

Section 4

Equality Analysis Toolkit

**Proposal to Reduce Rates of Smoking in Pregnancy in
Lancashire County**

For Decision Making Items

May 2014

What is the Purpose of the Equality Decision-Making Analysis?

The Analysis is designed to be used where a decision is being made at Cabinet Member or Overview and Scrutiny level or if a decision is being made primarily for budget reasons. The Analysis should be referred to on the decision making template (e.g. E6 form).

When fully followed this process will assist in ensuring that the decision-makers meet the requirement of section 149 of the Equality Act 2010 to have due regard to the need: to eliminate discrimination, harassment, victimisation or other unlawful conduct under the Act; to advance equality of opportunity between persons who share a relevant protected characteristic and persons who do not share it; and to foster good relations between persons who share a relevant protected characteristic and persons who do not share it.

Having due regard means analysing, at each step of formulating, deciding upon and implementing policy, what the effect of that policy is or may be upon groups who share these protected characteristics defined by the Equality Act. The protected characteristics are: age, disability, gender reassignment, race, sex, religion or belief, sexual orientation or pregnancy and maternity – and in some circumstances marriage and civil partnership status.

It is important to bear in mind that "due regard" means the level of scrutiny and evaluation that is reasonable and proportionate in the particular context. That means that different proposals, and different stages of policy development, may require more or less intense analysis. Discretion and common sense are required in the use of this tool.

It is also important to remember that what the law requires is that the duty is fulfilled in substance – not that a particular form is completed in a particular way. It is important to use common sense and to pay attention to the context in using and adapting these tools.

This process should be completed with reference to the most recent, updated version of the Equality Analysis Step by Step Guidance (to be distributed) or EHRC guidance - [EHRC - New public sector equality duty guidance](#) Document 2 "Equality Analysis and the Equality Duty: Guidance for Public Authorities" may also be used for reference as necessary.

This toolkit is designed to ensure that the section 149 analysis is properly carried out, and that there is a clear record to this effect. The Analysis should be completed in a timely, thorough way and should inform the whole of the decision-making process. It must be considered by the person making the final decision and must be made available with other documents relating to the decision.

The documents should also be retained following any decision as they may be requested as part of enquiries from the Equality and Human Rights Commission or Freedom of Information requests.

Support and training on the Equality Duty and its implications is available from the County Equality and Cohesion Team by contacting

AskEquality@lancashire.gov.uk

Specific advice on completing the Equality Analysis is available from your Directorate contact in the Equality and Cohesion Team or from Jeanette Binns

Jeanette.binns@lancashire.gov.uk

Name/Nature of the Decision

Proposal to Reduce Rates of Smoking in Pregnancy in Lancashire County

What in summary is the proposal being considered?

Rates of smoking during pregnancy remain higher in Lancashire than England as a whole (18.3% vs. 12.7%) and it is highly unlikely that the County will achieve the national ambition to reduce smoking at time of delivery (SATOD) rates to 11% or less by the end of 2015. In response, reducing smoking in pregnancy is one of the key priority areas of Lancashire County Council's Strategy for Health and Wellbeing. A scoping of the smoking in pregnancy pathways currently operating across Lancashire County was undertaken in January and February 2014. This highlighted significant variances in programme delivery and gaps in current provision in line with the inherited legacy of the three PCTs. Therefore, in line with NICE guidance, a comprehensive pan-Lancashire programme needs to be undertaken to systemise and embed organisational change to ensure all pregnant smokers are offered effective support in order to reduce the rates of smoking.

Further to this, a pan-Lancashire 'Tackling Smoking in Pregnancy' multi-disciplinary project group has been formulated as a sub-group of the Tobacco Free Lancashire Alliance, which has collectively developed a two-year 'Tackling Smoking in Pregnancy Action Plan'. The plan will be jointly implemented by Public Health Teams, Maternity Services within Hospital NHS Trusts, CCG's, Stop Smoking Services and the Community and Voluntary Sector from Lancashire County, Blackburn with Darwen and Blackpool.

The proposed plan will facilitate implementation of a standardised opt-out pathway, comprehensive training for frontline staff, development of information for pregnant smokers and accurate data collection to reduce smoking rates during pregnancy and ensure every child in Lancashire has the best start in life. A two-year investment of £255k is recommended from the Public Health budget to fund the Lancashire County Council components of this plan between 2014 and 2016.

Is the decision likely to affect people across the county in a similar way or are specific areas likely to be affected – e.g. are a set number of branches/sites to be affected? If so you will need to consider whether there are equality related issues associated with the locations selected – e.g. greater percentage of BME residents in a particular area where a closure is proposed as opposed to an area where a facility is remaining open.

Yes – the proposal is part of a Pan Lancashire plan targeting pregnant women.

The proposed plan will facilitate implementation of a standardised opt-out pathway, comprehensive training for frontline staff, development of information for pregnant smokers and accurate data collection to reduce smoking rates during pregnancy and ensure every child in Lancashire has the best start in life.

