

## Equality Impact Assessment (EIA) Tool

Please ensure you have read the [guidance pages](#) prior to completing this tool

### Document Control

<b>Control Details:</b>	
Title of EIA/ Decision (DDM):	Integrated Wellbeing Service (IWS)
Budget booklet code (if applicable):	
<b>If this is a budget EIA please ensure the title and budget booklet code is the same as the title used within the budget booklet</b>	
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### Document Amendment Record

Version	Author	Date
V1	Vicky Lewis	XX/05/2023

**Contributors/Reviewers** (Anyone who has contributed to this document to be named)

Name	Title role	Date
Matt Corder	Public Health Principal	XX/XX/2023
David Johns	Deputy Director of Public Health	XX/XX/2023

**Glossary of Terms**

Term	Description
IWS	Integrated Wellbeing Service
EIA	Equality Impact Assessment - a systematic and evidence-based process, which verifies that Nottingham City Council policies and practices are equality proof and not discriminatory. This document is an EIA.
DDM	Delegated Decision Making – part of Nottingham City Council’s formal decision-making processes.

**Section 1 – Equality Impact (NCC staff/ Service users/ Citizen/ Community impact)**

**1. a. Brief description of proposal/ policy/ service to be assessed**

Nottingham City Council is responsible for improving the health and wellbeing of the local population. This responsibility, along with the overarching aim to increase healthy life expectancy, is made explicit within Nottingham City Council’s [Strategic Plan 2023 -2027](#) “People outcome – living well in our communities”. The Plan states: “Nottingham will be a healthy, diverse and inclusive place, where people have the best possible chance of living long, independent and healthy lives. Our health is impacted by almost every aspect of our lives – our homes, our education, our employment, our local

environment and more. To live a good life, we all need support at some point. This means people being able to access care and support when it is needed”.

The latest analysed data (June 2022) shows that healthy life expectancy for both men and women in Nottingham is significantly lower than the England average: with men living 5.7 years less in good health, and women 6.8 years less in good health. The risk factors which contribute most to the onset of disability and the foreshortening of life include smoking and tobacco, diet, nutrition and physical inactivity, and alcohol and drug use.

The Council commission services to reduce the prevalence and impact of these modifiable behavioural risk factors such as tobacco use, physical inactivity, and unhealthy diet. Historically, these have generally been commissioned as separate services and delivered by multiple service providers.

Current contracts are due to end 31 March 2024. A new offer of support is required that ensures health and wellbeing services meet the current and future needs of local communities and deliver best value. Therefore, from April 2024, the Council intends to amalgamate a range of health improvement interventions into one service model, referred to as an Integrated Wellbeing Service (IWS).

The Council will seek to commission a single Provider, that will be responsible for delivering the service functions in an innovative, dynamic, and flexible manner across Nottingham, ensuring Best Value with the following objectives:

- Maintaining and improving the health of Nottingham City citizens
- Preventing future ill-health and its negative impacts on the local population
- Reducing future and existing pressures on local health and care services
- Putting the Service User at the centre of provision, in-line with the personalisation agenda.

The services that are within scope of Nottingham City Council’s IWS are:

- **Stop smoking service** – including development of a Cannabis Cessation offer and a Quit Vaping offer for young people
- **Targeted Physical activity programme**
- **Eating and Moving for Good Health programme (Tier 1)** - universal behavioural interventions for all ages i.e. prevention and reinforcement of healthy eating and physical activity messages
- **Healthy lifestyle programmes (Tier 2)** - lifestyle weight management services providing diet, nutrition, lifestyle, and behaviour change advice
  - Adult (18+) - community and digital based programmes

- Children and family (5+) - school and community-based programmes
- **Health MOT programme**
- **Mental and emotional wellbeing** - 5 ways to wellbeing programme
- **Alcohol use screening and brief advice**
- **Substance use screening and referral**
- **Gambling screening and referral**
- **Healthy conversations training** - brief advice for healthcare, schools, and voluntary care sector
- **Social marketing** i.e. targeted campaigns with local information

The Service will provide a single-entry point to health and wellbeing support for residents wishing to address lifestyle and behavioural factors (such as smoking or weight management) whilst considering support and signposting around the wider determinants such as emotional wellbeing and other factors that might be negatively impacting their health.

The Service will focus on taking a life course approach to prevention of ill health, valuing the health and wellbeing of both current and future generations. Addressing the wider determinants of health will help improve overall population health, individual wellbeing and the conditions which people are born, live, learn and work.

The Service will follow a community asset-based approach, by working 'with' rather than 'in' communities. The behaviour change service will link with and compliment the wider offers in the community and provide additional resources to further develop healthy communities and environments locally.

