

**Equality Analysis (EA) (formally Equality Impact Assessment)
Record Form**

Revised April 2011

Department: Public Health

Team or Service Area Leading Assessment: Adults and Health improvement

Title of Policy/ Service or Function: Sexual Health Action Plan

Proposals to introduce and alter services

Date of proposals: 21st October 2013

Committee/Team: Strategic Commissioning subgroup

Lead Officer: Judith Mills

STEP 1 - IDENTIFYING THE PURPOSE OR AIMS

1. What type of policy, service or function is this?

Existing New/ proposed Changing/ updated

2. What is the aim and purpose of the policy, service or function?

The plan indicates the commissioning and provider actions to improve the sexual health of the population over the next 3 years.

3. Please outline any proposals being considered.

To continue to increase the range and accessibility of clinical treatment services.
 To continue to target at risk groups for screening and awareness
 To review marketing of services to target older at risk people.
 To review delivery and materials for people with a learning disability
 To continue and expand targeted work in relation to young people and risk taking behaviour

4. What outcomes do we want to achieve?

Ensure the enjoyment of sexual relations without exploitation, oppression or abuse
 Reduce the incidence of unwanted pregnancy
 Achieve the absence and avoidance of sexually transmitted infections

5. Who is the policy, service or function intended to help/ benefit?

Universal but with targeted work at those at higher risk of sexual ill health.
Also supporting those people living with HIV.

6. Who are the main stakeholders/ customers/ communities of interest?

Universal but higher risk groups include young people, men who have sex with men, sex workers

7. Does the policy, service or function have any existing aims in relation to Equality/ Diversity or community cohesion?

The action plan includes target groups:-
Young people
Older people
LGB+T / men who have sex with men
People with a learning disability
People living with HIV
Improve community cohesion through reducing on street sex work

STEP 2 - CONSIDERING EXISTING INFORMATION AND WHAT THIS TELLS YOU

8. Please summarise the main data/ research and performance management information in the box below.

<i>Data/ information</i>
See 2013 health needs assessment
<i>Research or comparative information</i>
See 2013 health needs assessment
<i>Key findings of consultation and feedback</i>
See health needs assessment and gaps analysis

9. What are the impacts or effects for Key Protected Characteristics?

<i>Age</i>
<p>Increasing incidence of STIs in older people. Need to market and target increasing awareness of the over 50s</p> <p>Continue to raise aspirations of young women to reduce teenage conceptions</p> <p>Undertake an analysis of trends in STIs, by age band</p>
<i>Disability</i>
<p>Need to ensure clinical service delivery is responding with tailored information for people with a learning disability</p> <p>Support people of working age, living with HIV who are not in the workforce to access education, training or employment.</p>
<i>Gender Reassignment</i>
<p>Continue to support transgender community development work promoting sexual health and the prevention of Blood born Viruses</p>
<i>Marriage and Civil partnership</i>
<p>This group is fully included.</p>
<i>Pregnancy and Maternity</i>
<p>Need to ensure antenatal contraception is appropriately delivered by training health visitors</p>

Race
Need to ensure that services are responding appropriately to the increasing number of people from minority ethnic communities and from other EU countries
Religion and Belief
Need to ensure that information on SRE and PHSE is available for young people to access
Sex
Monitor uptake of services
Sexual Orientation
Continued targeted work to raise awareness, screen and treat groups at higher risk of poor sexual health, including men who have sex with men.

12. What do you know about how the proposals could affect community cohesion?

The proposals will promote community cohesion through normalising HIV screening for the whole Blackpool population.

In addition the proactive work to reduce/ better manage street sex workers will promote community cohesion, whilst promoting sexual health and protecting the vulnerable.

Activities to reduce sexual violence.

STEP 3 - ANALYSING THE IMPACT

13. Is there any evidence of higher or lower take-up by any group or community, and if so, how is this explained?

Uptake of sexual health services reflects need with the exception of HIV screening in the general population.

14. Do any rules or requirements prevent any groups or communities from using or accessing the service?

There are concerns that not all young people receive high quality consistent

PHSE that ensures they are able to access services needed.

15. Does the way a service is delivered/ or the policy create any additional barriers for any groups of disabled people?

The action plan addresses the need to revisit information provision for people with a learning disability.

16. Are any of these limitations or differences “substantial” and likely to amount to unlawful discrimination?

Yes No

If yes, please explain (referring to relevant legislation) in the box below

17. If No, do they amount to a differential impact, which should be addressed?

Yes No

If yes, please give details below.

Plan in place to address

STEP 4 - DEALING WITH ADVERSE OR UNLAWFUL IMPACT

18. What can be done to improve the policy, service, function or any proposals in order to reduce or remove any adverse impact or effects identified?

Action plan aims to address an issues raised through the needs assessment or review of service delivery

19. What would be needed to be able to do this? Are the resources likely to be available?

Resources needed have been identified and are in place

20. What other support or changes would be necessary to carry out these actions?

STEP 5 - CONSULTING THOSE AFFECTED FOR THEIR VIEWS

21. What feedback or responses have you received to the findings and possible courses of action? Please give details below.

The plan responds to comments received over the last 3 years in relation to services and gaps from individuals and forums. The action plan is in draft form and has not yet been circulated to key patient/resident forums for comment until approved to do so.

22. If you have not been able to carry out any consultation, please indicate below how you intend to test out your findings and recommended actions.

The draft action plan when approved for consultation will be presented/circulated to Health Watch, LGBT forum, LD Partnership Board, Fairness commission stakeholders,

STEP 6 - ACTION PLANNING

See detailed action plan

STEP 7 - ARRANGEMENTS FOR MONITORING AND REVIEW

The action plan will be monitored by the Strategic Commissioning Subgroup on behalf of the Health and Wellbeing Board,

Date completed:

Signed:

Name:

Position: