


<b>MEETING DATE:</b>	10 April 2014	 <b>North Lincolnshire</b> <b>Clinical Commissioning Group</b>  <b>REPORT TO THE</b> <b>CLINICAL COMMISSIONING GROUP</b> <b>GOVERNING BODY</b>
<b>AGENDA ITEM NUMBER:</b>	Item 7.14	
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## EQUALITY AND DIVERSITY OBJECTIVES AND ACTION PLAN ANNUAL PROGRESS REPORT 2013/2014

<b>PURPOSE/ACTION REQUIRED:</b>	To Receive & Note
<b>CONSULTATION AND/OR INVOLVEMENT PROCESS:</b>	Equality and Diversity Steering Group
<b>FREEDOM OF INFORMATION:</b>	Public

### 1. PURPOSE OF THE REPORT:

In August 2013, North Lincolnshire CCG approved the Equality and Diversity plan for 2013-2015 which outlined the organisation's commitment to the Equality Act 2010 and Human Rights Act 1998 and demonstrated how the CCG plans to achieve compliance with the Acts to ensure the North Lincolnshire population have equality of access to services regardless of any protected characteristics they have.

The plan set out key actions required to ensure this both strategically and at a work stream level. The Equality and Diversity plan was formally published in October 2013, in line with the requirements of the Public Sector Equality Duty.

This Annual Report highlights the key equality-related activities and achievements for the period April 2013 to March 2014, including specific progress made against the agreed Objectives.

### 2. STRATEGIC OBJECTIVES SUPPORTED BY THIS REPORT:

Continue to improve the quality of services	✓
Reduce unwarranted variations in services	✓
Deliver the best outcomes for every patient	✓
Improve patient experience	✓
Reduce the inequalities gap in North Lincolnshire	✓

### 3. IMPACT ON RISK ASSURANCE FRAMEWORK:

Yes	✓	No	
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Failure to comply with the Equality Act 2010, Human Rights Act 1998 and NHS Constitution could lead to the CCG being subject to legal challenge. This action plan mitigates this risk.

**4. IMPACT ON THE ENVIRONMENT – SUSTAINABILITY:**

Yes		No	✓
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**5. LEGAL IMPLICATIONS:**

Yes	✓	No	
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The Equality Act 2010 incorporates a requirement under the Public Sector Equality Duty for the CCG to:

- prepare and publish one or more objectives that it thinks it needs to achieve to further any of the aims of the general equality duty, and
- Publish information to demonstrate its compliance with the general equality duty.

This report supports these requirements as well as those in the Human Rights Act 1998 and the NHS Constitution. Contravention of these will lead to public, organisational, reputational and financial implications. The authorisation of the CCG could also be rescinded.

**6. RESOURCE IMPLICATIONS:**

Yes		No	✓
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Incorporated within existing resource requirements.

**7. EQUALITY IMPACT ASSESSMENT:**

Yes		No	✓
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Not applicable for this progress report – inherent in this work. The action plan document provides a means to monitor and review equality and diversity practices within the organisation and enable the CCG to reach a wider audience as well as connect with harder to reach groups to ensure that they have a public voice in health.

The plan also aims to enable the CCG to excel in their provision and engagement as part of a proactive and positive organisation.

**8. PROPOSED PUBLIC & PATIENT INVOLVEMENT AND COMMUNICATIONS:**

Yes	✓	No	
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Continued and sustained engagement is a key requirement to the progress of E&D and this is incorporated within the action plan.

**9. RECOMMENDATIONS:**

The CCG is asked to: -

- Review and Note the progress made in achieving the organisation's Equality and Diversity Objectives and Action Plan.

## **EQUALITY AND DIVERSITY OBJECTIVES AND ACTION PLAN**

### **ANNUAL PROGRESS REPORT 2013/14**

#### **INTRODUCTION**

In August 2013, North Lincolnshire CCG approved the Equality and Diversity plan for 2013-2015 which outlined the organisation's commitment to the Equality Act 2010 and Human Rights Act 1998 and demonstrated how the CCG plans to achieve compliance with the Acts to ensure the North Lincolnshire population have equality of access to services regardless of any protected characteristics they have. The plan set out key actions required to ensure this both strategically and at a work stream level. The Equality and Diversity plan was formally published in October 2013, in line with the requirements of the Public Sector Equality Duty.