### **1. b. Information used to analyse the equalities implications**

Recent data for Nottingham shows the need for a change of approach:

- Almost seven in ten adults (66.9%) in Nottingham City are living with overweight or obesity and 28.4% of adults are living with obesity; significantly higher than the England average (63.5% and 25.3% respectively)
- Just under one in four (24.1%) adults in Nottingham are inactive, comparable to the England average
- Four of the top five largest causes of (preventable) death and noncommunicable diseases in Nottingham are directly or in-directly related to diet and physical inactivity

- Nottingham recorded 3,145 hospital admissions per 100,000 where obesity was a factor compared to a national rate of 1,869 admissions per 100,000; this is the 4th highest in England
- 1 in 4 children has overweight or obesity when starting Primary School and that number is 2 in 5 when starting Secondary School
- The smoking rates in Nottingham have been reducing steadily with adult smoking prevalence of 16.5% but is still higher than the national average 13% in 2021
- Smoking is one of the largest causes of ill-health and early death in Nottingham. It has an impact on children and young people's lives through pregnancy to adolescence, with 13% of pregnant women smoking at the time of delivery. This is significantly higher than the national average of 9.1%
- Nottingham is due to miss the Smoke Free 2030 target currently by 10 years.

The service will provide holistic health and wellbeing support to Nottingham's citizens across the life-course. The proposed service is to provide timely, flexible, and personalised support to enable citizens to make positive and sustainable changes to health behaviours. The proposed service will support service users to develop new routines and healthy habits addressing health related needs in citizen's lives that impact negatively on their health and wellbeing. This will include direct support or signposting to community or health and social care services.

The creation of an integrated service will provide:

- Simplified access to support for citizens via a single point of entry
- One recognisable brand for Nottingham City's health improvement services
- The ability to take a more holistic view of an individual's needs and create a support plan that considers their personal barriers and reasons for change
- Streamlined referral routes for healthcare professional use
- Citizens can be supported for a range of needs in one place rather than being passed between services and only need to tell their story once
- Increased capacity to support the needs of the population Ability to provide community and school-based activity to promote positive health behaviours to all.

To help the Council make sure that proposals meet the current needs and demands of the population, we are asking service users, strategic partners, and local services for their views. The Council are also keen to hear the views of the wider public, those who may wish to access health improvement services directly or support services in the future.

The feedback will help the strategic commissioning process to:

- Understand how services can be structured to best meet the needs of current and future service users across Nottingham
- Achieve the best health outcomes possible with the funding available, and to understand how these outcomes can be met whilst ensuring Best Value
- Identify the key issues around services, to agree what the priorities in Nottingham should be for the coming years
- Gain a deeper understanding of how to best utilise and improve pathways and links between services.

Engagement and consultation on the Council's proposals will take place in two stages: stage 1 will inform the development of an Integrated Wellbeing Service model and stage 2 will refine and finalise an Integrated Wellbeing Service model. Activities to date include:

- A public engagement survey underway collecting views and local need from citizens and partner organisations via Nottingham Engage Hub (ongoing - survey is live for an 8-week duration, from 31st March 2023 to 30th May 2023)
- Soft market engagement online event with providers (17th April 2023)
- Input regarding service design from key stakeholders such as ICB, University of Nottingham, Nottingham CVS, Nottingham City Council, Nottingham University Hospitals (ongoing)

As part of the Integrated Wellbeing Service Commissioning Review, analysis of existing services and support took place.

As the Integrated Wellbeing Service provision is not currently in place, specific monitoring information is currently unavailable.

**1. c. Who will be affected and how?**

Impact type (NCC staff/ Service users/ Citizens/ Community)	Equality group/ individual	Positive	Negative	None	Reasons for your assessment (Including evidence)	Details of mitigation/ actions taken to advance equality	Details of any arrangements for future monitoring of equality impact  (Including any action plans)
	<b>People from different ethnic groups</b>	<b>X</b>			Service specification includes requirement to provide evidence-based behaviour change interventions tailored to meet the specific health improvement needs of target groups or individuals with consideration given to their and cultural and ethnic background and make onward referrals to appropriate services	Requirement in service specification to identify ways of engaging people of all ethnicities, and especially ethnicities who are subjected to health inequalities and non-English speaking communities and those families who are relatively new to the UK health system	Activity monitoring related to engagement with IWS by ethnicity, refugee or asylum seeker services and by families who do not speak English and update the EIA and approach as a result
	<b>Men</b>			<b>X</b>	Provision of integrated wellbeing service is not likely to have a differential impact based on sex or gender		
	<b>Women</b>			<b>X</b>	As above		
	<b>Trans</b>			<b>X</b>	As above		
	<b>Disabled people/ carers</b>	<b>X</b>			Service specification includes requirement to provide evidence-based behaviour change	Requirement in service specification to identify ways of engaging people with	Activity monitoring related to engagement with IWS by disability

