# **Equality Analysis - Equality Impact Assessment Screening Form**

Name of policy / service	Policy for the Commissioning of Gluten-free Foods
What is it that is being proposed?	Gluten-free foods in ENHCCG are being considered against a proposed priorities framework to support decision making with regard to future commissioning.
What are the	Prescribing of gluten-free foods will be limited to patients with learning
intended outcome(s) of the proposal	disabilities and where safeguarding concerns.
Explain why you	N/A
think a full Equality	
Impact Assessment is	
not needed	
On what	The policy excludes patients with learning disabilities and safeguarding
evidence/information	concerns. The prescriber must make a clinical decision for each individual
have you based your decision?	patient.
How will you monitor	The impact of the policy will be monitored by using electronic prescribing
the impact of policy	data, patient feedback and complaints.
or service?	
How will you report your findings?	The completed Equality Impact Assessment will be published on the East
	and North Herts CCG website if any changes are made to the
your illiulings:	commissioning of gluten-free foods.

A full equity impact assessment will be completed after the consultation period.				
Assessors Name and Job title	Stacey Golding, Lead Pharmaceutical Adviser			
Date	20.7.17			

# **Equality Analysis – Full Equality Impact Assessment (DRAFT PRIOR TO CONSULTATION)**

#### Title of policy, service, proposal etc being assessed:

Policy for the Commissioning of Gluten-free Foods

#### What are the intended outcomes of this work?

The CCG is considering that GPs using their professional judgement will stop the prescribing of gluten-free foods.

The outcomes of the proposal to patients is that all individuals will now be expected to purchase gluten-free foods, including groups that currently receive free prescriptions (such as children, elderly and those on low incomes) from supermarkets, pharmacies, on-line or other shops.

#### How will these outcomes be achieved?

The CCG will promote the purchasing of gluten-free foods where possible to reduce unnecessary costs.

### Who will be affected by this work?

The policy applies to all patients except for those with learning disabilities and if there are safeguarding concerns.

#### **Evidence**

#### What evidence have you considered?

Against each of the protected characteristics categories below list the main sources of data, research and other sources of evidence (including full references) reviewed to determine impact on each equality group (protected characteristic).

This can include national research, surveys, reports, research interviews, focus groups, pilot activity evaluations or other Equality Analyses. If there are gaps in evidence, state what you will do to mitigate them in the Evidence based decision making section of this template.

If you are submitting no evidence against a protected characteristic, please explain why.

#### Age

Patients will not receive prescriptions for gluten free foods.

Currently, you can get free NHS prescriptions if, at the time the prescription is dispensed, you:

- are 60 or over
- are under 16
- are 16-18 and in full-time education

People with coeliac disease amongst these groups would therefore have to pay for gluten free food, which could impact income or their management of their condition.

Mitigating actions:

The care of the individual patient must remain a prescribers first concern as described in the GMC 'duties of a doctor'

http://www.gmc-uk.org/guidance/good medical practice/duties of a doctor.asp

Therefore the prescriber should recommend treatment based on clinical need but if there are concerns about an individual patient's ability to pay, resources, safeguarding or welfare issues the GP may prescribe.

#### **Gender reassignment (including transgender)**

There is currently no evidence of likely differential impact because of the protected characteristic.

#### Marriage and civil partnership

There is currently no evidence of likely differential impact because of the protected characteristic.

#### **Pregnancy and maternity**

Currently, you can get free NHS prescriptions if, at the time the prescription is dispensed, you are pregnant or have had a baby in the previous 12 months and have a valid maternity exemption certificate (MatEx). This proposal will potentially increase costs for people with coeliac disease amongst this group of people.

#### Race

There is currently no evidence of likely differential impact because of the protected characteristic.

#### **Religion or belief**

There is currently no evidence of likely differential impact because of the protected characteristic.

Sex

There is currently no evidence of likely differential impact because of the protected characteristic.

#### **Sexual orientation**

There is currently no evidence of likely differential impact because of the protected characteristic.

#### **Carers**

There is currently no evidence of likely differential impact because of the protected characteristic.

Other identified groups Detail and consider evidence on groups experiencing disadvantage and barriers to access and outcomes. This can include different socio-economic groups, geographical area inequality, income, resident status (migrants, asylum seekers).

Currently, you can get free NHS prescriptions if, at the time the prescription is dispensed, you:

- have a specified medical condition and have a valid medical exemption certificate (MedEx)
- have a continuing physical disability that prevents you from going out without help from another person and have a valid MedEx
- hold a valid war pension exemption certificate and the prescription is for your accepted disability
- are an NHS inpatient.

