

### **APPENDIX 1**

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# **Resident Impact Assessment**

Re-procurement of Islington Healthwatch Service 2021/22

## 1. What are the intended outcomes of this policy, function etc?

The intended outcomes of the re-procurement of the Healthwatch Islington contract, is to provide a service that represents the views of people who use health and social care services in Islington. The Health & Social Care Act 2012 created Local Healthwatch as the new consumer champion for health and social care services, with a duty on local authorities to set up and fund the new body from April 2013.

Adult Social Care Strategy and Commissioning team intend to re-procure a Healthwatch Islington service to continue to meet our statutory responsibilities, and fulfil the following functions:

- Provide information and advice to the public about accessing health and social care services and choice in relation to aspects of those services;
- Make the views and experiences of people known to Healthwatch England helping it to carry out its role as national champion;
- Make recommendations to Healthwatch England to advise the Care Quality Commission (CQC) to carry out special reviews or investigations into areas of concern (or, if the circumstances justify it, go direct to the CQC with their recommendations, for example if urgent action were required by the CQC):
- Promote and support the involvement of people in the monitoring, commissioning and provision of local care services;
- Obtain the views of people about their needs for and experience of local care services and make those views known to those involved in the commissioning, provision and scrutiny of care services; and make reports and make recommendations about how those services could or should be improved.

The current provider of Healthwatch Islington was successful following an open competitive tender. The contract ends 31<sup>st</sup> March 2022, and therefore re-procurement is required. Due to the value of the contract over the length of the contract period, this procurement will need an Officer, rather than Executive, Decision.

### 2. Resident Profile

Who is going to be impacted by this change i.e. residents/service users/tenants? Please complete data for your service users. If your data does not fit into the categories in this table, please copy and paste your own table in the space below. Please refer to **section 3.3** of the guidance for more information.

		Borough profile	Service User profile
		Total: 206,285	Total: 206,285 Healthwatch has a reach that covers all residents that access health and social care services in Islington. This covers all genders, ages, disability status, sexual orientation, race and religion or belief.
Gender	Female	51%	
	Male	49%	
Age	Under 16	32,825	
	16-24	29,418	
	25-44	87,177	
	45-64	38,669	
	65+	18,036	
Disability	Disabled	16%	
	Non-disabled	84%	
Sexual	LGBT	No data	
orientation	Heterosexual/straight	No data	
Race	ВМЕ	52%	
	White	48%	
Religion or	Christian	40%	
belief	Muslim	10%	
	Other	4.5%	
	No religion	30%	
	Religion not stated	17%	

## 3. Equality impacts

With reference to the <u>guidance</u>, please describe what are the equality and socio-economic impacts for residents and what are the opportunities to challenge prejudice or promote understanding?

 Is the change likely to be discriminatory in any way for people with any of the protected characteristics?

The Healthwatch Islington service will represent the voices of all residents in Islington who access Health and Social Care services. The re-procurement of this service will ensure that people with protected characteristics, who may be particularly impacted by their need to access health and social care services, are represented and considered in the commissioning of new and existing services. Consultation will take place with relevant Experts by Experience to ensure that the procurement process is collaborative and considers the needs of the people that will use the service. Any new provider chosen as a result of this procurement process would maintain the same responsibility to represent all residents who access health and social care services, therefore avoiding any group being the subject of discrimination in this process

• Is the proposal likely to have a negative impact on equality of opportunity for people with protected characteristics? Are there any opportunities for advancing equality of opportunity for people with protected characteristics?

The proposal is likely to have a positive impact on equality of opportunity as the Healthwatch Islington service will support people with protected characteristics having an equal opportunity to feedback on their experiences of using services, find out information about services to improve their access, and have their voices represented to the council to be included in the commissioning of services. Healthwatch Islington will be required through the service specification to ensure the voices of people from underrepresented groups with protected characteristics are represented.

