# **EQUALITY IMPACT ASSESSMENT**

Strategic Co-Operative Commissioning



### STAGE I: WHAT IS BEING ASSESSED AND BY WHOM?

| What is being assessed - including a brief description of aims and objectives? | The Veterans Strategic Commissioning Framework sets out Plymouth City Council's and NEW Devon Clinical Commissioning Group's commissioning intentions for support services for Veterans and their families. It aims to ensure that services to be seamless, with services joined up to ensure the smooth transition from a military career into the civilian community.   |
|--|---|
|  | Data indicates we have around 18,899-20,281 Veterans in Plymouth and we are aware that there is likely to be a greater proportion of mental health and offending support needs within this population.  |
|  | The framework identifies gaps in the effectiveness of current provision. Historically there has been a lack of quantitative data regarding the Veteran population including statistics around the protective characteristics set out in the The Equality Act 2010. The council has commissioned a new Veterans Care Navigation Service which will launch to the public in June 2017. The new service will aim to build up a comprehensive picture of the needs of Veterans in Plymouth. The commissioning plan aims to reduce discrimination encountered by Veterans by linking services in a way that ensures all Veterans have access to the services that they need. |
| Author   | Katy Shorten  |
| Department and service   | Strategic Co-Operative Commissioning  |
| Date of assessment   | 15/05/2017  |

Version 2, February 2015 OFFICIAL

## **STAGE 2: EVIDENCE AND IMPACT**

| Protected characteristics (Equality Act) | Evidence and infe                              | ormation (eg d            | ata and feedb | ack)                  |           | Any adverse impact See guidance on how to make judgement                                      | Actions          | Timescale and who is responsible |  |  |  |               |
|--|--|---------------------------|---------------|-----------------------|-----------|---|------------------|----------------------------------|--|--|--|---------------|
| Age                                      |  | Royal British             | Legion        | Office for Statistics | National  | No adverse Collate and  |                  |                                  |  |  |  | Commissioning |
|  | Age<br>Group<br>Years                          | Estimated                 | Estimated     | Estimated             | Estimated | impacts anticipated.  Veterans of all ages  | review data from | at annual review by April        |  |  |  |               |
|  |  | Prevalence %              | Number        | Prevalence %          | Number    | will be supported to access services.  Commissioned services to identify any variation to the |                  | 2018                             |  |  |  |               |
|  | 16-24  | 0.84                      | 331           | 1.58                  | 619       |   |                  |                                  |  |  |  |               |
|  | 25-34  | 3.28                      | 1,124         | 3.14                  | 1,075     |   | expected         | e                                |  |  |  |               |
|  | 35-44  | 4.44                      | 1,475         | 5.11                  | 1,699     |   | prevalence       |                                  |  |  |  |               |
|  | 45-54  | 5.45                      | 1,850         | 5.81                  | 1,971     |   |                  |                                  |  |  |  |               |
|  | 55-64  | 10.54                     | 3,066         | 6.87                  | 2,000     |   |                  |                                  |  |  |  |               |
|  | 65-74  | 28.54                     | 6,278         | 23.05                 | 5,070     |   |                  |                                  |  |  |  |               |
|  | 75-84  | 36.55                     | 5,152         | 152 0.00 0            |           |   |                  |                                  |  |  |  |               |
|  | 85+  | 17.88                     | 1,005         | 0.00                  | 0         |   |                  |                                  |  |  |  |               |
|  | (ONS 75+)                                      | 0.00                      | -             | 32.79                 | 6,465     |   |                  |                                  |  |  |  |               |
|  | Total  |                           | 20,281        |                       | 18,899    |   |                  |                                  |  |  |  |               |
|  | Table 1: Pop<br>It is estimated tha<br>or over | ulation for Plymouth adap |               |                       |           |   |                  |                                  |  |  |  |               |

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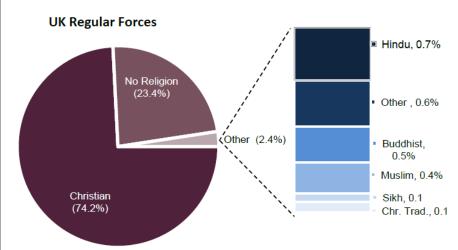
| Disability | Nationally, about 22,000 Armed Forces personnel leave service and return to civilian life every year. During 20012/13, 23,520 personnel left UK Regular Armed Forces, out of these 430 (1.8% of service leavers) were discharged for medical reasons. Out of the medical discharges, there were 256 (1.1% of service leavers) for musculo-skeletal disorders and 45 (0.2% of service leavers) for mental and behavioural disorders (Defence Analytical Services and Advice 2010a). The MoD is now making available data on service leavers at a local level.  40.1% of working age veterans report at least one long term health condition | No adverse impacts anticipated. The service is expected to be available to all veterans irrespective of ability or disability | Identify the current 'pathway' for Veterans and smooth transitions to prepare people for civilian life, providing support | The Veterans<br>operational<br>group by April<br>2019 |
|------------|--|---|---|---|