People with coeliac disease, amongst these groups of people may therefore be negatively impacted as a result of this proposal.

Mitigating actions:

If there are concerns about an individual patient's ability to pay, safeguarding or welfare issues the GP may prescribe.

## **Engagement and involvement**

How have you engaged stakeholders with an interest in protected characteristics in gathering evidence or testing the evidence available?

Changes will be discussed with key stakeholders including providers, patients and the public, with feedback being considered before any decisions on future services are made.

How have you engaged stakeholders in testing the policy or programme proposals?

The consultation document will be widely available including to patient groups. Six engagement events are planned across East and North Hertfordshire.

For each engagement activity, please state who was involved, how and when they were engaged, and the key outputs:

To be completed after engagement activities.

#### **Summary of Analysis**

Considering the evidence and engagement activity you listed above, please summarise the impact of your work. Consider whether the evidence shows potential for differential impacts, if so state whether adverse or positive and for which groups and/or individuals. How you will mitigate any negative impacts? How you will include certain protected groups in services or expand their participation in public life?

Impact on all patient groups has been considered and will be mitigated where possible.

Now consider and detail below how the proposals could support the elimination of discrimination, harassment and victimisation, advance the equality of opportunity and promote good relations between groups (the General Duty of the Public Sector Equality Duty).

#### Eliminate discrimination, harassment and victimisation

There is currently no evidence of likely differential impact.

#### **Advance equality of opportunity**

Access will improve as no appointment needed in pharmacy and frees up GP appointments for other patients.

Increased cost to patient may impact on whether they view this as a positive impact.

## Promote good relations between groups

This policy will apply equally to all Hertfordshire residents.

#### **Next Steps**

Please give an outline of what you are going to do, based on the gaps, challenges and opportunities you have identified in the summary of analysis section. This might include action(s) to eliminate discrimination issues, partnership working with stakeholders and data gaps that need to be addressed through further consultation or research. This is your action plan and should be SMART.

Public engagement period from July 3<sup>rd</sup> 2017 for 12 weeks.

How will you share the findings of the Equality analysis? This can include sharing through corporate governance or sharing with, for example, other directorates, partner organisations or the public.

The completed Equality Impact Assessment will be published on the East and North Herts CCG website if any changes are made to the commissioning of gluten-free foods.



## **Privacy Impact Assessment – Initial Screening tool**

1. Policy			PIA Completion Details		
Title: Policy for the Commissioning of Gluten-free Foods  Proposed Existing  Date of Completion: 07/06/17  Review Date:		Names & Titles of staff involved in completing Stacey Golding, Lead Pharmaceutical Adviser			
2. Details of the Policy. Who is likely to be affected by this policy?					
Staff	Patients Public				
	Yes	No	Please explain your answers		
Technology					
Does the policy apply new or additional information technologies that have the potential for privacy intrusion?					
(Example: use of smartcards)					
Identity					
By adhering to the policy content does it involve the use or re-use of existing identifiers, intrusive identification or authentication?  (Example: digital signatures, presentation of identity documents, biometrics etc.)					
By adhering to the policy content is there a risk of denying anonymity and de-identification or converting previously anonymous or de-identified data into identifiable formats?					

Multiple Organisations  Does the policy affect multiple organisations?  (Example: joint working initiatives with other government departments or private sector organisations)		There has also been a recent national consultation on the prescribing of gluten-free foods and a consultation in Herts Valleys CCG. No patient data will be shared.
By adhering to the policy is there likelihood that the data handling processes are changed?  (Example: this would include a more intensive processing of data than that which was originally expected)		The CCG prescribing and medicines optimisation team (PMOT) will be involved in additional monitoring of prescribing data to assess the impact of the policy when implemented (this is identifiable by GP practice but not by patient).
If Yes to any of the above have the risks been assessed, can they be evidenced, has the policy content and its implications been understood and approved by the department?  *Ticking 'Yes' to any section will require completion of the full screening tool – for advice contact Head of Governance.	•	

Assessments	
Completed by	
Name:	Stacey Golding
Position:	Lead Pharmaceutical Adviser
Date:	7/6/17

Assessment to be reviewed by Head of Information.

**Head of Information name: David Hodson** 

Date: 21.6.17

Assessment to be reviewed by SIRO or Caldicott Guardian.

Name: Sheilagh Reavey

**Role: Director of Nursing and Quality** 

Date: 5.7.17