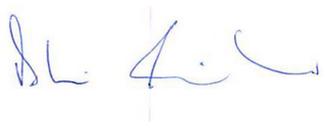


Equality Analysis Template

This document should be completed in conjunction with the Equality Analysis Guidance document. Should you have any queries, please contact the SECSU Equality & Diversity Team at SECSU.Equality@nhs.net who will be pleased to help.

Section 1: Policy, Function or Service Development Details and Authorisation	
Name of Organisation:	Croydon CCG
Name of the policy, function or service development being assessed:	Discontinuation of the prescribing of Gluten Free food products
Is this a new/existing/revised policy, function or service development?	New
Briefly describe its aims and objectives	<p>Coeliac disease is an auto immune disorder that involves a heightened immunological response to ingested gluten in genetically susceptible people. Individuals who are diagnosed as having coeliac disease should follow a strict gluten free diet. Gluten Free products are currently able to be prescribed on the NHS for specific indications in line with the Advisory Committee for Borderline Substances recommendations.</p> <p>In 2015/16 Croydon CCG spent £82,532 on gluten free food prescriptions.</p> <p>The proposal is to stop all prescriptions of gluten-free food items because of the following reasons:</p> <ul style="list-style-type: none"> - the NHS does not provide food on prescription for most other groups of people whose conditions are associated with, or affected by, the type of food they eat but which can be managed by eating a diet naturally free from certain ingredients - gluten-free foods are now widely available to purchase e.g. supermarkets, community pharmacies or via on-line retailers, and recently a national chain of high street bakers - it costs more for the NHS to supply gluten-free products on prescription than to buy them from a supermarket - other naturally gluten-free foods are widely available - potatoes, rice, corn (maize) - Improved food labelling now means people are able to see whether ordinary food products are free from gluten and can be safely eaten. - many people prefer to buy their own gluten-free foods, due to the wider choice available in shops compared to on prescription.
Analysis Start Date:	30/11/2016

Lead Author of Equality Analysis:	Victoria MacGregor / Janice Steele
SECSU Equality & Diversity Lead Approved? Yes/No (please indicate) Equality & Diversity Lead Name: Valerie Richards, Senior Associate, Equality and Diversity, SECSU Date of approval: 7 December 2016	
Have any financial or resource implications been identified?	
Date of Governing Body Meeting where the Equality Assessment was ratified:	

Section 2 : Equality Analysis Checklist

For each of the nine protected characteristics in the table below, consider whether the policy/function/service development could have a positive or negative outcome on each of these groups. Involve service users where possible to obtain their opinion, use demographic/census data (available from public health and other sources), surveys (previous surveys or perhaps conduct one), ask PALS and Complaints for reports/data, obtain subject specific reports from providers and other published data. Ensure any remedial actions are Specific, Measureable, Achievable, Realistic, and Timely (SMART)

Equality Group	What evidence has been used for this analysis?	What engagement and consultation has been used?	Identify positive / negative / no outcomes	How are you going to address issues identified?	Specify the Named Lead and Timeframe
<p>Age</p> <p>Think about different age groups and the policy/function/service development and the way the user would access it, is it user friendly for that age group?</p> <p>What is the age breakdown in the community/workforce? Will the</p>			<p>There could be a negative impact on the elderly or people who do not have access to the internet and the larger supermarkets which stock a wider range of gluten free products.</p> <p>Patients under the age of 18</p>	<p>Patients will be signposted to places where gluten free foods can be purchased (including naturally gluten free foods) and most community pharmacies have the facility to order in gluten free products for purchase that patients would previously have received on prescription.</p>	

Equality Group	What evidence has been used for this analysis?	What engagement and consultation has been used?	Identify positive / negative / no outcomes	How are you going to address issues identified?	Specify the Named Lead and Timeframe
change/decision have significant impact on certain age groups?			could be negatively impacted by this change as they are mostly reliant on others e.g. parents / guardians to purchase gluten free food on their behalf.	Patients and their parents / guardians will be provided with information as above. This age groups reliance upon others to purchase food on their behalf is no different to requirements for other patient groups with food allergies/intolerances e.g. nut allergy sufferers/lactose intolerance where there is currently no provision on the NHS.	
<p>Disability</p> <p>Think outside the box – you may not be able to see the disability. It could be physical (for instance hearing or visual impairment), unseen (for instance mental health) or a learning disability (for instance Autism). Consider for example: Accessibility – venue, location, signage, furniture and getting around Disability awareness training for staff Actively involve the service user and talk it through with them Mental Health – does this affect significant communities in the local population?</p>	Coeliac disease is not considered a disability under the Equalities Act 2010		There could be a negative impact on the disabled or people who do not have access to the internet and the larger supermarkets which stock a wider range of gluten free products.	<p>Patients will be signposted to places where gluten free foods can be purchased (including naturally gluten free foods) and most community pharmacies have the facility to order in gluten free products for purchase that patients would previously have received on prescription.</p> <p>We will endeavour to ensure that any patient information produced is accessible to all patient groups.</p>	
<p>Gender Reassignment</p> <p>Think about creating an environment within the policy/function/service development that is user friendly and non-judgemental. Does the organisation need to raise awareness / offer training?</p> <p>If the policy/function/service development is specifically targeting this protected characteristic, think carefully about confidentiality, training, and communication skills</p>			Neutral outcomes		

