

ROYAL BOROUGH OF WINDSOR AND MAIDENHEAD
EQUALITY IMPACT ASSESSMENT

EqIA : Drug and Alcohol Services Recommissioning

Essential information

Items to be assessed: (please mark 'x')

Strategy		Plan		Project		Service procedure	X
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Responsible officer	Sian Smith	Service area	Public Health	Directorate	Adults, Health and Housing
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Stage 1: EqIA Screening (mandatory)	01/09/2021	Stage 2 : Full assessment (if applicable)	
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Approved by Head of Service / Overseeing group/body / Project Sponsor:

"I am satisfied that an equality impact has been undertaken adequately."

Signed by (print): Anna Richards

Dated: 01/09/2021

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EqlA : Drug and Alcohol Services Recommissioning

Guidance notes

What is an EqlA and why do we need to do it?

The Equality Act 2010 places a 'General Duty' on all public bodies to have 'due regard' to:

- Eliminating discrimination, harassment and victimisation and any other conduct prohibited under the Act.
- Advancing equality of opportunity between those with 'protected characteristics' and those without them.
- Fostering good relations between those with 'protected characteristics' and those without them.

EqlAs are a systematic way of taking equal opportunities into consideration when making a decision, and should be conducted when there is a new or reviewed strategy, policy, plan, project, service or procedure in order to determine whether there will likely be a detrimental and/or disproportionate impact on particular groups, including those within the workforce and customer/public groups. All completed EqlA Screenings are required to be publicly available on the council's website once they have been signed off by the relevant Head of Service or Strategic/Policy/Operational Group or Project Sponsor.

What are the "protected characteristics" under the law?

The following are protected characteristics under the Equality Act 2010: age; disability (including physical, learning and mental health conditions); gender reassignment; marriage and civil partnership; pregnancy and maternity; race; religion or belief; sex; sexual orientation.

What's the process for conducting an EqlA?

The process for conducting an EqlA is set out at the end of this document. In brief, a Screening Assessment should be conducted for every new or reviewed strategy, policy, plan, project, service or procedure and the outcome of the Screening Assessment will indicate whether a Full Assessment should be undertaken.

Openness and transparency

RBWM has a 'Specific Duty' to publish information about people affected by our policies and practices. Your completed assessment should be sent to the Strategy & Performance Team for publication to the RBWM website once it has been signed off by the relevant manager, and/or Strategic, Policy, or Operational Group. If your proposals are being made to Cabinet or any other Committee, please append a copy of your completed Screening or Full Assessment to your report.

Enforcement

Judicial review of an authority can be taken by any person, including the Equality and Human Rights Commission (EHRC) or a group of people, with an interest, in respect of alleged failure to comply with the general equality duty. Only the EHRC can enforce the specific duties. A failure to comply with the specific duties may however be used as evidence of a failure to comply with the general duty.

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Stage 1 : Screening (Mandatory)

1.1 What is the overall aim of your proposed strategy/policy/project etc and what are its key objectives?

The overall aim of the service is to provide drug and alcohol services for all residents in RBWM who are aged over 18 from early help and self care digital options, through to psychosocial recovery support and opiate substitution therapy for residents with severe addiction needs.

1.2 What evidence is available to suggest that your proposal could have an impact on people (including staff and customers) with protected characteristics? Consider each of the protected characteristics in turn and identify whether your proposal is Relevant or Not Relevant to that characteristic. If Relevant, please assess the level of impact as either High / Medium / Low and whether the impact is Positive (i.e. contributes to promoting equality or improving relations within an equality group) or Negative (i.e. could disadvantage them). Please document your evidence for each assessment you make, including a justification of why you may have identified the proposal as “Not Relevant”.

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Protected characteristics	Relevance	Level	Positive/negative	Evidence
Age	Relevant	Medium	Positive	<p>The proportion of adults who regularly drink over 14 units in a week in England has been found to increase with age up to age 64 years, whereas taking recreational drugs is more common in young adults.</p> <p>In RBWM, data shows that the age of residents attending for drug treatment or drug and alcohol combined ranges from 18 to 69, with most clients in the age range of 30 to 50 years. Client age for residents attending services for alcohol treatment only ranges from 18 to 70 years, with most clients in the age range of 30 to 60 years.</p> <p>In line with national statistics on drug and alcohol need, it is more likely that younger adults will benefit from the drug or drug and alcohol services whilst a wider age range of adults will benefit from alcohol services. The service will be of less relevance for those aged 75+.</p>

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Disability	Relevant	Medium	Positive	<p>People with learning disabilities are less likely to misuse substances than the general population. However, it has been proposed that when people with learning disabilities do drink alcohol there's an increased risk that they will develop a problem with it.</p> <p>It's important to note that little is known about the health of the 'hidden majority' of adults with mild learning disabilities who don't require specific learning disability services. These residents are likely to misuse substances and not access support from drug and alcohol services.</p> <p>The new service will provide support at population-level through a prevention and early intervention approach to reducing harm. An easily accessible online programme of support will focus on identifying and targeting a wider range of residents with substance misuse needs. Targeted campaigns will focus on people with learning disabilities to engage them with substance misuse support to enable them to use behavioural change programmes through digital media, such as smartphone apps.</p>
Gender re-assignment	Not Relevant	N/A	N/A	
Marriage/civil partnership	Not Relevant	N/A	N/A	

