Appendix 1



Diversity impact assessment

TITLE

Recommissioning an Adult Substance Treatment, Harm Reduction and Recovery Service

DATE

8/4/2022

LEAD OFFICER.

Claire Hurcum, Health Improvement Programme Manager, Public Health **1 Summary description of the proposed change**

What is the change to policy / service / new project that is being proposed? How does it compare with the current situation?

Recommissioning the contract for an Adult Substance Treatment, Harm Reduction and Recovery Service in Medway. These are universal services with targeted outreach and inclusion strategies to support those who face additional barriers. The service will provide support for people who use drugs and/or alcohol to problematic levels that wish to reduce or abstain. It will also provide information and harm reduction advice to reduce drug and alcohol related deaths.

Services are currently available in Medway through commissioned providers. Service users included people who experience health inequalities, particularly those from low socio-economic backgrounds, who are unemployed, and sleeping rough.

While the universal accessibility of the service will remain, there will be a strengthening of the requirement for the provider to deliver tailored support for people who use substances and face severe and multiple disadvantages. As a result, this will aim to reduce the gap in health inequalities.

2 Summary of evidence used to support this assessment

Eg: Feedback from consultation, performance information, service user. Eg: Comparison of service user profile with Medway Community Profile Data was gathered for a Health Needs Assessment, which included internal and external stakeholder feedback (inc. professional partners, service users and public opinion). Quarterly service performance monitoring data indicates service activity and reach.

Existing service data identifies demographics of those using the services, this indicates that people from Black African and Eastern European communities, pregnant women and people aged over 65 groups are under-represented in comparison to the Medway Community Profile. Insufficient data is currently provided to commissioners to monitor the demographics of service users in real time, this means that disability, pregnancy, race, sex and low-income group characteristics are difficult to monitor. This will be rectified in the incoming contract's Key Performance Indicators (KPIs)

Service user feedback indicates that although services are currently accessible to all people there are areas that can be improved, this includes accessibility to the main building, provision to people with child-care responsibilities (predominantly women). Data also indicates that those who face the severe multiple disadvantages of Poly-drug use, Criminal activity and insecure housing



/ homelessness are likely to have poorer outcomes. The current provider reports that the complexities of those accessing support is increasing.

3 What is the likely impact of the proposed change? Is it likely to:

Adversely impact on one or more of the protected characteristic groups Advance equality of opportunity for one or more of the protected characteristic groups

Foster good relations between people who share a protected characteristic and those who don't

(insert Yes when there is an impact or No when there isn't)

Protected characteristic	Adverse	Advance	Foster good
groups (Equality Act 2010)	impact	equality	relations
Age	Νο	Νο	No
Disabilty	Νο	Yes	No
Gender reassignment	No	No	No
Marriage/civil partnership	No	No	No
Pregnancy/maternity	No	Yes	No
Race	Νο	Yes	No
Religion/belief	Νο	No	No
Sex	No	Yes	No
Sexual orientation	No	No	No
Other (eg low income groups)	Νο	Yes	No

4 Summary of the likely impacts Who will be affected? How will they be affected?

The recommissioning and the changes to the service specification aim to increase access to support and reduce health inequalities for people in Medway. This includes clients accessing interventions to improve their wellbeing, such as harm reduction, psychosocial support, peer mentoring, prescriptions, and support to achieve abstinence if desired.



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Phasing and layering of services will mean that residents get the right support at the right time.

The changes will positively affect those facing severe and multiple disadvantages most of all as services will improve as the provider delivers holistic care in collaboration with agencies such as criminal justice, acute health and housing. Other adults will still have good access to the universal services and self-managed care options.

Improved data collection and reporting will enable more timely monitoring of accessibility to services for people with the broader range of characteristics.

5 What actions can be taken to mitigate likely adverse impacts, improve equality of opportunity or foster good relations?

What alternative ways can the Council provide the service? Are there alternative providers?

Can demand for services be managed differently?

Faster data collection and reporting will be used to monitor a broader range of demographics. The data will be presented quarterly at the performance review meetings and action plans used to address any significant gaps or disparity.

Pathways and community links will be developed by the provider as part of a 'development and delivery' phase during the first six months of the contract. This includes maternity services, criminal justice, LGBTQ+, faith groups and cultural groups.

6 Action plan

Actions to mitigate adverse impact, improve equality of opportunity or foster good relations and/or obtain new evidence

Action	Lead	Deadline or review date
Monitor protected characteristic data as part of performance management processes to ensure service use represents the demographics of Medway population.	Robin Mitchell (RM)	Annually
Provider to develop links with community leaders for groups which support people with protected characteristics, are under-represented or face additional barriers / inequalities. Monitored as part of delivery and development phase	RM	Annually



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7 Recommendation

The recommendation by the lead officer should be stated below. This may be: to proceed with the change, implementing the Action Plan if appropriate, consider alternatives, gather further evidence

If the recommendation is to proceed with the change and there are no actions that can be taken to mitigate likely adverse impact, it is important to state why. To proceed with re-procurement of a service to support people who use drugs and alcohol. Implement the actions and monitor through quarterly performance management.

8 Authorisation

The authorising officer is consenting that the recommendation can be implemented, sufficient evidence has been obtained and appropriate mitigation is planned, the Action Plan will be incorporated into the relevant Service Plan and monitored

Assistant Director

Date of Authorisation