



Equality Impact Assessment (EqIA)

Introduction

This EqIA is for:

Oral Health Promotion Service

Details are set out:

Service specification (due to be published in August 2015)

Officers undertaking the assessment:

Geoff Hamilton – Performance & Needs Assessment Manager

Assessment approved by:

Dr Kate Allen, Service Director

Date: July 2015

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 Equality Duty.

Part A: Impact, consultation and proposed mitigation

1 What are the potential impacts of proposal? *Has any initial consultation informed the identification of impacts?*

Impacts to the revised service are predominantly positive. The revised service is more cognisant of people with protected characteristics than the previous one, aiming to target groups at risk of poor oral health outcomes more effectively. These include people who are: homeless or move frequently, such as Gypsy, Roma and Traveller communities; who are socially isolated or excluded; who are older and frail; who have physical or mental disabilities; who are from a lower socio-economic group; who live in a disadvantaged area; who smoke or misuse substances (including alcohol); who have a poor diet; from some black, Asian and minority groups, for example people of South Asian origin; who are, or have been, in care; and carers for any of the above.

The one **potential** negative impact is upon universal provision of oral health resources (packs of toothpaste and toothbrushes) to children and pregnant women. The contents and distribution of the oral health resource packs will be dependent upon cost and will be agreed with the commissioner and the local Consultant in Dental Public Health once costs are known. This means that oral health resources may now be targeted more at children and pregnant women in geographic areas with a higher risk of poor oral health outcomes, rather than a 100% universal offer as was the case previously. This, however, is not certain yet and it may yet be that if resources can be sourced within budget, they can still be offered on a universal basis.

The shift in resource is to enable provision to be made for vulnerable adults and older people and for a new supervised tooth brushing programme in targeted nurseries and primary schools.

As there are no major substantive changes to the service specification, no consultation has been undertaken to date to inform the identification of impacts.

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

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|-------------------------------------------------------------------------|----------------------------------------------|----------------------------------------------|----------------------------------------------------|
| Age | <input checked="" type="checkbox"/> Positive | <input type="checkbox"/> Negative | <input type="checkbox"/> Neutral Impact |
| Disability | <input checked="" type="checkbox"/> Positive | <input type="checkbox"/> Negative | <input type="checkbox"/> Neutral Impact |
| Gender reassignment | <input type="checkbox"/> Positive | <input type="checkbox"/> Negative | <input checked="" type="checkbox"/> Neutral Impact |
| Pregnancy & maternity | <input type="checkbox"/> Positive | <input checked="" type="checkbox"/> Negative | <input checked="" type="checkbox"/> Neutral Impact |
| Race <small>including origin, colour or nationality</small> | <input checked="" type="checkbox"/> Positive | <input type="checkbox"/> Negative | <input type="checkbox"/> Neutral Impact |
| Religion | <input type="checkbox"/> Positive | <input type="checkbox"/> Negative | <input checked="" type="checkbox"/> Neutral Impact |
| Gender | <input type="checkbox"/> Positive | <input type="checkbox"/> Negative | <input checked="" type="checkbox"/> Neutral Impact |
| Sexual orientation <small>including gay, lesbian or bisexual</small> | <input type="checkbox"/> Positive | <input type="checkbox"/> Negative | <input checked="" type="checkbox"/> Neutral Impact |

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:

| How do the potential impacts affect people with protected characteristics <i>What is the scale of the impact?</i> | How might negative impact be mitigated or explain why it is not possible | How will we consult |
|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------|
| <p>Oral health resources may now be targeted more at children and pregnant women in geographic areas with a higher risk of poor oral health outcomes, rather than a 100% universal offer as was the case previously.</p> <p>The scale is as yet uncertain and depends on the cost of the resources. It may yet be that if resources can be sourced within budget, they can still be offered on a universal basis.</p> | <p>A graded variety of resources could be developed, so that <i>all</i> children and pregnant women receive something – i.e. packs with information material in areas of better oral health outcomes; packs of information leaflets, toothbrushes and toothpaste in areas of poorer oral health outcomes.</p> | <p>Consultation will be scoped with the new provider ‘in contract’ once they are appointed and the resource costs are known.</p> |

Part B: Feedback and further mitigation

4 Summary of consultation feedback and further amendments to proposal / mitigation

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| <p>Not applicable - the service specification contains more information and can be read in conjunction with this EqlA (from August 2015 when the invitation to tender is published).</p> |
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