This Annual Report highlights the key equality-related activities and achievements for the period April 2013 to March 2014, including specific progress made against the agreed Objectives.

#### **HIGHLIGHTS**

The CCG's equality objectives are aimed at:

- Increasing input from representatives of the protected groups in the commissioning process and ensuring systems are in place to embed equality in all our commissioning decisions.
- Ensuring that appropriate Equality and Diversity initiatives are taken forward in current year's work plan.

To achieve these, we have a number of key delivery actions in place and a full update is included from page 3. A summary of the key highlights, in terms of progress made to achieve these objectives, follows:

#### **Leadership and Commitment**

Whilst it is not a specific legal requirement, in August 2013, Governing Body members approved the publication of their personal equality and diversity data. This demonstrates their commitment to good leadership and fairness in decision making in relation to promoting equality and diversity.

During December 2013, Governing Body members completed a simple questionnaire covering the 9 protected characteristics identified under the Equality Act 2010. The outcome report provides an anonymous summary of the responses received and is available on the CCG's website at: <http://www.northlincolnshireccg.nhs.uk/equality-and-diversity/publishing-information/>

### **Staff Awareness and Training**

All CCG staff have access to a computer based training package which includes Equality and Diversity training. This is mandatory for all staff to complete and, by the end of March 2014, 100% of staff had completed this training. This is in addition to bespoke equality impact analysis training which was undertaken in September 2013 and training for the Council of Members (which includes General Practitioners) in November 2013.

### **Provider Compliance**

Systems are in place to monitor healthcare provider compliance with the Equality Act. This starts at the service specification development stage, is checked as part of procurement and monitored through regular and robust contract monitoring arrangements.

### **Complaints/Incidents**

Systems are in place to monitor complaints and incidents both at the CCG and occurring at service provider level. These are specifically monitored in relation to equality and diversity issues. In 2013/14, there have not been any complaints or incidents relating to accessibility issues.

### **Stonewall Assessment**

This year, the CCG is proud to have taken part in Stonewall's Healthcare Equality Index 2014. The Stonewall Assessment helps healthcare organisations benchmark and track their progress on equality for lesbian, gay and bisexual patients and communities. Out of the forty four healthcare organisations that took part, eight were CCGs and we are pleased to have scored well in comparison to other CCGs, especially in relation to policy & practice, staff training and communications & engagement. There is still much work to do and the CCG welcomes Stonewall's support in this area.

### **Publishing Information**

One of the ways to help the CCG demonstrate its commitment to embedding a culture of inclusiveness has been to establish an area on its website that is dedicated to promoting Equality and Diversity: <http://www.northlincolnshireccg.nhs.uk/publications/equality-and-diversity/>. It is intended to build up this resource and add in links to local support groups as these become known through the work of the CCG.

## PROGRESS REPORT

### Objective 1

Increase input from representatives of the protected groups in the commissioning process and ensure systems are in place to embed equality in all our commissioning decisions.

Actions	Lead / Support	Timescale	Measure	Progress Report
Establish an Equality and Diversity page on our Website.	Chief Officer / Engagement Services Manager (CSU)	October 2013  <b>Green – Complete</b>	Webpage live	<p>One of the ways to help the CCG demonstrate its commitment to embedding a culture of inclusiveness has been to establish an area on its website that is dedicated to promoting Equality and Diversity:  <a href="http://www.northlincolnshireccg.nhs.uk/publications/equality-and-diversity/">http://www.northlincolnshireccg.nhs.uk/publications/equality-and-diversity/</a></p> <p>These Equality and Diversity pages provide information on the CCG's Equality and Diversity Plan and Objectives, the rights of staff and service users, health information and resources related to equality and diversity, how published information is made accessible as well as results of Equality Impact Analysis.</p> <p>Information is also added to the website regarding the experiences and views of diverse groups:  <a href="http://www.northlincolnshireccg.nhs.uk/equality-and-diversity/health-information-and-resources/">http://www.northlincolnshireccg.nhs.uk/equality-and-diversity/health-information-and-resources/</a></p> <p>It is intended to build up this resource and add in links to local support groups as these become known through the work of the CCG.</p>

Actions	Lead / Support	Timescale	Measure	Progress Report
Further develop a database of individuals and groups with interests in discreet areas of health and social care to support meaningful engagement.	Senior Officer Commissioning Support & Service Change / Engagement Manager (CSU)	End July 2013 and on-going  <b>Amber - In Progress</b>	Database updated to support Healthy Lives, Healthy Futures engagement and monitored by Equality and Diversity Committee.	<p>The CCG has a database of individuals and groups in place but work is currently underway to review this.</p> <p>In early 2014, promotional work will start to launch a new membership model as a way of building up a network of local people, patients, carers, voluntary sector representatives and other partners. Membership will be open to anyone with an interest in health services across North Lincolnshire and will be promoted to diverse groups and individuals through existing networks, partner organisations and general public. Members will be asked a range of 'About You' questions so the CCG can aim for a membership that is representative of the local community.</p>
Plan engagement activity with the aim to capture the particular views of diverse groups.	Senior Officer Commissioning Support & Service Change / Engagement Manager (CSU)	End July 2013 and on-going  <b>Amber - In Progress</b>	Engagement feedback reports demonstrate equality issues.	<p>Local diverse representatives are invited to attend engagement events and get involved in consultation/ engagement work. Examples include Commissioning Intention Workshops, Experience Led Commissioning (where they have expressed an interest in the particular health topic being reviewed) and Healthy Lives, Healthy Futures. Our survey's and questionnaires routinely ask a range of 'About You' questions including, where appropriate, a range of equality related monitoring questions in order that feedback reports can demonstrate whether results are representative of the local community. Equality issues are captured and used to inform service change.</p> <p><a href="http://www.northlincolnshireccg.nhs.uk/get-involved/">http://www.northlincolnshireccg.nhs.uk/get-involved/</a>  <a href="http://www.healthy lives healthy futures.nhs.uk/">http://www.healthy lives healthy futures.nhs.uk/</a></p>

Actions	Lead / Support	Timescale	Measure	Progress Report
Ensure systems are in place to demonstrate how views have influenced commissioning decisions.	Senior Officer Commissioning Support & Service Change / Assistant Senior Officer; Commissioning Support and Service Change	End December 2013 and on-going  <b>Amber – In Progress</b>	Governing Body reports and commissioning plans.	<p>Local diverse groups have been invited to attend a range of commissioning workshops to influence commissioning plans and decisions. Issues raised have been considered by the CCG and responses included within the plan.</p> <p>Recently, the CCG has been engaging on Healthy Lives, Healthy Futures (which is a review of all services across Northern Lincolnshire). The feedback report from phase 1 of our engagement demonstrates the CCG has captured a range of local diverse views.  <a href="http://www.healthyliveshealthyfutures.nhs.uk/get-involved/healthy-lives-healthy-futures-report-phase-1/">http://www.healthyliveshealthyfutures.nhs.uk/get-involved/healthy-lives-healthy-futures-report-phase-1/</a>            Phase 2 is now complete and the data analysis is in progress.</p> <p>The 2014/15 - 2018/19 commissioning plan incorporates the views of public and uses a “you said, we did” approach. The plan is also informed by Experience Led Commissioning (ELC) work. This will continue with further ELC work in 2014/16</p>
Ensure the CCG Governing Body acts as gatekeeper so that no projects or workstream programmes move forward without considering equality issues.	CCG Chair	End July 2013  <b>Green - Complete</b>	Governing Body covering reports. Workstream scope checklists incorporate mechanisms to consider equality issues.	The Governing Body covering report template includes a requirement for authors to demonstrate that, where appropriate, equality issues have been considered. This is also required for reports to Engine Room and other decision making committees, ensuring that no programmes move forward without equality issues being considered.

