



Equality Impact Assessment

The purpose of an Equality Impact Assessment (EqIA) is to improve the work of the Integration Joint Board (Orkney Health and Care) 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.	Orkney Alcohol and Drugs Partnership Scheme of Delegation and Operational Framework 2021.
Service / service area responsible.	Orkney Alcohol and Drugs Partnership (ADP).
Name of person carrying out the assessment and contact details.	Katie Spence.
Date of assessment.	26 January 2021.
Is the function / policy / plan new or existing? (Please indicate also if the service is to be deleted, reduced or changed significantly).	Existing – proposed change to move from commissioning and budget decisions to being delegated to the ADP Strategy Group on an ongoing basis.

2. Initial Screening	
What are the intended outcomes of the function / policy / plan?	To allow the ADP Strategy Group to agree spend against the annual allocation from the Scottish Government including commissioning of services based on the recommendations from the ADP Commissioning Group.
State who is, or may be affected by this function / policy / plan, and how.	Service providers who seek to tender for services within the remit of the framework and people with substance misuse service needs that fall within the remit of the services commissioned under this framework.
Is the function / policy / plan strategically important?	Yes, the Framework allows the expertise of the ADP Strategy Group to make decisions around the spend of the annual allocation from the Scottish Government in a timely and efficient

	manner.
How have stakeholders been involved in the development of this function / policy / plan?	ADP Strategy Group makes decisions on commissioning of services through with representation of stakeholders built into the Terms of Reference of the group.
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).	The ADP commissioning process takes account of the collection of outcomes data from the services that receive funding and this data collection informs commissioning decisions. The outcomes that are to be collected are specified in the commissioning documentation.
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.	Please complete this section for proposals relating to strategic decisions).
Could the function / policy have a differential impact on any of the following equality strands?	(Please provide any evidence – positive impacts / benefits, negative impacts and reasons).
1. Race: this includes ethnic or national groups, colour and nationality.	No adverse impact on any particular race.
2. Sex: a man or a woman.	No adverse impact due to gender.
3. Sexual Orientation: whether a person's sexual attraction is towards their own sex, the opposite sex or to both sexes.	No adverse impact due to sexual orientation.
4. Gender Reassignment: the process of transitioning from one gender to another.	No adverse impact due to gender reassignment.
5. Pregnancy and maternity.	No adverse impact due to pregnancy.

6. Age: people of different ages.	No adverse impact due to age.
7. Religion or beliefs or none (atheists).	No adverse impact due to religion.
8. Caring responsibilities.	No adverse impact in relation to caring roles.
9. Care experienced.	No adverse impact to those that are care experienced.
10. Marriage and Civil Partnerships.	No adverse impact on people who are married or in civil partnerships.
11. Disability: people with disabilities (whether registered or not).	The approach is intended to have a positive impact on people who have become disabled in terms of being unable to work due to substance misuse issues.
12. Socio-economic disadvantage.	The approach is intended to have a positive impact on people who have become socio-economically disadvantaged in terms of their dependency and / or to substance misuse issues by commissioning of services specific to their needs.
13. Isles-Proofing	No. Commissioning of alcohol and drug treatment services on the outer-isles of Orkney do not occur separately but all services commissioned are expected to be inclusive of the outer islands. The adoption of the use of digital health options such as Near Me enables improved service delivery and accessibility. There are no residential detoxification services available in Orkney and those needing these services are required to leave Orkney to access them in the Mainland.

3. Impact Assessment

Does the analysis above identify any differential impacts which need to be addressed?	No.
How could you minimise or remove any potential negative impacts?	Not required.
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?	Continue to monitor ADP Commissioned Services in line with the Commissioning Framework.
Who will undertake it?	ADP Co-ordinator and ADP Commissioning Sub Group.
When will it be done?	Six monthly accountability templates and annual service visits within the duration of the commissioning period.
How will it be monitored? (e.g. through service plans).	ADP Strategy Group ultimately accountable following recommendations from the ADP Commissioning Group.

Signature: *Katie M Spence*

Date: 26 January 2021

Name: Katie Spence