The Public Health Outcomes Framework has emphasised the continued commitment to reducing health inequalities and increasing healthy life expectancy. In order to achieve this, giving every child the best start in life must be made a priority and this must include protecting babies from the damage of tobacco smoke, both before and after birth. In view of this, decreasing smoking rates during pregnancy remains a public health priority in Lancashire and the earlier a mother can quit her habit the greater the health benefit for both herself and her baby.

The commissioning proposal to implement the Public Health components of a two-year 'Pan-

Lancashire Tackling Smoking in Pregnancy Action Plan' across Lancashire County will be programme managed by Public Health. However, this will be collectively implemented by the wider pan-Lancashire 'Tackling Smoking in Pregnancy' multi-disciplinary project group, which includes Public Health Teams, Maternity Services within Hospital NHS Trusts, Health Visiting teams in Community NHS Trusts, CCG's, Stop Smoking Services and the Community and Voluntary Sector from Lancashire County, Blackburn with Darwen and Blackpool.

Could the decision have a particular impact on any group of individuals sharing protected characteristics under the Equality Act 2010, namely:

- Age
- Disability including Deaf people
- Gender reassignment
- Pregnancy and maternity
- Race/ethnicity/nationality
- Religion or belief
- Sex/gender
- Sexual orientation
- Marriage or Civil Partnership Status

In considering this question you should identify and record any particular impact on people in a sub-group of any of the above – e.g. people with a particular disability or from a particular religious or ethnic group.

It is particularly important to consider whether any decision is likely to impact adversely on any group of people sharing protected characteristics to a disproportionate extent. Any such disproportionate impact will need to be objectively justified.

No. Approval of the commissioning proposal to implement the Public Health components of a two-year 'Pan-Lancashire Tackling Smoking in Pregnancy Action Plan' across Lancashire County is all embracing and as such, is not considered to have an adverse impact on any groups of individuals sharing protected characteristics.

This pan Lancashire proposal targets pregnant women, protecting babies from the damage of tobacco smoke, both before and after birth to ensure every child in Lancashire is given the best start in life. It is therefore designed to have a positive impact on both pregnant women and their babies.

Maternal smoking during pregnancy remains the greatest cause of foetal ill health and death. Babies born to women who smoke during their pregnancy are lighter than those born to non-smoking mothers and low birth weight is the most significant risk factor in perinatal and infant mortality. Rates of smoking during pregnancy remain higher in Lancashire than England as a whole (18.3% vs. 12.7%) and this is reflected in the greater rates of Lower Birth Weight prevalence across the County (8.2% compared to 7.3% nationally). Consequently, reducing smoking in pregnancy is one of the key priority areas of Lancashire County Council's Strategy for Health and Wellbeing.

Additionally, children of smokers are far more likely to become smokers themselves, which perpetuates cycles of health inequalities and deprivation. The Public Health Outcomes

Framework has emphasised the continued commitment to reducing health inequalities and increasing healthy life expectancy. In order to achieve this, giving every child the best start in life must be made a priority and this must include protecting babies from the damage of tobacco smoke, both before and after birth.

Furthermore, the Tobacco Free Lancashire partnership has endorsed a three year Tobacco Control Strategy for Lancashire (2014-2016) addressing further actions to protect groups sharing protected characteristics. The partnership is committed to build a strategic partnership within Lancashire to support Tobacco Control programmes and action to reduce smoking prevalence and niche tobacco use, protect adults and children from exposure to second-hand smoke and help all residents to live tobacco free lives.

If you have answered "Yes" to this question in relation to any of the above characteristics, – please go to Question 1.

If you have answered "No" in relation to all the protected characteristics, please briefly document your reasons below and attach this to the decision-making papers. (It goes without saying that if the lack of impact is obvious, it need only be very briefly noted.)

Approval of the commissioning proposal to implement the Public Health components of a two-year 'Pan-Lancashire Tackling Smoking in Pregnancy Action Plan' across Lancashire County is not considered to have an adverse impact on any groups of individuals sharing protected characteristics. It is designed to have a positive impact on both pregnant women and protecting babies from the damage of tobacco smoke, both before and after birth.

Question 1 – Background Evidence

What information do you have about the different groups of people who may be affected by this decision – e.g. employees or service users (you could use monitoring data, survey data, etc to compile this). As indicated above, the relevant protected characteristics are:

- Age
- Disability including Deaf people
- Gender reassignment/gender identity
- Pregnancy and maternity
- Race/Ethnicity/Nationality
- Religion or belief
- Sex/gender
- Sexual orientation
- Marriage or Civil Partnership status (in respect of which the s. 149 requires only that due regard be paid to the need to eliminate discrimination, harassment or victimisation or other conduct which is prohibited by the Act).

In considering this question you should again consider whether the decision under consideration could impact upon specific sub-groups e.g. people of a specific religion or people with a particular disability. You should also consider how the decision is likely to affect those who share two or more of

the protected characteristics – for example, older women, disabled, elderly people, and so on.

N/A.

Question 2 – Engagement/Consultation

How have you tried to involve people/groups that are potentially affected by your decision? Please describe what engagement has taken place, with whom and when.

(Please ensure that you retain evidence of the consultation in case of any further enquiries. This includes the results of consultation or data gathering at any stage of the process)

N/A.