Equality Group	What evidence has been used for this analysis?	What engagement and consultation has been used?	Identify positive / negative / no outcomes	How are you going to address issues identified?	Specify the Named Lead and Timeframe
<p>Marriage and Civil Partnership</p> <p>Think about access and confidentiality, the partner may not be aware of involvement or access to the service</p> <p>Staff training to raise awareness of ensuring equal status to spouses and civil partners in all HR policies, terms and conditions and services.</p>			Neutral outcomes		
<p>Pregnancy & Maternity</p> <p>The policy/function/service development must be accessible for all e.g. opening hours</p> <p>Are the chairs appropriate for breast feeding? Is there a private area? Are there baby changing facilities and is there space for buggies?</p> <p>What are the future projections for birth rates, neo natal statistics? Will the service/decision have a significant impact on this protected characteristic?</p>			Neutral outcomes		
<p>Race</p> <p>You need to think carefully about the local demographics of the population who will be accessing the policy/function/service development. Talk to public health. Consider for example:</p> <p>Cultural issues (gender, clothing etc.)</p> <p>Languages</p> <p>Support to access</p> <p>Staff training on cultural awareness, interpreting etc.</p>			Neutral outcomes		

Equality Group	What evidence has been used for this analysis?	What engagement and consultation has been used?	Identify positive / negative / no outcomes	How are you going to address issues identified?	Specify the Named Lead and Timeframe
<p>Religion or Belief</p> <p>Again, think about the local population and what religion or beliefs they may have. Consider for example:</p> <ul style="list-style-type: none"> - Staff training on respecting differences and religious beliefs - Are you trying to implement a change/activity at an inconvenient time e.g. during a time of religious holiday such as Ramadan? - Is there an area for prayer times, religious rituals e.g. washing area? 			Neutral outcomes		
<p>Sex</p> <p>This is the impact on males and females.</p> <ul style="list-style-type: none"> - For example same sex accommodation - are there areas for privacy? Is it accessible for both taking into account working service users? Would it be a venue they would go to? - What does research show regarding the incidence of for example, mental health, cancers, early or late diagnoses for males or females? 			Neutral outcomes		
<p>Sexual Orientation</p> <p>Don't make assumptions as this protected characteristic may not be visibly obvious.</p> <p>Providing an environment that is welcoming - for example visual aids, posters, leaflets.</p> <p>Using language that respects LGB&T people.</p> <p>Staff training on how to ask LGB&T people to disclose their sexual orientation without fear or prejudice.</p>			Neutral outcomes		

Equality Group	What evidence has been used for this analysis?	What engagement and consultation has been used?	Identify positive / negative / no outcomes	How are you going to address issues identified?	Specify the Named Lead and Timeframe
<p align="center">Carers</p> <p>Does your policy/function/service development impact on carers? Ask them.</p> <p>Do you need to think about venue, timing? What support will you be offering?</p>			Neutral outcomes		
<p align="center">Other – Low incomes</p> <p>Does your policy/function/service development impact on for example, those on low incomes, who are homeless etc.?</p>	<p>Data produced by the SECSU equality and diversity team demonstrates that levels of deprivation vary across the borough. The north of the borough has high levels of deprivation where the majority of residents are in the 1st and 2nd most deprived quintiles. The East of the borough has medium to high levels of deprivation. The majority of the population in the South of the borough are in the 3rd to 5th quintiles of deprivation however there are pockets of the 2nd most deprived.</p> <p>Prescribing data for gluten free prescription food items in 15/16 and 16/17 shows that 30% of the total cost of gluten free prescribing so far in 16/17 has been from just 4 practices, all of which are in the south of Croydon where levels of deprivation are the lowest. 6 of the 7 practices with no gluten free prescribing in 15/16 or so far in 16/17 are in either the north or east of the borough where levels of deprivation are the highest.</p>		Patients who have a socio-economic disadvantage could be negatively impacted by this change. Some people may not be easily able to afford gluten free food substitutes, which can be more expensive than gluten containing equivalent products.	<p>All individuals will be given comprehensive information detailing the many naturally gluten free foods that are available to buy at a reasonable cost. E.g. rice, potatoes, pulses.</p> <p>As the gluten free market is increasing in availability the market has become more competitive and prices are reducing to become more in-line with regular gluten containing products.</p> <p>It is planned to provide examples of gluten free substitute foods with their current prices, signposting patients to the most cost-effective options. Patients are currently and will continue to be signposted to the Coeliac UK website where further resources are available.</p> <p>Currently prescribing data suggests that the highest rates of prescribing are currently in the South of the borough where levels of deprivation are on the whole lower and therefore the impact of withdrawing gluten free prescribing should have a lower impact on this patient population.</p>	

Section 3 : Action Plan

For any negative outcomes identified in Section 2, it is important to identify the steps you will take to mitigate consequences on the nine protected characteristics. Complete the Action Plan below to identify and record how you will address these.

Equality Group	Negative Outcome	Mitigating Action (Identify any resource/other implications)	Named Lead and Timeframe
Age	This patient group may find it harder to access gluten free foods which they may previously have received on prescription		
Disability	This patient group may find it harder to access gluten free foods which they may previously have received on prescription		
Gender Reassignment	None		
Marriage & Civil Partnership	None		
Pregnancy & Maternity	None		
Race	None		
Religion or Belief	None		
Sex	None		
Sexual Orientation	None		
Carers	None		
Other – low income	This patient group may find it harder to access gluten free foods which they may previously have received on prescription		

Section 4 : Submission

On completion of all sections of the Equality Analysis Form, submit your draft along with the policy, function, or service document to the SECSU Equality & Diversity Team. Once reviewed, the team will provide feedback and any recommended amendments. Having made any necessary changes, the final version should then be submitted to the CCG Equality Lead for information and the SECSU Equality & Diversity Team for consideration before ratification at the next Governing Body Meeting. The completed EA Template should be appended to the policy, function or service development documentation.