Actions	Lead / Support	Timescale	Measure	Progress Report
Routinely publish equality data of Governing Body members.	Chief Officer / Engagement Services Manager (CSU)	<p>By March 2014</p> <p><b>Green – Complete</b></p>	CCG Annual Report Website	<p>Whilst it is not a specific legal requirement, in August 2013, Governing Body members approved the publication of their personal equality and diversity data. This demonstrates their commitment to good leadership and fairness in decision making in relation to promoting equality and diversity.</p> <p>During December 2013, Governing Body members were asked to complete a simple questionnaire covering the 9 protected characteristics identified under the Equality Act 2010. The outcome report provides an anonymous summary of the responses received and is available on the CCG's website at:  <a href="http://www.northlincolnshireccg.nhs.uk/equality-and-diversity/publishing-information/">http://www.northlincolnshireccg.nhs.uk/equality-and-diversity/publishing-information/</a>  The survey will be repeated annually in December.</p> <p>In addition, the CCG is not required to publish equality and diversity information for its staff as it employs less than 150 people. However, as part of a national survey the CCG provided their Workforce Equality and Diversity Profile to NHS England and their report is also available on the CCG's website at:  <a href="http://www.northlincolnshireccg.nhs.uk/equality-and-diversity/publishing-information/">http://www.northlincolnshireccg.nhs.uk/equality-and-diversity/publishing-information/</a></p>



Actions	Lead / Support	Timescale	Measure	Progress Report
Monitor uptake of Equality and Diversity training.	Chief Officer / Business Manager	By March 2014  <b>Green - Complete</b>	CCG Annual Report	<p>Equality and Diversity Training is mandatory for all staff. The CCG has a Computer Based Learning System (CBLS) in place and the Equality and Diversity module includes all aspects of equality issues. All staff are expected to complete the training by 31 March 2014 and, indeed, all CCG team members have completed their training for 2013/14. All learners are required to undertake a test at the end of their CBLS learning. Learners are not compliant in the subject matter until the required pass mark has been achieved.</p> <p>Training has been provided to all staff in relation to Equality Impact Analysis in September 2013. Uptake and understanding of Equality and Diversity Training is discussed at staff appraisals. Training has also been provided to the Council of Members (which includes General Practitioners) in November 2013.</p>
Review all relevant policies and procedures to include an Equality Impact Analysis.	Chief Officer / CCG Chair	On-going as part of policy review  <b>Amber – In Progress</b>	EIA completed and published. Governing Body/Committee Reports and minutes.	<p>The CCG has developed an Equality Impact Analysis tool and guidance for all our staff. All policies are reviewed for their impact on Equality as part of their development and review process.</p> <p>The guidance has been circulated to all staff (both within our own organisation and within the Commissioning Support Unit as staff there also write some of our policies). Staff have received training on completing and considering Equality Analysis. Results of the Equality Analysis will be published on our website with the policy – website being re-designed.</p> <p>All Human Resources Policies are reviewed by Trade Union representatives (there is a specific Equalities Representative on the Joint Trade Union Partnership Forum - JTUPF).</p>

Actions	Lead / Support	Timescale	Measure	Progress Report
Ensure appraisals are in place for all staff.	Chief Officer / CCG Chair / Learning & Development Specialist (CSU)	October 2013  <b>Green - Complete</b>	Paperwork completed.	All CCG staff received procedural guidance, along with a short "bite size" training session to support the appraisal process during 2013/14.
Raise awareness of equality issues with CCG member GP practices.	GP Lead for Equality / Relationship Managers	25% practices by March 2014  <b>Amber – In Progress</b>	Practice policy in place Attendance at awareness session.	<p>All practice staff undertake training on equality and diversity which is provided as an online learning tool under core learning skill.</p> <p>It also details what the public should expect for practice staff and what staff should expect of their employers. The training of staff is checked regularly by the practice manager and the CCG is in process of auditing the training of staff within our member practices.</p> <p>Staff are expected to update their skills every 2 years at the most. In addition the CCG recently held an updating session of practice managers and council of members who provide a direct link to practices with the hope that the messages/training will be cascaded to individual GPs and other practice staff.</p> <p>Data received in January 2014 showed 56% of practice staff had received awareness training and practices had plans in place to complete training for their remaining staff.</p>
Review our arrangements for translation and interpretation services.	Chief Officer / Engagement Services Manager (CSU)	<del>March 2014</del> <del>June 2014</del>  <b>Amber – In Progress</b>	Policy / Process in place and CCG staff aware of access arrangements.	<p>A review of arrangements with a range of Translation and Interpretation providers has been completed. The CCG is now considering which provider offers best value for money and expects the revised arrangements to be finalised by the end of June 2014. Existing arrangements remain in place pending the final decision.</p> <p><b>Deadline Re-scoped.</b></p>