Question 3 – Analysing Impact

Could your proposal potentially disadvantage particular groups sharing any of the protected characteristics and if so which groups and in what way?

It is particularly important in considering this question to get to grips with the actual practical impact on those affected. The decision-makers need to know in clear and specific terms what the impact may be and how serious, or perhaps minor, it may be – will people need to walk a few metres further to catch a bus, or to attend school? Will they be cut off altogether from vital services? The answers to such questions must be fully and frankly documented, for better or for worse, so that they can be properly evaluated when the decision is made.

Could your proposal potentially impact on individuals sharing the protected characteristics in any of the following ways:

- Could it discriminate unlawfully against individuals sharing any of the protected characteristics, whether directly or indirectly; if so, it must be amended. Bear in mind that this may involve taking steps to meet the specific needs of disabled people arising from their disabilities
- Could it advance equality of opportunity for those who share a particular protected characteristic? If not could it be developed or modified in order to do so?
- Does it encourage persons who share a relevant protected characteristic to participate in public life or in any activity in which participation by such persons is disproportionately low? If not could it be developed or modified in order to do so?
- Will the proposal contribute to fostering good relations between those who share a relevant protected characteristic and those who do not, for example by tackling prejudice and promoting understanding? If not could it be developed or modified in order to do so? Please identify any findings and how they might be addressed.

N/A

Question 4 –Combined/Cumulative Effect

Could the effects of your decision combine with other factors or decisions taken at local or national level to exacerbate the impact on any groups?

For example - if the proposal is to impose charges for adult social care, its impact on disabled people might be increased by other decisions within the County Council (e.g. increases in the fares charged for Community Transport and reductions in respite care) and national proposals (e.g. the availability of some benefits) . Whilst LCC cannot control some of these decisions, they could increase the adverse effect of the proposal. The LCC has a legal duty to consider this aspect, and to evaluate the decision, including mitigation, accordingly.

If Yes – please identify these.

N/A

Question 5 – Identifying Initial Results of Your Analysis

As a result of your analysis have you changed/amended your original proposal?

Please identify how –

For example:

Adjusted the original proposal – briefly outline the adjustments

Continuing with the Original Proposal – briefly explain why

Stopped the Proposal and Revised it - briefly explain

N/A

Question 6 - Mitigation

Please set out any steps you will take to mitigate/reduce any potential adverse effects of your decision on those sharing any particular protected characteristic. It is important here to do a genuine and realistic evaluation of the effectiveness of the mitigation contemplated. Over-optimistic and over-generalised assessments are likely to fall short of the “due regard” requirement.

Also consider if any mitigation might adversely affect any other groups and how this might be managed.

N/A

Question 7 – Balancing the Proposal/Countervailing Factors

At this point you need to weigh up the reasons for the proposal – e.g. need for budget savings; damaging effects of not taking forward the proposal at this time – against the findings of your analysis. Please describe this assessment. It is important here to ensure that the assessment of any negative effects upon those sharing protected characteristics is full and frank. The full extent of actual adverse impacts must be acknowledged and taken into account, or the assessment will be inadequate. What is required is an honest evaluation, and not a marketing exercise. Conversely, while adverse effects should be frankly acknowledged, they need not be overstated or exaggerated. Where effects are not serious, this too should be made clear.

N/A

Question 8 – Final Proposal

In summary, what is your final proposal and which groups may be affected and how?

N/A

Question 9 – Review and Monitoring Arrangements

Describe what arrangements you will put in place to review and monitor the effects of your proposal.

N/A

Equality Analysis Prepared By: Joanne McCullagh

Position/Role: Public Health Specialist – Tobacco Control & Stop Smoking Services
Equality Analysis Endorsed by Line Manager and/or Chief Officer: Janet Walton,
Head of Public Health Commissioning, Adults and Wellbeing, Adult Services, Health
and Wellbeing Directorate

Decision Signed Off By: Dr Sakthi Karunanithi, Director of Public Health, Adult
Services, Health and Wellbeing Directorate

Cabinet Member/Chief Officer or SMT Member: County Councillor Azhar Ali, Cabinet
Member for Health & Wellbeing

Please remember to ensure the Equality Decision Making Analysis is submitted with the decision-making report and a copy is retained with other papers relating to the decision.

Where specific actions are identified as part of the Analysis please ensure that an EAP001 form is completed and forwarded to your Directorate's contact in the Equality and Cohesion Team.

Directorate contacts in the Equality & Cohesion Team are:

Karen Beaumont – Equality & Cohesion Manager

Karen.beaumont@lancashire.gov.uk

Contact for Adult & Community Services Directorate

Jeanette Binns – Equality & Cohesion Manager

Jeanette.binns@lancashire.gov.uk

Contact for Environment Directorate, Lancashire County Commercial Group and One Connect Limited

Saulo Cwerner – Equality & Cohesion Manager

Saulo.cwerner@lancashire.gov.uk

Contact for Children & Young Peoples Directorate

Pam Smith – Equality & Cohesion Manager

Pam.smith@lancashire.gov.uk

Contact for Office of the Chief Executive and the County Treasurer's Directorate

Thank you