

PART A - Initial Equality Screening Assessment

As a public authority we need to ensure that all our strategies, policies, service and functions, both current and proposed have given proper consideration to equality and diversity.

A **screening** process can help judge relevance and provide a record of both the process and decision. Screening should be a short, sharp exercise that determines relevance for all new and revised strategies, policies, services and functions.

Completed at the earliest opportunity it will help to determine:

- the relevance of proposals and decisions to equality and diversity
- whether or not equality and diversity is being/has already been considered, and
- whether or not it is necessary to carry out an Equality Analysis (Part B).

1. Title				
Equality Analysis title: The Sexual Health Strategy principles relating to the review of the Sexual Health Service commissioning.				
Directorate:	Service area:			
Adult Care, Housing and Public Health	Public Health			
Lead person:	Contact number:			
Alex Hawley	255846			
Is this a:				
Strategy / Policy x Service / Function Other If other, please specify				

2. Please provide a brief description of what you are screening

The Rotherham Sexual Health Strategy Group conducted a comprehensive Equality Assessment in September 2019. An analysis of the Sexual Health Strategy has been conducted as part of the preparation for the Sexual Health service commissioning and procurement process.

The Sexual Health Strategy outlines priorities for supporting improved sexual health outcomes for the local population's health and wellbeing over the next three years and provides a framework for planning and delivering commissioned services and interventions (within existing resources) aimed at improving sexual health outcomes

across the life course and so consequently will impact on what is commissioned. The ambition of the strategy is to:

- Improve sexual health
- Improve reproductive health
- Focus on vulnerable groups
- Build on successful service planning and commissioning

Poor sexual health is disproportionately experienced by some of the most vulnerable members of our local communities, including

- young people
- men who have sex with men (MSM)
- people from countries of high HIV prevalence, especially Black Africans
- those who misuse drugs and/or alcohol
- people from the most deprived neighbourhoods

(Source - Local authority HIV, sexual and reproductive health epidemiology reports, 2017, Public Health England)

It is important, therefore, to ensure that measures be put in place to reduce sexual health inequalities whilst improving the sexual health of all the people of Rotherham as part of the service model to be commissioned.

3. Relevance to equality and diversity

All the Council's strategies/policies, services/functions affect service users, employees or the wider community – borough wide or more local. These will also have a greater/lesser relevance to equality and diversity. The following questions will help you to identify how relevant your proposals are.

When considering these questions think about age, disability, sex, gender reassignment, race, religion or belief, sexual orientation, civil partnerships and marriage, pregnancy and maternity and other socio-economic groups e.g. parents, single parents and guardians, carers, looked after children, unemployed and people on low incomes, ex-offenders, victims of domestic violence, homeless people etc.

Questions	Yes	No
Could the proposal have implications regarding the	Yes	
accessibility of services to the whole or wider community?		
Could the proposal affect service users?	Yes	
Has there been or is there likely to be an impact on an	Yes	
individual or group with protected characteristics?		
Have there been or likely to be any public concerns regarding	Yes	
the proposal?		
Could the proposal affect how the Council's services,	Yes	
commissioning or procurement activities are organised,		
provided, located and by whom?		
Could the proposal affect the Council's workforce or		No
employment practices?		

If you have answered no to all the questions above, please explain the reason

If you have answered \underline{no} to \underline{all} the questions above please complete **sections 5 and 6.**

If you have answered **yes** to any of the above please complete **section 4**.

4. Considering the impact on equality and diversity

If you have not already done so, the impact on equality and diversity should be considered within your proposals before decisions are made.

Considering equality and diversity will help to eliminate unlawful discrimination, harassment and victimisation and take active steps to create a discrimination free society by meeting a group or individual's needs and encouraging participation.

Please provide specific details for all three areas below using the prompts for guidance and complete an Equality Analysis (Part B).

• How have you considered equality and diversity? Scope of proposal:

The Sexual Health service is an all age service available for all residents in Rotherham and on an open access basis, confidential and free of charge for the user.

The Sexual Health Strategy outlines priorities for supporting improved sexual health outcomes for the local population's health and wellbeing over the next three years and provides a framework for planning and delivering commissioned services and interventions (within existing resources) aimed at improving sexual health outcomes across the life course and so consequently will impact on what is commissioned.

- The ambition of the strategy is to:Improve sexual health
 - Improve reproductive health
 - Focus on vulnerable groups
 - · Build on successful service planning and commissioning

Sexual Health Data:

Public Health England (PHE), publish local authority HIV, sexual and reproductive health epidemiology (LASER) reports for each local authority on an annual basis. The report shows the differential in good sexual health experienced across the population of a local authority. The information can be used to monitor progress of any interventions.