Actions	Lead / Support	Timescale	Measure	Progress Report
Develop performance monitoring and reporting on equality data with providers, ensuring that patient monitoring information is systematically collected across equality groups and is contained within service specifications and contracts management.	Senior Officer Commissioning Support & Service Change / Principal Contract Manager (CSU)	January 2014  <b>Green - Complete</b>	Data being fed back into the commissioning process	<p>Equality data and compliance with the public sector equality duty is included in the requirements of providers' specifications and contracts with the CCGs. In addition, for those contracts managed through a Contract Management Board, a requirement to report to CCGs on equalities is included in the workplan of reports required to be received by commissioners. These reports are reviewed through the Contract Management Board meetings to provide assurance to the CCG that contracted providers are meeting their equalities duties and ensuring equality of access to services.</p> <p>Systems are in place, however, this action is to be monitored in 2014/15 to ensure ongoing full compliance.</p>
Develop mechanisms to enable the Quality Group to regularly examine quality issues, patient experience, feedback, complaints and insights in relation to the protected groups.	Senior Officer Quality & Assurance / Director of Quality (CSU)	December 2014  <b>Green - Complete</b>	Quality Dashboard	<p>Providers forward regular reports regarding complaints, which provide analysis of themes and trends, including changes in trends between reports, to enable changes over the course of the year to be seen. This includes reporting any complaints regarding equality and diversity issues, discrimination or lack of access to services and this would capture whether the complaint related to an equality issue.</p> <p>Significant quality issues are discussed at the CCG's Quality Group; no significant issues have been raised in relation to the protected characteristics; there have been a few issues regarding building accessibility raised as complaints within provider services during 13-14, which have been reported to the CCG as part of this process and assurance received that these complaints have been addressed.</p>

Actions	Lead / Support	Timescale	Measure	Progress Report
Undertake more detailed work to develop our understanding of whether people from all protected groups are readily accessing services.	Chief Officer / Engagement Services Manager (CSU)	March 2015	Plan in place	This work will be progressed in 2014/15.
Ensure all procurement and tendering activities ensure providers supply evidence that they meet the requirements of the Equality Act 2010.	Senior Officer Commissioning Support & Service Change / Principal Contract Manager (CSU) / Head of Procurement (CSU)	October 2013 and on-going  <b>Green - Complete</b>	Existing contracts and incorporated into future tendering documentation.	<p>One of the key approaches the CCG has taken is to focus efforts at the tendering stage on requiring all 'bidders' to demonstrate and confirm that they do not discriminate on the grounds of any protected characteristics. The CCG also requires confirmation that organisations are fully compliant with the Equality Act 2010.</p> <p>This is usually undertaken at the PPQ stage, with organisations not able to meet the requirement excluded from further consideration.</p> <p>Systems are in place, however, this action is to be monitored in 2014/15 to ensure ongoing full compliance.</p>

## Objective 2

Ensure that appropriate Equality and Diversity initiatives are taken forward in current year's work plan.

Service area	Actions	Lead / Support	Timescale	Measure	Progress Report
Review of respiratory services to improve diagnosis and increase delivery of community based care	Ensure any proposals for change developed in relation to respiratory services incorporate service user views and include EIA	Project Lead-CSU	Sept 2013 <b>Green – Complete</b>	EIA completed and considered within CCG decision making process	EIA completed.
Review of services for circulatory problems, including improved community based management and patient education	Service review to assess whether current services meet the needs of those with protected characteristics Identify areas of low uptake or non access of services, particularly where there is high prevalence of the condition Ensure that any proposals for change incorporate service user views and an EIA	Project Lead-CSU	Mar 2014 April 2014 <b>Amber – In Progress</b>	EIA completed and considered within CCG decision making process	The community cardiology service specification is being drafted. An EIA of the new service that is being described will be undertaken and will be submitted to the Engine Room in April 2014 together with the service specification.  <b>Deadline Re-scoped.</b>

