnancy & maternity |  |  |  |
| Race  Including ethnic origin, colour or nationality |  |  |  |
| Religion or belief |  |  |  |
| Sex (gender) |  |  |  |
| Sexual orientation |  |  |  |
| Marriage or civil partnership |  |  |  |

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| **3** | **Where there are potential negative impacts for protected characteristics these should be detailed including consideration of the equality duty, proposals for how they could be mitigated (where possible) and meaningfully consulted on:** |

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| How do the potential impacts affect people with protected characteristics *What is the scale of the impact?* | How might negative impact be mitigated or explain why it is not possible | How will we consult |
| **General**  Protected characteristics discussed below have been specifically referred to in the Nottingham City and Nottinghamshire County Suicide Prevention Strategy and Action Plan as evidence indicates these groups are at increased risk of suicide. The rationale for the protected characteristics identified as having a neutral impact is due to a lack of evidence of these groups being at increased risk of suicide. The impacts affect these groups as a population, rather than individually.  **Age**  Age has been given a positive impact. The strategy recognises that locally children, young people and students are a priority group.  The strategy acknowledges that nationally over 65s who experience social isolation are at a higher risk of suicide. Wave 4 highlights that over 65s in Nottinghamshire have a higher rate of suicide than national levels.  The refreshed Action Plan includes actions relating to children and young people, students and older adults.  **Disability**  The refreshed Action Plan specifically mentions autism, neurodiversity, learning disabilities and people with long-term conditions. This addresses disability where suicide risk has been identified. Additional risk will be identified with the use of local data to identify and additional need.  **Sex (Gender)**  The local risk groups include a focus on men. The local data reflects that males is an increased risk factor for suicide over the female gender, which is seen nationally. As a priority group, they will be identified early, and it will be ensured they have access to evidence-based interventions.  **Sexual Orientation**  Sexual orientation (LGBTQ+) is a known national risk factor. This is identified in the Strategy and Action Plan. Wave 4 involves increasing targeted suicide prevention support to people in groups with an increased suicide risk. This includes people in LGBTQ+ groups. | * In the Strategy and Action Plan, it has not been possible to fully assess all protected characteristics due to the lack of recorded data e.g., ethnicity and sexual orientation in regard to completed suicides. * Recent advent of using police-reported data via real time surveillance holds promise for providing a clearer picture of ethnicity breakdown and other protected characteristics marked as neutral. * The planned development of a real time surveillance database will provide further possibilities for more detailed local analysis for other protected characteristics and risk-factors locally. The refreshed Action Plan includes an action to review the minimum data set for real time surveillance. * The Wave 4 programme, which will support delivery of the Strategy, has fully considered local data and national evidence in relation to those groups most at risk of suicide and consideration is given as to how best meet the needs of those groups through the planned developments. * An evidence review related to suicide prevention and older adults is included in the refreshed Action plan and has been carried out to minimise the negative impact. * Training for schools, early help services and education providers provide a population level response to suicide prevention for children and younger adults. * Planned targeted suicide prevention communications for people of middle age and older age cohorts. * Self-harm mapping pathway for all-ages and will plan to consider accessibility of support for those over 65. * Any additional negative impacts for age can be mitigated through monitoring local data. * Information pack and training for Primary Care staff to identify risk among people with long-term conditions within the Primary Care settings and direct them to the   appropriate support and services.   * Monitoring data by gender through real time surveillance and identifying interventions as required. * Male specific communication messages and targeted campaigns to be developed. * The Wave 4 programme includes opportunity to pilot targeted support for those groups most at risk. A proposal to pilot targeted support for men is proposed in 2022/2023. * This group needs a greater focus and in the future should be included as an at-risk group. * Evidence reviews will be considered as well as ensuring targeted support to LGBTQ+ communities. * Pro-active targeted communications will be developed that are appropriate to this group. | * The Suicide Prevention Strategic Steering Group meets bi-monthly to discuss and monitor progress against all protected characteristics. * The Wave 4 engagement group, the Real Time Surveillance steering group and Stakeholder Network provide additional oversight and expertise. * Link with NHSE Midlands Regional Suicide Prevention Lead to learn from work on postvention responses and adopt learning to the local suicide cluster response plan guidance. * CCG for Primary Care Services. * Stakeholder Network via groups who work with this protected characteristic. * Wave 4 Engagement group * Stakeholder Network particularly VCS groups * Consultation with LGBTQ+ groups as part of Stakeholder Network. * Wave 4 lived experience engagement group- include LGBTQ+ members where possible. |

**Part B: Feedback and further mitigation**

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| **4** | **Summary of consultation feedback and further amendments to proposal / mitigation** |
| Overall, the Strategy and Action Plan addresses protected characteristics, particularly focussing on the groups/characteristics identified as being at higher risk of suicide/self-harm.  Key recommendations are   * Ensure continued monitoring/evaluation of Real Time Surveillance Data to identify any additional at-risk groups which need to be included as priority groups, giving particular consideration to protected characteristics. * Carry out Equality Impact Assessments for any new pieces of work, specifically in relation to commissioning of specific services/interventions to ensure there is no negative impact. * Where possible ensure the Wave 4 engagement group is reflective of the local population characteristics particularly reflecting the at risk/priority groups. * Use information provided by the Stakeholder Network to ensure equity is considered * Review actions related to LGBTQ+ and agree interventions as required. * Ensure that developments taken forward as part of the Wave 4 programme identify which groups and characteristics are at increased risk of suicide and self-harm based on local intelligence and national evidence and plans are put in place to address any inequalities. * Monitor the impact of the Action Plan and Wave 4 Programme to ensure that developments are effective in supporting those groups and characteristics at increased risk of suicide and that there is equity of access. | |

Completed EqIAs should be sent to [equalities@nottscc.gov.uk](mailto:equalities@nottscc.gov.uk) for publishing on the Council’s website before any decision is made.