

Equality Impact Assessment (EIA)

Health Act 2006 Smoke Free Compliance Service

Equality impact, needs and requirements assessment form

Please use this form to record your findings, proposed actions, equality objectives and targets. Use the guidance notes to help you do the assessment or contact the Equality Standard Project Manager if you need some advice

About the policy, practice, service or function you are assessing

Name of policy, practice, service or function: Health Act 2006 Smoke Free Compliance Service

Assessment team leader name: Jenny Fordham

Date of assessment: March 2008

Department responsible: EH & TS – H&S

Service Area: Smoke Free Compliance

Other members of assessment team:

Name	Position	Area of expertise	Comments
Frances Grainger	Communicable Disease Control Officer	Smoke free legislation and health promotion activities/ Fresh Start	
James Convery	Tobacco Control Officer	Smoke free legislation/Fresh Start	
Charlotte Gilmour	Smoke Free Compliance Officer	Smoke free legislation	
Ian Terry	Enforcement Officer	Age Restricted Products	
Gurpal Kooner	Technical officer	EIP training	

Question	Response/ findings
<p>What are the main aims and objectives or purpose of the service that you are assessing?</p>	<ul style="list-style-type: none"> • To ensure that the smoke free section of the Health Act 2006 is complied with in a fair and consistent manner. • Reflect the needs of the City's community in relation to its cultural needs and diversity • To provide advice and information for anybody from business and all communities about how the Council will enforce, administer and make decisions under the Health Act 2006 and associated regulations.
<p>Who implements, carries out or delivers the service? Please state where this is more than one person, team, department, or body – and include any outside organisations who deliver under procurement arrangements</p>	<ul style="list-style-type: none"> • Smoke free compliance team • Health and Safety Team • Food Safety Team • Licensing Team • Trading Standards • External agencies contribute but this is not a procured service. This could be Derby City Primary Care Trust on an ad hoc basis. • Consultation and collaboration of services is provided through Smoke Free Derby and the Derbyshire Action on Smoking Alliance

Question	Response/ findings
<p>Who is affected by the service or by how it is delivered? Such as, who are the external and internal customers, groups, or communities?</p>	<ul style="list-style-type: none"> • General Public • Commercial businesses or their representatives • Licensed premises • Residents or their representative • Community Groups • Schools • Government bodies or other external agencies such as police, fire and rescue service, Derby City PCT • Council departments such as planning, street cleansing, waste management • Other local Authorities • Councillors as the decision makers and representatives of the residents • Public Health Forum and Healthy City executive • Government Office East Midlands • Department of Health
<p>What outcomes do we want to achieve, why and for whom? For example, what do you want to be providing, how well, what changes or improvements, and what should the benefits be for customers, groups or communities?</p>	<ul style="list-style-type: none"> • To provide a fair and consistent approach to smoke free complaints, enforcement and administration for any service user • To provide easy to understand information regarding smoke free compliance to anybody who wants it • To ensure any service user understand and comply with current legislation
Question	Response/ findings

<p>What existing or previous inspections of the service are there? For example, Best Value Inspections, policy reviews, research into the effects of a policy or practice.</p> <p>What did they tell you?</p>	<ul style="list-style-type: none"> • Consultation for the Health Act 2006 took place at National Level - October 2005. Derby City Council and local partners submitted responses to the Department of Health, followed by a free vote in Parliament. • In preparation of the Act this department surveyed 6,000 businesses (53% responded) to establish a baseline of compliance and how many businesses would be smoke free. • Enable us to target businesses with particular needs • 25% smoking population • Many businesses already smoke free • Identified assistance and support that businesses required
<p>Identifying potential equality issues and factors</p>	
<p>Question</p>	<p>Response/ findings</p>
<p>What do you already know about the equality impact or need? For example, from research, feedback, consultation or any performance monitoring</p>	<ul style="list-style-type: none"> • Although 6,000 surveys were sent out no ethnic or disability monitoring was included, a missed opportunity.
<p>Question</p>	<p>Response/ findings</p>
<p>Is there any evidence of higher or lower take up under the policy or practice, or of the service or function for any particular groups? For example, who uses the service, who doesn't and why not?</p>	<ul style="list-style-type: none"> • No evidence or basis for comparison.

<p>Have there been any important demographic changes or trends locally? For example is the population changing, and if so, how and what might that mean for the service or function?</p>	<ul style="list-style-type: none"> • Increase in the variety of different ethnic communities within the City e.g. Eastern European countries joining the EU but this will require further research.
<p>Question</p>	<p>Response/ findings</p>
<p>Is there an indication that any of the policies or practices involved with the service or function creates particular problems or difficulties for any groups of customers or communities?</p>	<p>See examples at the end</p>
<p>What information or data exists? For example, statistics, customer feedback, complaints, research, monitoring – who keeps it and can you get hold of it?</p>	<p>Business Surveys asked for feed back. Information was provided to those who asked for more information. Statistics would be available.</p> <p>For age restricted products all requests for service and complaints go through Consumer Direct. Statistics would be available.</p>
<p>Question</p>	<p>Response/ findings</p>

<p>Does any equality or diversity objectives already exist? If so, what are they and what is current performance like against them?</p>	<ul style="list-style-type: none"> • We use the Council’s Equality and Diversity policy in order to meet the needs of our service users • An Equality and Diversity action Plan has been produced to achieve the required standard • Guidance translated and Nationally available • Use of the International No Smoking Signs • Required improvements have been identified and we are working towards compliance.
<p>Is the service having a positive or negative effect on particular people in the community, or particular groups or communities?</p>	<ul style="list-style-type: none"> • The Health Act has a positive effect on the health of all people who live or work in the City whether they are service users or not. • No particular group is given priority over another in relation to interpretation and implementation of the Health Act and associated regulations.

Collecting the information and data about how the policy, practice, service or function, impacts on communities

Please record your information and data in this table and think about:

what information or data you will need
 using both quantitative and qualitative data
 making sure that where possible there is information that allows all perspectives to be considered
 identifying any gaps in the information/ data and what it can tell you

Data or information	When and how was it collected?	Where is it from?	What does it tell you? You need to consider all six equality strands where you can	Gaps in information
Customer feedback and complaints	Business Surveys	Business proprietors	Information gathered on smoking policies and Health & Safety	Equality standards were not looked at
Consultation and community involvement	Training Day June 2007	Business proprietors		Equality standards were not looked at
Performance information including Best Value	Collected monthly and quarterly fed back internally through Management Team and externally to Department of Health	Business proprietors	Not available at time of report	

Take up and usage data	<ul style="list-style-type: none"> • 6,000 business surveys sent • Training Day 	Business proprietors Business proprietors	<ul style="list-style-type: none"> • 53% returned but no equality question asked • No equality information was gathered at the training day. 	Equality standards were not looked at
Comparative information or data where no local information	Not available			
Census, national or regional statistics	East Midlands Big Smoke Debate – online survey	All sectors of the East Midlands	Asked about attitudes to and prevalence of smoking	
Access audits or assessments such as DDA assessments	Not applicable to carry out			
Workforce profile	Not applicable	Not applicable	Not applicable	Not applicable
Where service delivered under procurement arrangements – workforce profile for deliverers	Delivery all In-house			
Monitoring and scrutiny outcomes	To be done	To be determined	To be determined	To be determined

Analysing the information and data and setting equality objectives and targets

Please give your detailed findings in this table

Service or function	Policy or practice	Findings	Which groups are affected and how	Whose needs are not being met and how?
Smoke free compliance service	Provision of information in different languages	Literature supplied by Central Government. Various Languages available but no alternative option on English Version.	Any group where English is not their first language	To be determined
	Provision of information in other mediums	Literature supplied by Central Government. Audio book available (MP3) Need to obtain data on demand for other types of medium	Any group where the written word is a barrier to understanding	To be determined
Smoke free compliance service	Religious buildings still have to display signage in accordance with the Act.	Signs displayed in a clear and prominent position but can be suitable for the premises.	Any group where they operate from a religious or heritage building	To be determined

	Traditional Arabic cafes regarding use of the sheesha or hookahs and compliance with the Health Act.	Other Local Authorities have identified this as a problem	Any group which believes the use of the Sheesha or Hookah as part of their culture	To be determined
Age restricted products proof of age cards	'No ID No Sale' Provision of information in different languages	Only available in English provided by 'Citizen Card' <ul style="list-style-type: none"> • Who translates? Although Council translation services are available • Literature translation • Verbal translation 	Any group where English is not their first language	To be determined

<p>Age restricted products proof of age cards</p>	<p>'No ID No Sale' Provision of information in different mediums</p>	<p>Only available in written format provided by 'Citizen Card'</p> <ul style="list-style-type: none"> Who would be responsible for translation to other mediums? Although Council translation services are available. 	<p>Any group where the written word is a barrier to understanding</p>	<p>To be determined</p>
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Objectives - process, impact or outcome based

Please give your proposed objectives/ targets in this table.

Objective/Target:	Customer Satisfaction Survey that includes equality monitoring
Specific	
Measurable	
Achievable	
Relevant	
Timed	

Objective/Target:	
Specific	
Measurable	
Achievable	
Relevant	
Timed	

Objective/Target:	
Specific	
Measurable	
Achievable	
Relevant	
Timed	

Monitoring and reviewing - incorporating into performance management

Please summarise your objectives and targets in this table with your proposed monitoring and reporting arrangements

Objective	Planned action	Target performance			Responsible lead officer	Reporting cycle, for example, quarterly
		2005/6	2006/7	2007/8		