Service area	Actions	Lead / Support	Timescale	Measure	Progress Report
Implementation of community pain service	Work with contacting team to ensure performance monitoring data is systematically reported	Principal Contract Manager (CSU)	<del>Nov 2013</del> <del>May 2014</del> <b>Amber – In Progress</b>	Data is fed back into the commissioning process	On-going – service review due April 2014  <b>Deadline Re-scoped.</b>
Primary care variation	Ensure that in developing and implementing pathways in primary care, GP practices are encouraged to assess equality implications specific to their practice	Project Lead-CCG	<del>Dec 2013</del> <del>On-going</del> <b>Amber – In Progress</b>	Provider data demonstrates equality of access for all protected groups	On-going.  <b>Deadline Re-scoped.</b>
Experience Led Commissioning of Dementia Care	Ensure engagement with the programme captures the diverse views of the population. Ensure an EIA is completed on the arising commissioning intentions	Project Lead-CSU	<del>Mar 2014</del> <del>April 2014</del> <b>Amber – In Progress</b>	EIA completed and considered within CCG decision making process	Report in development. EIA to be completed for relevant actions agreed within report. It is expected the report and EIA will be submitted to the Engine Room in April 2014.  <b>Deadline Re-scoped.</b>
Mobilisation of unplanned care model (including implementation of 111)	Ensure that as part of mobilisation, any recommendations of the EIA are implemented. Ensure the provider reports equality data in line with contract requirement	Project Lead-CSU, Principal Contract Manager (CSU)	Nov 2013 <b>Green – Complete</b>	Provider data demonstrates equality of access for all protected groups	EIA completed.

Service area	Actions	Lead / Support	Timescale	Measure	Progress Report
Review of follow ups across key specialties - Ophthalmology, Urology, Rheumatology, Diabetes	Ensure that in developing and implementing discharge criteria, GP practices and other relevant healthcare providers are encouraged to assess equality implications specific to their practice	Project Lead-CSU	Oct 2013 <b>Green – Complete</b>	Provider data demonstrates equality of access for all protected groups	Forms part of routine contract monitoring submissions.
MSK - new community service	Ensure service user views are considered in the development of the specification. Ensure that in developing the service specification, an EIA is completed	Project Lead-CSU	Mar 2014 May 2014 <b>Amber – In Progress</b>	EIA completed and considered within CCG decision making process	Service specification will be development in line with procurement timescale. Procurement plan in development for completion April 14. EIA to be completed and submitted to CCG along with specification for approval. The service specification and EIA will be submitted to the Engine Room in line with the procurement plan – expected May 2014.  <b>Deadline Re-scoped.</b>
Review of Long Term Conditions in Children;	Service review to assess whether current services meet the needs of those with protected characteristics Ensure that any proposals for change incorporate service user views and an EIA	Project Lead-CSU	July 2013 April 2014 <b>Amber – In Progress</b>	EIA completed and considered within CCG decision making process	Service review not yet completed. EIA to be completed for relevant change proposals and submitted to Engine Room together with the service specification in April 2014.  <b>Deadline Re-scoped.</b>

Service area	Actions	Lead / Support	Timescale	Measure	Progress Report
Winterbourne	Ensure any proposals for change developed in relation to LD incorporate service user views and include EIA	Project Lead-CSU	June 2014 <b>Green – not required yet</b>	EIA completed and considered within CCG decision making process	No new proposals received. Any new proposals will have EIA completed at time of submission of proposals.
Review of Carers services	Ensure the proposals for change developed in relation to carers services incorporate views of local carers and include EIA . Response to recent completed engagement results in positive actions to address needs of those with protected characteristics	Project Lead-CSU	<del>Mar 2014</del> <b>To be agreed</b>	EIA completed and considered within CCG decision making process	Proposals not yet submitted – Local Authority lead on progressing Carers refreshed Strategy and Action Plan. Date for submission to Engine Room to be agreed but EIA will be completed and submitted to CCG for approval together with the proposal.  <b>Deadline to be Re-scoped.</b>
Review of diabetes services and development of a community based model	Identify areas of low uptake or non access of services, particularly where there is high prevalence of the condition. Ensure service user views are considered in the development of the specification. Ensure that in developing the service specification, an EIA is completed	Project Lead-CSU	Sept 2013 <b>Green - Complete</b>	EIA completed and considered within CCG decision making process	EIA completed.



