

Name of proposal/policy	Provision of Northamptonshire Healthwatch	Budget number (if applicable)	
Service area responsible	Public Health	Cabinet meeting date	N/A
Name of completing officer	Jane Pitchfork	Date EqIA created	November 2017
Approved by Director / Assistant Director	Lucy Wightman	Date of approval	November 2017

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

- Eliminating discrimination, harassment and victimisation
- Advancing equality of opportunity
- Fostering good relations

We do this by undertaking equality impact assessments (EqIAs) to help us understand the implications of policies and decisions on people with protected characteristics – EqIAs are our way of evidencing this.

All assessments must be published on the NCC equalities web pages. All Cabinet papers where an EqIA is relevant **MUST** include a link to the web page where this assessment will be published. If you require assistance in getting your EqIA published, please contact equalities@northamptonshire.gov.uk

PART 1

Description of current provision/policy and main beneficiaries/stakeholders

National context

Healthwatch Northamptonshire is one of 148 local Healthwatch services working across 152 local authority areas in the UK. Healthwatch delivers a range of statutory duties in its role as an independent consumer champion for both health and social care (Health and Social care Act 2012)

The core activities being carried out by local Healthwatch organisations include:

- Information service to the public on health and social care choices
- Engagement events to gather views of the public who use health and social care services
- Attendance at key Local Authority and Health fora in order to represent service user views
- Production of reports for stakeholders and service providers
- Enter and view visits

The 'scale' of these activities across local authorities varies depending on funding levels and delivery models. Many Healthwatch organisations have been able to secure additional funding via small contracts and income generating activities including research and consultation work. There is a requirement that Healthwatch involve the public and volunteers in the delivery of its statutory functions. Most organisations operate effectively with a lean staff structure and an active volunteer workforce. Comparing funding levels across local Healthwatch services is difficult due to the fact that some local Healthwatch organisations are contracted for additional services such as NHS advocacy and complaints. A downward funding trend is mirrored across other local authorities, with 38.5% of services receiving less funding in 2016/17 than in the previous year.

Spend levels by area in 2016/17	No of Local Healthwatch services
0-100K	14
100-200	84
200 – 300K	23
300-400K	8
Over 400K	19

Local Provision

Healthwatch Northamptonshire was established in 2013. Its current contract with Northamptonshire County Council ends in March 2018. Since 2013 the contract value has decreased year on year.

Year	2014/15	2015/16	2016/17	2017/18
Contract value	435,000	355,000	295,000	245,000

Service delivery

Healthwatch Northamptonshire employs a small staff team and delivers a comparable level of activity, when reviewed against similar sized services in other local authorities (£200-£300K).

Healthwatch provision includes a range engagement activities champion consumer rights, including information and signposting to those who use or need to use health and social care services in the county. Healthwatch routinely consult on changes to service provision and respond to consumer and stakeholder concerns relating to quality and provision. There is a statutory requirement to recruit, support and involve volunteers extensively to deliver core functions and to ensure that marginalised groups are fully represented in consultation and reports. The 2016/17 annual report for Northamptonshire Healthwatch gives the following consumer engagement figures: Facebook 1,839 and Twitter 1,665. Pop up shops 1200, young people's work 2000. In terms of service user feedback – this engagement activity translates into the following: 153 comment cards from pop up shops, 224 pieces of feedback received by phone, email, comment card, etc. and 169 responses to the annual Make Your Voice Count survey. The contract does not include a direct advocacy or complaints service; these functions are provided for in other contracts, and are not part of the Healthwatch statutory requirement.

A public consultation was conducted in 2017 by NCC, to inform future Healthwatch commissioning in the county. The report highlights that there is a good level of satisfaction amongst those who have had contact with Healthwatch Northamptonshire, including individual and community respondents.

The report also indicates that general public awareness of Healthwatch services could be improved. Respondents suggested that Healthwatch needed to improve its visibility across the sector, strengthen its online presence and develop closer links to health and social care providers in order to influence and drive service improvements.