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Pregnancy and maternity	Relevant	Medium	Positive	<p>The Chief Medical Officers for the UK recommend that if women are pregnant or planning to become pregnant, the safest approach is not to drink alcohol at all, as consuming any amount of alcohol during pregnancy could lead to long-term harm to the baby.</p> <p>The Crystal Midwifery Team at Wexham Park Hospital have close links with drug and alcohol services to provide support for pregnant residents with complex substance abuse issues, and the new service proposed from 01 April 2022 will integrate drug and alcohol Recovery Support Workers across a range of existing services, including Children's Services.</p> <p>As the new service will also include accessible digital support options at prevention and early intervention level, women who are pregnant or planning a pregnancy will be able to access self-care advice, guidance and support to reduce and abstain from drugs and alcohol.</p>
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Race	Relevant	Medium	Positive	<p>Overall, the research literature reports higher rates of abstinence among Black, Asian, and Minority Ethnic (BAME) communities. However, it has been suggested that there may be underreporting of substance misuse in BAME groups.</p> <p>The needs assessment in RBWM showed us that residents attending for drug treatment or drug and alcohol combined, are predominantly White British (87%). Similarly, residents attending services for alcohol treatment only are predominantly White British (86%).</p> <p>Communication and engagement is a key part of the service. We have learnt a lot through the COVID pandemic about how to successfully engage with people from different communities within RBWM. Targeted campaigns will support uptake and use of the service by people from BAME communities. The inclusion of a digital offer for people drinking at hazardous (but not harmful) levels will also enable people from BAME communities to engage with substance misuse support without needing to be physically present in the drug and alcohol service.</p>
Religion and belief	Not relevant	N/A	N/A	

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Sex	Relevant	Medium	Positive	<p>National data suggest that women are more likely to drink at lower levels or not drink at all compared to men. For example, the 2019 Health Survey for England, showed that:</p> <ul style="list-style-type: none"> • 17% men and 23% women did not drink in the last 12 months; • twice as many men than women drank at increasing or higher risk levels of over 14 units a week (30% of men and 15% of women); • 57% of adults (53% men and 62% women) drank at levels which put them at lower risk of alcohol-related harm; drinking 14 units or less in the last week¹. <p>RBWM data shows that residents attending for drug treatment or drug and alcohol combined, are predominantly male (74%). For new clients who started treatment within the last year, the gender split is more equal (47% male, 49% female) indicating that the 'long term' clients tend to be male. In residents attending services only for alcohol treatment the gender split is more equal with 57% male and 43% female.</p> <p>Whilst every resident over the age of 18 has equal opportunity to access the service, the pattern of need (based on national data) and service us (local data) suggest that men may directly benefit from the service more than women.</p>
Sexual orientation	Not relevant	N/A	N/A	

Outcome, action and public reporting

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Screening Assessment Outcome	Yes / No / Not at this stage	Further Action Required / Action to be taken	Responsible Officer and / or Lead Strategic Group	Timescale for Resolution of negative impact / Delivery of positive impact
Was a significant level of negative impact identified?	No	No		N/A
Does the strategy, policy, plan etc require amendment to have a positive impact?	No	No		N/A

If you answered **yes** to either / both of the questions above a Full Assessment is advisable and so please proceed to Stage 2. If you answered “No” or “Not at this Stage” to either / both of the questions above please consider any next steps that may be taken (e.g. monitor future impacts as part of implementation, re-screen the project at its next delivery milestone etc).

Stage 2 : Full assessment

2.1 : Scope and define

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2.1.1 Who are the main beneficiaries of the proposed strategy / policy / plan / project / service / procedure? List the groups who the work is targeting/aimed at.

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2.1.2 Who has been involved in the creation of the proposed strategy / policy / plan / project / service / procedure? List those groups who the work is targeting/aimed at.

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2.2 : Information gathering/evidence

2.2.1 What secondary data have you used in this assessment? *Common sources of secondary data include: censuses, organisational records.*

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2.2.2 What primary data have you used to inform this assessment? *Common sources of primary data include: consultation through interviews, focus groups, questionnaires.*

Eliminate discrimination, harassment, victimisation

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Protected Characteristic	Advancing the Equality Duty : Does the proposal advance the Equality Duty Statement in relation to the protected characteristic (Yes/No)	If yes, to what level? (High / Medium / Low)	Negative impact : Does the proposal disadvantage them (Yes / No)	If yes, to what level? (High / Medium / Low)	Please provide explanatory detail relating to your assessment and outline any key actions to (a) advance the Equality Duty and (b) reduce negative impact on each protected characteristic.
Age					
Disability					
Gender reassignment					
Marriage and civil partnership					
Pregnancy and maternity					
Race					
Religion and belief					
Sex					
Sexual orientation					

Advance equality of opportunity

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Sex					
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Foster good relations

Protected Characteristic	Advancing the Equality Duty : Does the proposal advance the Equality Duty Statement in relation to the protected characteristic (Yes/No)	If yes, to what level? (High / Medium / Low)	Negative impact : Does the proposal disadvantage them (Yes / No)	If yes, to what level? (High / Medium / Low)	Please provide explanatory detail relating to your assessment and outline any key actions to (a) advance the Equality Duty and (b) reduce negative impact on each protected characteristic.
Age					
Disability					
Gender reassignment					
Marriage and civil partnership					
Pregnancy and maternity					
Race					
Religion and belief					
Sex					
Sexual orientation					

2.4 Has your delivery plan been updated to incorporate the activities identified in this assessment to mitigate any identified negative impacts? If so please summarise any updates.
These could be service, equality, project or other delivery plans. If you did not have sufficient data to complete a thorough impact assessment, then an action should be incorporated to collect this information in the future.

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