• Is the proposal likely to have a negative impact on good relations between communities with protected characteristics and the rest of the population in Islington? Are there any opportunities for fostering good relations?

Healthwatch works in partnership with other voluntary sector and user led organisations in Islington who have a scope to represent communities with protected characteristics. For example, over the past year, they have worked with Arachne, Community Language Support Services, Eritrean Community in the UK, Imece, Islington Bangladesh Association, Islington Somali Community, Jannaty, the Kurdish and Middle Eastern Women's Organisation, the Latin American Women's Rights Service and Disability Action in Islington in a formal partnership where Healthwatch fundraise to support joint work. They are developing a relationship with Choices CIC to reach residents from the Black African Caribbean community

Healthwatch has scope to reach into all communities in Islington and link people who use services together through their common experiences. Healthwatch recruits volunteers from a diverse range of backgrounds, and these volunteers may have a positive impact on good relations between communities.

Healthwatch also work closely with and Islington Borough User Group', Manor Gardens Welfare Trust, Peel Centre. As Chair of the Challenging Inequality workstream they are working with Voluntary Action Islington, London Metropolitan University, City University, Whittington Health, Camden and Islington NHS Foundation Trust and the CCG and as Chair of the All Age Mental Health Partnership Board they are working with Hillside Clubhouse, Nafsiyat, Maya Centre. Through digital inclusion work, as well as working with existing partners, they are working with Mer-IT and liaising with social prescribers (via AgeUK, HOYD and Manor Gardens) and GPs to increase referrals. Good Things Foundation and Digital Unite have highlighted their safeguarding practice in digital as good practice and they hope to work with them more closely going forward.

 Is the proposal a strategic decision where inequalities associated with socioeconomic disadvantage can be reduced? People with disabilities who use health and social care services in Islington may be more likely to experience socio-economic disadvantage. Healthwatch has a targeted role in the representation of people who use health and social care services in the commissioning of those services, which has the potential to ensure services are personalised to the local community. Services may be improved and become more effective in meeting the needs of the community, leading to improved outcomes in terms of health and independence. People experiencing inequalities associated with socio-economic disadvantage will benefit from these service improvements, and therefore this may address elements of these inequalities, such as inequality in physical and mental health.

## 4. Safeguarding and Human Rights impacts

### a) Safeguarding risks and Human Rights breaches

Please describe any safeguarding risks for children or vulnerable adults AND any potential human rights breaches that may occur as a result of the proposal? Please refer to **section 4.8** of the <u>guidance</u> for more information.

Healthwatch Islington employees and volunteers have direct and indirect contact with vulnerable adults in Islington who may be at risk. They also have scope to 'Enter and View' health and social care services where vulnerable adults may be treated, may live or may be visiting. They may also have contact with children. Therefore it is essential that the requirements placed on Healthwatch Islington through the service specification and contract include a requirement that all employees and volunteers of Healthwatch Islington are provided with safeguarding training in relation to protecting both children and vulnerable adults. This will ensure individuals are aware of their responsibilities under safeguarding legislation to report safeguarding concerns, and how to do so. Employees and volunteers should also have regular DBS checks. Healthwatch Islington will have safeguarding policies in place that are updated regularly, and reviewed as part of contract monitoring processes.

If potential safeguarding and human rights risks are identified, then please contact equalities@islington.gov.uk to discuss further:

#### 5. Action

How will you respond to the impacts that you have identified in sections 3 and 4, or address any gaps in data or information?

For more information on identifying actions that will limit the negative impact of the policy for protected groups see the guidance.

Action	Responsible person or team	Deadline

Please send the completed RIA to equalites@islington.gov.uk and also make it publicly available online along with the relevant policy or service change.

This Resident Impact Assessment has been completed in accordance with the guidance and using appropriate evidence.					
	Staff me	mber completing this form:	Head of Service or higher:		
	Signed:	_K.Thomson	Signed:		
	Date:	10/05/2021	Date:	Click here to enter a date.	