



Equality Impact Assessment

The purpose of an Equality Impact Assessment (EqIA) is to improve the work of the Integration Joint Board (Orkney Health and Social Care Partnership) by making sure it promotes equality and does not discriminate. This assessment records the likely impact of any changes to a function, policy, or plan by anticipating the consequences, and making sure that any negative impacts are eliminated, or minimised, and positive impacts are maximised.

1. Identification of Function, Policy or Plan	
Name of function / policy / plan to be assessed.	Community Led Support Implementation Plan 2022/23.
Service / service area responsible.	All social care services.
Name of person carrying out the assessment and contact details.	Shaun Hourston-Wells, Project Manager, Orkney Health and Social Care Partnership. Email: Shaun.hourston-wells@orkney.gov.uk . Telephone: 01856873535 extension 2414.
Date of assessment.	13 May 2022.
Is the function / policy / plan new or existing? (Please indicate also if the service is to be deleted, reduced, or changed significantly).	This is an existing function that is expected to expand its scope over the next 12 months.

2. Initial Screening	
What are the intended outcomes of the function / policy / plan?	To extend the scope and reach of Community Led Support (CLS).
State who is, or may be affected by this function / policy / plan, and how.	All people receiving social care services may be affected by CLS. In time, it is proposed that CLS may extend to some community-based health services.
Is the function / policy / plan strategically important?	CLS is one of the stated Priorities in the 2022 – 2025 iteration of the IJB's Strategic Plan.

<p>How have stakeholders been involved in the development of this function / policy / plan?</p>	<p>This plan articulates how it is intended to involve stakeholders in the development of CLS, from the statutory and third sectors, as well as the general public.</p>
<p>Is there any existing data and / or research relating to equalities issues in this policy area? Please summarise. E.g. consultations, national surveys, performance data, complaints, service user feedback, academic / consultants' reports, benchmarking (see equalities resources on OIC information portal).</p>	<p>The annual reports of the National Development Team for Inclusion, the organisation behind the concept and ideals of CLS, detail the positive impact that CLS has had upon those receiving social services, in areas where CLS has been embedded for some time.</p>
<p>Is there any existing evidence relating to socio-economic disadvantage and inequalities of outcome in this policy area? Please summarise. E.g. For people living in poverty or for people of low income. See The Fairer Scotland Duty Interim Guidance for Public Bodies for further information.</p>	<p>Please complete this section for proposals relating to strategic decisions). No documented evidence available.</p>
<p>Could the function / policy have a differential impact on any of the following equality strands?</p>	<p>(Please provide any evidence – positive impacts / benefits, negative impacts, and reasons).</p>
<p>1. Race: this includes ethnic or national groups, colour, and nationality.</p>	<p>There is considered to be no detrimental impact on this group of people.</p>
<p>2. Sex: a man or a woman.</p>	<p>There is considered to be no detrimental impact on this group of people.</p>
<p>3. Sexual Orientation: whether a person's sexual attraction is towards their own sex, the opposite sex or to both sexes.</p>	<p>There is considered to be no detrimental impact on this group of people.</p>
<p>4. Gender Reassignment: the process of transitioning from one gender to another.</p>	<p>There is considered to be no detrimental impact on this group of people.</p>
<p>5. Pregnancy and maternity.</p>	<p>There is considered to be no detrimental impact on this group of people.</p>

6. Age: people of different ages.	There is considered to be no detrimental impact on this group of people. Many people receiving care services are older people and are considered likely to benefit from the ethos of CLS.
7. Religion or beliefs or none (atheists).	There is considered to be no detrimental impact on this group of people.
8. Caring responsibilities.	There is considered to be no detrimental impact on this group of people. Many people receiving services may also have caring responsibilities and are considered likely to benefit from the ethos of CLS.
9. Care experienced.	There is considered to be no detrimental impact on this group of people.
10. Marriage and Civil Partnerships.	There is considered to be no detrimental impact on this group of people.
11. Disability: people with disabilities (whether registered or not).	There is considered to be no detrimental impact on this group of people. Many people receiving care services have a disability and are considered likely to benefit from the ethos of CLS.
12. Socio-economic disadvantage.	There is considered to be no detrimental impact on this group of people. Those at a socio-economic advantage are considered likely to benefit from CLS.

3. Impact Assessment

Does the analysis above identify any differential impacts which need to be addressed?	No negative impacts are anticipated to any of the protected groups.
How could you minimise or remove any potential negative impacts?	N/A.
Do you have enough information to make a judgement? If no, what information do you require?	Yes.

4. Conclusions and Planned Action

Is further work required?	No.
What action is to be taken?	N/A.
Who will undertake it?	N/A.
When will it be done?	N/A.

How will it be monitored? (e.g. through service plans).

N/A.

Signature:

Date: 17.05.22.

Name: Shaun Hourston-Wells.