

**EQUALITY IMPACT ASSESSMENT
PART 1 – INITIAL SCREENING**

1. Name of the policy / function / service development being assessed?

Disinvestment of £2.7m in South London and Maudsley NHS Foundation Trust community services over the next two years as part of the overall disinvestment of £3.7m by NHS Southwark

2. Name of person responsible for carrying out the assessment?

Jo Kent

3. Describe the main aim, objective and intended outcomes of the policy / function / service development?

Aim: To ensure mental health service users and carers receive the services they need

Objective: To reorganise community mental health services in line with the reduced contract sum and at the same time ensuring that a comprehensive high quality service continues to be delivered

Intended Outcomes: That people that need mental health services continue to receive commissioned high quality services from South London and Maudsley NHS Foundation Trust

4. Is there reason to believe that the policy / function / service development could have a negative impact on a group or groups?

YES

Which equality groups may be disadvantaged / experience negative impact?

Race	Possibly
Disability	Unlikely
Gender	No
Age	No
Sexual orientation	Unlikely
Religion / belief	No

5. What evidence do you have and how has this been collected?

There is some evidence.

There are currently 3,300 clients being seen by South London and Maudsley NHS Foundation Trust in Southwark. In order to achieve the required savings to meet the disinvestment target, between 500 and 800 of these clients will need to be discharged to primary care. It can therefore be seen that whilst the reduction in

services is not aimed at any particular equality group, all may perceive they are being disadvantaged or experience a negative impact as a result of being discharged to primary care or experiencing changes to the way their services continue to be delivered in secondary care.

There are long standing concerns concerning the over-representation of African and African-Caribbean service users, and other patients from the BME communities in the more restrictive areas of the service, i.e. medium secure care, psychiatric intensive care units, and acute in-patient provision where they represent over 60% of formal admissions. It is desirable that more of these clients are seen routinely within primary care systems. A significant reduction in community based resources may exacerbate the above trend. It will be important within the new Clinical Academic Group care pathways we continue to try and ensure that wherever possible service users from these communities are enabled to leave the secondary mental health system.

6. Have you explained your policy / function / service development to people who might be affected by it?

Yes

If 'yes' please give details of those involved

Service User and Carers

Regular attendance at the Southwark Mind Service User Council to keep them updated on development

Presentation on 3rd August 2010 at the Southwark MHPB Stakeholder Event

Presented at six user led focus groups based in the CMHTs across the borough

Presented at PCT Stakeholder event on 19th October 2010

Staff

Met with all staff teams earlier in 2010 to inform them of pending reductions in budgets

Carried out nine staff consultation events in August 2010.

Fed back results at an event in September 2010

Formal consultation with affected staff will take place over a 30 day period in October 2010

7. If the policy / function / service development positively promotes equality please explain how?

As part of the plans to discharge people to primary care, the Staying Well Team has been put in place to support individuals to become autonomous and in control of their own lives, reducing their social isolation and supporting them to remain in the community.

Peer support is also being developed in all community team settings to provide groups that are led by service users to promote their autonomy in their communities

8. From the screening process do you consider the policy / function / service development will have a positive or negative impact on equality groups? Please rate the level of impact and summarise the reason for your decision.

Positive: Medium

Reason for your decision:

In the long term the service changes should see less dependence on statutory services and support people with mental health problems to have more independence and control over their lives.

Date completed:

Signed Print name
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If the screening process has shown potential for a negative impact you will need to carry out a full equality impact assessment