Description of proposal under consideration/development

Northamptonshire Healthwatch contract expires on 31.03.18 and the council intends to commence an open tender process to secure provision for a further 2 years minimum. A new service specification has been developed to take account consultation feedback.

It is proposed to reduce the current contract value from £245,000 to £195,000 pa. These budget cuts are being driven by the wider budget pressures that NCC is currently managing. NCC are still required to provide for Healthwatch functions in order to deliver statutory functions. The new service specification will require the Provider to focus on core functions and to work in close partnership with other agencies who offer similar services within the health and social care arena. Having reviewed finances NCC considers that there is potential for modest cost savings to be achieved by encouraging collaborative bids which reduce management and accommodation costs, without detriment to frontline services. There are also significant opportunities to increase online activity. Performance indicators associated with the new contract will enable NCC to monitor activity, specifically relating to engagement and representation on behalf of seldom heard groups, including young people.

Data used in this Equality Impact Assessment (general population data where appropriate but each EqIA should contain information on people who use the service under consideration – if this is not applicable to your proposal then you probably do not need to do an EqIA)

Data Source (include link where published)	Please summarise what the data tells us – for example “X number of people use this service, X are male, Y are female etc”
Northamptonshire Healthwatch Annual Report (Northamptonshire Healthwatch website) http://www.healthwatchnorthamptonshire.co.uk/sites/default/files/annual_report_2016-17_final_0.pdf	Includes general information on engagement. Data not given by gender/cohort.
Healthwatch England – State of Support 2016/17 https://m.healthwatch.co.uk/resource/state-support-local-healthwatch-finances	Compares Healthwatch funding levels across the UK
NCC Healthwatch consultation report 2018-2020 HealthwatchConsultationReport_FINAL.pdf	NA

Tick the relevant box for each line by using a capital 'P' to make a <input type="checkbox"/>	Based on the above information, what impact will this proposal have on the following groups?			
	Positive	Negative	Neutral	Unsure
Sex			Yes	
Gender Reassignment			Yes	
Age			Yes	
Disability			Yes	
Race & Ethnicity			Yes	
Sexual Orientation			Yes	
Religion or Belief (or No Belief)			Yes	
Pregnancy & Maternity			Yes	
Human Rights (Please see articles in toolkit)			Yes	
Other Groups (rural isolation, socio-economic exclusion etc)			Yes	

Initial impact	
Explain your findings above	Actions identified to mitigate, advance equality or fill gaps in information
<p>Service Provision The service outcomes outlined in the new specification are specifically linked to LA statutory duties. There will be a strong focus on accessibility, visibility and identifying and reporting on provision for seldom heard groups. A significant element of the service is volunteer led. The reduced contract value will still allow for a core staff team to coordinate consumer champion work and ensure that the statutory provision is delivered.</p> <p>Overheads – Staffing and premises Further reductions in the value of the contract may necessitate a different/reduced staffing model and reductions in office costs.</p> <p>The rent on current office facilities in Northampton is relatively high as referenced in the 2016/17 Annual report.</p>	<p>NCC Commissioners will encourage models which focus on partnership working, Online activity, volunteer involvement and back office cost savings in order to achieve the required budget savings.</p> <p>There is potential to make modest savings by working differently, for example by moving out of Northampton, agile working and sharing back office functions. The new specification makes no assumptions or requirements for a specific office base, provided that the Provider has a strong local presence.</p>

Do you need to undertake further work (e.g. consultation, further equality analysis) based on the impact and actions identified above? If yes, set this out below and then carry out the work and complete Part 2

The contract will be subject to robust performance monitoring to ensure often marginalised and seldom heard groups are represented through engagement activity and reports.

PART 2 – if required

Consultation, follow up data and information gathered from actions identified above

	What does this information tell us?

Final impact analysis (taking the findings from Part 2 into account) – including review date if required

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