Service area	Actions	Lead / Support	Timescale	Measure	Progress Report
Review of LES agreements	Ensure service user views are considered in the development of any specifications. Ensure that in developing the service specifications, an EIA is completed	Project Lead-CSU	<del>Sept 2013</del> To be agreed	EIA completed and considered within CCG decision making process	LES Agreements have been replaced by an Enhanced Primary Care contract for 2014/2015. EIA to be completed and submitted to Engine Room with proposal for Enhanced Primary Care contract for 14/15. Date for submission not yet agreed.  <b>Deadline to be Re-scoped.</b>
Increasing Dementia diagnosis rate	Assess whether any groups with protected characteristic have increased likelihood of developing dementia. - Identify areas of low uptake or non access of services, particularly where there is high prevalence of the condition Ensure that in any awareness raising, needs of protected groups are taken into account GP practices are encouraged to assess equality implications specific to their practice	Project Lead-CSU	<del>Dec 2013</del> <b>April 2014</b>  <b>Amber – In Progress</b>	Completed EIA	Proposals still in development. EIA to be submitted to CCG at time of submission of proposals. It is expected the report and EIA will be submitted to the Engine Room in April 2014.  <b>Deadline Re-scoped.</b>

Service area	Actions	Lead / Support	Timescale	Measure	Progress Report
CAMHS	Ensure provider compliance with requirements to submit relevant data on assess to the service by protected characteristics	Principal Contract Manager (CSU)	Mar 2014 <b>Green - Complete</b>	Data is fed back into the commissioning process	System in place - routine element of contract monitoring.
Maternity	Complete research. Ensure any proposals for change incorporate views of local population and include EIA.	Project Lead-CSU/ NLC Public Health	Sept-2013 May 2014 <b>Amber – In Progress</b>	EIA completed and considered within CCG decision making process	Proposals not yet completed. EIA to accompany proposals for CCG approval. It is expected the proposal and EIA will be submitted to the Engine Room in May 2014.  <b>Deadline Re-scoped.</b>
Length of Stay efficiencies	Ensure implementation of any revised pathways include completion of EIA	Project Lead-CSU/ Principal Contract Manager (CSU)	Mar 2014 <b>Green – Complete</b>	EIA completed and considered within CCG decision making process	Project completed and no further pathway changes identified.
Review of Chronic wound management service	Ensure implementation of any revised pathways include completion of EIA	Project Lead-CSU	Jan-2014 May 2014 <b>Amber – In Progress</b>	EIA completed and considered within CCG decision making process	Service specification still in development, following ER feedback. EIA to be submitted to CCG at time of submission of final service specification. It is expected the report and EIA will be submitted to the Engine Room in May 2014.  <b>Deadline Re-scoped.</b>

Service area	Actions	Lead / Support	Timescale	Measure	Progress Report
Telehealth	Ensure implementation of any revised pathways include completion of EIA	Project Lead-CSU	<del>Oct 2013</del> May 2014  <b>Amber – In Progress</b>	EIA completed and considered within CCG decision making process	Report timescale extended due to national Information Governance issue affecting access to relevant data. EIA to accompany report. Deadline for submission of report and EIA to Engine Room to be agreed – expected May 2014.  <b>Deadline Re-scoped.</b>
Development of 2014/15 Commissioning Plan	complete EIA	Ass Snr Officer; Comm Support	<del>Mar 2014</del> June 2014  <b>Amber – In Progress</b>	EIA published with Commissioning Plan	EIA in progress - commissioning plan not yet completed. Due for completion by June 2014.  <b>Deadline Re-scoped.</b>