The latest report (published December 2018, using 2017 data) shows the following:

- The rate of newly diagnosed sexually transmitted infections (STIs) was 581.4 per 100,000 residents (compared to 743 per 100.000 in England). This showed a significant improvement from 2013 when the rate was 951.4 per 100,000 residents.
- 58% of diagnoses of new STIs in Rotherham in 2017 were in young people aged 15-24 years compared to 50% in England.
- In Rotherham an estimated 6.8% of 15-19 year old women and 7.1% of 15-19 year old men presenting with a new STI during the period from 2013 to 2017 became re-infected with an STI within 12 months. This is higher than for the general population of Rotherham (5.3% for both men and women).
- In 2017 the conception rate for under 18s in Rotherham was 22.1 per 1,000

- females aged 15-17 while the rate was 17.8 in England and 20.6 in Yorkshire and Humber.
- For cases in men where sexual orientation was known, 13.45% of new STIs in Rotherham were among gay, bisexual and other men who have sex with men (MSM).
- Where recorded, 4.4% of new STIs diagnosed in Rotherham were in people born overseas.

Gaps in data:

It is recognised that little data in relation to sexual health and disability is collected both locally and nationally and this is a gap in our knowledge base.

Sexual health information in relation to transgender is also sparse but there is an acknowledgement, nationally, that this needs to be addressed.

Monitoring of these characterises will be included in the service reporting requirements.

Engagement:

- The Rotherham Youth Cabinet were consulted on the original strategy in 2015. They agreed the strategy and the associated action plan. They especially wanted a focus on young people's needs. This has been agreed for the refresh in 2019.
- Rotherham Voice of the Child Lifestyle Survey (annual survey) 2019 survey shows a rise in risk taking behaviour in relation to sexual health such as having unprotected sex after using alcohol. These findings can be used to set actions for partner agencies. As the survey is an annual one then engagement with young people can be ongoing.
- A Survey was conducted by Yorkshire MESMAC and Rotherham NHS Foundation
 Trust with young people (16-19) who live in the town in 2019. The survey looked at
 young people's relationship to sexual health services and barriers to access. This
 consultation will inform the delivery of the priority in relation to STI diagnosis in
 young people being higher amongst young people.
- The refreshing of the strategy was discussed at a meeting of the Health Select Commission in 2018 and some concerns were made in relation to adults with learning difficulties and their understanding as to use of contraceptive products and the spread of STIs. As a result the refreshed strategy has identified the need to consult with adults with learning difficulties across the town.
- The refreshed strategy and first year action plan was discussed at a meeting of the Health Select Commission in 2019. Members asked if the strategy group could develop some more performance indicators that would indicate success in relation to the wider determinants in sexual health. They wanted to ensure that the emphasis was not purely on infection control. This be discussed by the strategy group and actions, as appropriate, will be included on the plan.
- There are plans to engage with Adults with learning difficulties March / April 2020.
 It is envisaged that this will include:
 Speak Up People's Parliament
 Focus groups, adults with learning difficulties and young people

Key findings

The reporting requirements for the new service have been intentionally aligned with public health priorities identified in the Sexual Health Strategy. This includes capturing information relating to:

- young people
- Men who have sex with men (MSM)
- people from countries of high HIV prevalence, especially Black Africans
- those who misuse drugs and/or alcohol
- people from the most deprived neighbourhoods

(Source - Local authority HIV, sexual and reproductive health epidemiology reports, 2017, Public Health England)

Actions

The action is to complete a full EIA, Part B.

In addition, the new service will be expected to undertake an EIA on any material changes to the service and the outcomes utilised to inform forward year planning. In addition, all functions and policies are expected to have been equality impact assessed.

Date to scope and plan your Equality Analysis:	February 2020
Date to complete your Equality Analysis:	February 2020
Lead person for your Equality Analysis	Alex Hawley
(Include name and job title):	Consultant in Public Health

5. Governance, ownership and approval

Please state here who has approved the actions and outcomes of the screening:

The design of the state approved the detection and successful of the servering.		
Name	Job title	Date of Approval
Teresa Roche	Director of Public Health	
Alex Hawley	Consultant in Public Health	

6. Publishing

This screening document will act as evidence that due regard to equality and diversity has been given.

If this screening relates to a **Cabinet**, **key delegated officer decision**, **Council**, **other committee or a significant operational decision** a copy of the completed document should be attached as an appendix and published alongside the relevant report.

A copy of <u>all</u> screenings should also be sent to <u>equality@rotherham.gov.uk</u> For record keeping purposes it will be kept on file and also published on the Council's Equality and Diversity Internet page.

Date screening completed	February 2020
Report title and date	The Sexual Health Strategy principles relating to the review of the Sexual Health Service commissioning. February 2020
If relates to a Cabinet, key delegated officer decision, Council, other committee or a significant operational decision – report date and date sent for publication	
Date screening sent to Performance, Intelligence and Improvement equality@rotherham.gov.uk	