					interventions tailored to meet the specific health improvement needs of target groups or individuals with consideration given to their disability, mental health, and carer status and make onward referrals to appropriate services	disabilities and caring responsibilities with appropriate behaviour management interventions or necessary referrals	and carer status and update the EIA and approach as a result
	<b>Pregnancy and maternity</b>	<b>X</b>			Service specification includes requirement to provide evidence-based behaviour change interventions tailored to meet the specific health improvement needs of pregnant individuals and throughout early parenthood and make onward referrals to appropriate services	Requirement in service specification to identify ways of engaging with those supporting during pregnancy and early parenthood e.g. weight management and stop smoking interventions	Activity monitoring related to engagement with IWS with those supporting during pregnancy e.g. family nurse partnership, midwives/ health visitors
	<b>Marriage/Civil Partnership</b>			<b>X</b>	Provision of integrated wellbeing service is not likely to have a differential impact-based marriage/civil partnership status		
	<b>People of different faiths/ beliefs and those with none</b>			<b>X</b>	Provision of integrated wellbeing service is not likely to have a differential impact based on faiths/beliefs and those with none		
	<b>Lesbian/ Gay/ Bisexual people</b>			<b>X</b>	Provision of integrated wellbeing service is not likely to have a differential impact based on sexuality		



	<b>Older</b>			<b>X</b>	Service specification includes requirement to provide evidence-based behaviour change interventions tailored to meet the specific health improvement needs of older individuals and make onward referrals to appropriate services	Requirement in service specification to identify ways of engaging older people with appropriate behaviour management interventions or necessary referrals	
	<b>Younger</b>			<b>X</b>	Service specification includes requirement to provide evidence-based behaviour change interventions tailored to meet the specific health improvement needs of younger individuals and make onward referrals to appropriate services	Requirement in service specification to identify ways of engaging younger people with appropriate behaviour management interventions or necessary referrals	
	<b>Other</b> (e.g. looked after children, cohesion/ good relations, vulnerable children/ adults), socio-economic background.  <b><i>Please underline the group(s) /issue more adversely affected or which benefits.</i></b>	<b>X</b>			Service specification includes requirement to provide evidence-based behaviour change interventions tailored to meet the specific health improvement needs to target/ prioritise and engage with the most deprived areas across Nottingham and make onward referrals to appropriate services		

**1. d. Summary of any other potential impact** (including cumulative impact/ human rights implications):

None known at this stage.

## Section 2 – Equality outcome

**Please include summary of the actions identified to reduce disproportionate negative impact, advance equality of opportunity and foster good relations. Please pull out all of the mitigations you have identified and summarise them in this action plan**

Equality Outcome	Adjustments to proposal and/or mitigating SMART actions	Lead Officer	Date for Review/ Completion	Update/ complete
Eliminate unlawful discrimination, harassment, victimisation, and any other conduct prohibited by the Equality Act 2010.	<p>Procurement of service to include requirement for provider to give evidence of how they will do this.</p> <p>Contract review process to include equality impact report and notification immediately of any adverse incidents or complaints with regards Equality Act duties</p>	Matt Corder, Public Health Principal	Monitor on a quarterly basis for the entirety of the contract length	
Advance equality of opportunity between those who share a protected characteristic and those who don't	<p>Procurement of service to include requirement for provider to give evidence of how they will do this.</p> <p>Contract review process to include equality impact report the evidence of activity that contributes to this outcome</p>	Matt Corder, Public Health Principal	Monitor on a quarterly basis for the entirety of the contract length	

<p>Foster good relations between those who share a protected characteristic and those who don't</p>	<p>Procurement of service to include requirement for provider to give evidence of how they will do this.</p> <p>Contract review process to include equality impact report the evidence of activity that contributes to this outcome</p>	<p>Matt Corder, Public Health Principal</p>	<p>Monitor on a quarterly basis for the entirety of the contract length</p>	
<p>(Please add other equality outcomes as required – e.g. mitigate adverse impact identified for people with a disability)</p>				

**Please note: All actions will need to be uploaded onto Pentana**

### Section 3 – Approval and publishing

<p><b>The assessment must be approved by the manager responsible for the service /proposal.</b></p> <p><b>David Johns, Deputy Director of Public Health, Nottingham City Council</b></p>	<p><b>Date sent for advice:</b></p> <p><b>16/05/23</b></p>
<p><b>Approving Manager Signature:</b></p>	<p><b>Date of final approval:</b></p>

**For further information and guidance, please visit the [Equality Impact Assessment Intranet Pages](#)  
Alternatively, you can contact the Equality and Employability Team by telephone on 0115 876 2747**

**Send document or link for advice and/ or publishing to: [edi@nottinghamcity.gov.uk](mailto:edi@nottinghamcity.gov.uk)**

**PLEASE NOTE: FINAL VERSION MUST BE SENT TO EQUALITIES OTHERWISE RECORDS WILL REMAIN INCOMPLETE.**

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