



# EQUALITY ANALYSIS (EA) - SCREENING TEMPLATE

**GUIDANCE TOOL** This Tool assists services in determining whether their plans and decisions will require a full Equalities Analysis. EAs help the Council comply with its duty under s.149 of the Equality Act 2010 to have “due regard” to specified equality matters. They are required in most cases but, in some cases, an EA is not necessary or is only necessary for certain aspects of a decision. The full EA template is available here:

<https://foresthub.walthamforest.gov.uk/services/information-governance/governance-and-law/council-meetings>

The Council understands that whilst its equalities duty applies to all services, it is going to be more relevant to some decisions than others. We need to be pragmatic and ensure that the detail of Equality Analyses (EAs) are proportionate to the impact of decisions on the equality

duty. In some cases a full EA is not necessary and/or the equalities duties do not apply. In other cases, only part of a decision will require an EA to ensure the Council has due regard to its equality duties. The following examples are intended to assist:

Where will a full EA be required?	Where might an EA not be required?
<p>In short, wherever a decision has a more than minimal or theoretical <b>adverse or negative</b> impact on those with protected characteristics, for example, if the Council is considering:</p> <ul style="list-style-type: none"><li>• Ceasing a service</li><li>• Reducing a service or reducing it in particular areas, e.g. closing an office in Leyton but not Walthamstow</li><li>• Changes to the way a service is delivered, e.g. moving to personalisation or moving to online access only</li><li>• Changes to eligibility criteria, rules or practices for a service</li><li>• Changes to discretionary fees and charges</li></ul>	<ul style="list-style-type: none"><li>• Where it can be proven that the decision has no equalities impact– with particular focus on negative impacts on service users and residents</li><li>• Where it can be proven that the decision has a minimal or theoretical equalities impact (and so does not need to be considered)</li><li>• Where the decision is mandatory and there is no element of discretion (e.g. to adopt a member’s code of conduct or similar)</li><li>• In rare cases, where a previous EA exists and a review shows that it is still relevant at the time of the final decision, i.e. the facts have not changed</li></ul>

## Important:

- The EA screening tool should not be used to mask over any equality impacts or as a “get out”.
- There can be a negative equality impact even if you think that overall, you are proposing changes that will make services better. If there is an adverse or negative impact, you must complete a full EA.
- **Negative** impacts are often indirect, i.e. a rule that is on its face of universal impact but has greater impact on some groups in practice e.g. due to the ethnic makeup of an area.
- In most cases, the screening process requires a degree of collation and analysis of

evidence. If this requires a lot of work, consider whether it is actually simpler to omit the screening process and undertake a full EA.

- The equality duty **continues** up to and after the final decision. If proposals or facts change before the final decision, any screening tool will need to be reviewed and evidenced.
- Any consultation undertaken should also inform the screening process, e.g. issues raised by those affected. Monitoring should take place after a decision as part of service delivery.
- The completed screening template will be attached to Cabinet or other decision making report and so it must include sufficient detail to justify the decision not to carry out a full EA.

## What to do?

The screening process should be used on **ALL** new proposals, policies, projects, functions, saving proposals, major developments or planning applications, or when revising them, if there is no negative equality impact or there is uncertainty about whether there is a negative equality impact. **However**, If your proposal is of a significant nature and it is apparent from the outset that a full EA will be required, then you do not need to complete this screening template and can progress directly to a full EA. If a negative/adverse impact has been identified during completion of the screening tool, a full EA **MUST** be undertaken. If you have not identified any negative/ adverse impacts arising from your proposal you do not need to undertake a full EA. However, make sure you have explained clearly why the

proposal does not have any negative/adverse impact. **If your proposal is going to Cabinet or Committee (e.g. Planning or Licensing) and you are not undertaking a full EA, you must:**

- a. share your report and completed screening tool with Equalities ([equalities@walthamforest.gov.uk](mailto:equalities@walthamforest.gov.uk)), who will check and challenge your findings *and*
- b. use the following wording under the Equality & Diversity paragraph in the Cabinet report: “An initial screening exercise of the equality impact of this decision was undertaken and determined there was no / minimal impact (delete as appropriate) on the Council’s equality duty.” Attach the completed template as an appendix to your report.

**1. Proposal / Project Title: Health Scrutiny Committee Themed Review 2021-22: Primary Care**

**2. Brief summary of the above: (include main aims, proposed outcomes, recommendations / decisions sought)**

Following the Covid-19 pandemic, Health Scrutiny decided to look at how primary care in Waltham Forest operates, the challenges faced and what can be done to improve access to primary care. The final three meetings of the cycle focused on primary care, with detailed discussions with officers, NHS partners and witnesses. A set of recommendations have been crafted largely based around ensuring new models of care are effectively communicated to service users, to ensure they understand the behaviour changes required as we move beyond the pandemic.

**Formal recommendations:**

**Recommendation 1:**

That GP surgeries endeavour to be flexible, ensuring patients can access primary care in the way most appropriate for them

**Recommendation 2:**

That, where alternative means of interacting with Primary Care exist, for example collecting repeat prescriptions at pharmacies or using GP email addresses, these are clearly communicated to patients

**Recommendation 3:**

That the Council works closely with its NHS partners to promote public health campaigns aimed at preventing patients requiring primary care services

**Recommendation 4:**

That, in the short term, the Council uses its resources to ensure residents know their options around accessing primary care, whether face-to-face, telephone or digital

**Recommendation 5:**

That the Council works with Healthwatch to ensure they have the capacity to survey residents and gather data on how they are experiencing primary care

**Recommendation 6:**

That the CCG/ICS monitors how GP practices triage patients and works with them to refine and roll out the most effective triage methodology

**Recommendation 7:**

That the Council (including public health, housing and other relevant services) works closely with primary care to ensure GPs and other healthcare professionals are able to signpost patients to services that would help improve their overall standard of health

**Recommendation 8:**

That the new model ensures that patients are reassured they are seeing the right healthcare professional for their needs

**Recommendation 9:**

That digital integration is prioritised in the new model, ensuring primary care platforms are well integrated with secondary care, community care and social care services

**Recommendation 10:**

That the historic underinvestment in Waltham Forest compared to other NEL boroughs with respect to primary care services is noted and prioritised for correction by the new ICS

**3. Considering the equality aims (eliminate unlawful discrimination; advance equality of opportunity; foster good relations) indicate for each protected group whether there may be a positive impact, negative (adverse) impact, or no impact arising from the proposal.**

<b>4. Protected Characteristic (Equality Group) <input checked="" type="checkbox"/></b>	<b>Positive Impact</b>	<b>Negative Impact</b>	<b>No Impact</b>	<b>Briefly explain your answer. Consider evidence, data and any consultation.</b> <a href="https://www.walthamforest.gov.uk/content/statistics-about-borough">https://www.walthamforest.gov.uk/content/statistics-about-borough</a>
Age	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The recommendations in this report are based around access to primary care including digital transformation – older people may be more likely to use these services but less likely to be digitally engaged. Recommendations seek to ensure that the needs of older people are met during this period of change.
Disability	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The recommendations in this report are based around access to primary care – disabled people may be more likely to use these services. Recommendations seek to ensure that the needs of disabled are met and that they are informed about access routes.
Pregnancy and Maternity	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The recommendations in this report are based around access to primary care those that are pregnant or just given birth may be more likely to use these services. Recommendations seek to ensure that the needs of all people are met and that they are informed about access routes.
Race	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	This equality group will not be directly affected either positively or negatively by the recommendations in this report, which makes general recommendations to support access to primary care for all equality groups.
Religion or Belief	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	This equality group will not be affected insofar as there is no direct correlation between its members' situation and wellbeing and the issues tackled within the framework of this report.
Sex (Including Gender Re-assignment)	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	This equality group will not be directly affected either positively or negatively by the recommendations in this report, which makes general recommendations to support access to primary care for all equality groups.
Sexual Orientation	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	This equality group will not be directly affected either positively or negatively by the recommendations in this report, which makes general recommendations to support access to primary care for all equality groups.
Marriage and Civil Partnership	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	This equality group will not be directly affected either positively or negatively by the recommendations in this report, which makes general recommendations to support access to primary care for all equality groups.
<b>5. There are no negative/adverse impact(s)</b> If you have not identified any negative/adverse impacts please briefly explain your answer, providing evidence to support decision.	The recommendations encompassed within this report should not result in any negative/adverse impacts. They are the result of desk-based research and extensive involvement with relevant services and external witnesses. No specific concerns regarding adverse equalities impacts were identified through this process. The report aims to bring about a positive impact to those equality groups which most need it whilst ensuring that no adverse consequences are to be felt			

	by other groups.		
<b>6. Describe how opportunities to advance equality and foster good relations for any of the protected characteristics has been taken up (where relevant).</b>	Click here to enter text.		
<b>7. As a result of this screening is a full EA necessary (Please check <input checked="" type="checkbox"/> appropriate box)</b>	<b>Yes</b>	<b>No</b>	<b>Briefly explain your answer.</b>
	<input type="checkbox"/>	<input checked="" type="checkbox"/>	The recommendations of this report do not directly relate to the provision or commissioning of services. Any further work undertaken as a result of these recommendations may require a full EA in future.
<b>8. Name of Lead Officer: Emily Wood</b>		<b>Job title: Scrutiny Officer</b>	<b>Date screening tool completed: 03 August 2022</b>

Signed off by Head of Service: Head of Electoral and Democratic Services

Name: Ian Buckle

Date: 03 August 2022