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|        | 50.5% of veterans aged 65+ report at least one long term health condition Source: MOD, Annual Population Survey UK Armed Forces Veterans residing in Great Britain, 2015, 2016 Further information from the Royal British Legion, A UK Household Survey of the ex-Service population 2014, 2015:  35% of veterans in the UK report a long term illness that limits their activities  24% of working age veterans in the UK report a long term illness that limits their activities  42% of veterans in the UK aged 65+ report a long term illness that limits their activities | No adverse           | through into the community.  Develop the workforce to 'up skill' staff within mainstream support services and build relationships with specialist services and raise awareness so that Veterans know how and where to access support services.  Build up a comprehensive picture of the needs of Veterans in Plymouth and analyse to highlight any specific issues that can be addressed.  Collate and | The VCNS by April 2019  VCNS/ Commissioners / Veterans Strategic Stakeholder group by April 2019  Commissioning |
|--------|--|----------------------|--|---|
| belief | Transfer of material and remains to receiving to yet to be published.  | impacts anticipated. |  | at annual   |

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# Religion of the UK Regular Forces as at 1 October 2016:



Source: UK Armed Forces Biannual Diversity Statistics 1 October 2016

#### Plymouth population data:

- 84,326 (32.9%) of the Plymouth population stated they had no religion.
- Those with a Hindu, Buddhist, Jewish or Sikh religion combined totalled less than I per cent.
- Christianity: 148,917 people (58.1%), decreased from 73.6 per cent since 2001.
- Islam: 2,078 people (0.8%), doubled from 0.4 per cent since 2001.
- Buddhism: 881 people (0.3%), increased from 0.2 per cent since 2001.
- Hinduism: 567 people (0.2%) described their religion as Hindu, increased from 0.1 per cent since 2001.
- Judaism: 168 people (0.1%), decreased from 181 people since 2001.
- Sikhism: 89 people (less than 0.1%), increased from 56 people since 2001.
- Other: 0.5% had a current religion that was not Christianity, Islam, Buddhism, Hinduism, Judaism or Sikh, such as Paganism or Spiritualism.

Source: PCC Summary Equality Profile, 28/01/2017

The service is expected to be available to all veterans irrespective of faith/religion or belief

from
Commissioned
services to
identify any
variation to the
expected
prevalence

Ethnic monitoring data will be collected by the VCNS.

review by April 2018

| Gender - including marriage, pregnancy and maternity | At I October 2016 10.2% of the UK Regular Forces were female (15,280 personnel).  Source: UK Armed Forces Biannual Diversity Statistics 1 October 2016  Veterans in Great Britain:  • Male- 89.5%  • Female- 10.5%  • Single, never married - 10.1%  • Married, civil partner - 61.5%  • Married, Civil partner (separated) - 2.3%  • Divorced/ Former Civil Partner, legally dissolved - 9.8%  • Widowed/ Surviving Civil Partner, partner died - 16.3%  Source: MOD, Annual Population Survey UK Armed Forces Veterans  | No adverse impacts anticipated. The service is expected to be available to all veterans irrespective of gender | Collate and review data from Commissioned services to identify any variation to the expected prevalence | Commissioning<br>at annual<br>review by April<br>2018 |
|--|---|--|---|---|
| Gender<br>reassignment                               | <ul> <li>residing in Great Britain, 2015, 2016</li> <li>There is currently no consistent local or national data available for Veterans.</li> <li>Recent surveys have put the prevalence of transgender people between 0.5 and 1% of population (some very recent reports have upped this to 2%).</li> <li>Over the last 8 years the prevalence of transgendered people in the UK has been increasing at an average rate of 20%+ per annum in adults and 50% for children.</li> <li>In 2015 there was a 100% increase in referrals to the Gender Identity Development Service at the Tavistock &amp; Portman Institute.</li> <li>The average age for presentation for reassignment of male-to-females is 40-49, for female-to-male the age group is 20-29.</li> <li>Twenty three transgender people belong to Pride in Plymouth. Source: PCC Summary Equality Profile, 28/01/2017</li> </ul> | No adverse impacts anticipated. The service is expected to be available to all veterans                        | Collate and review data from Commissioned services to identify any variation to the expected prevalence | Commissioning at annual review by April 2018          |
| Race   | Black, Asian and Minority Ethnic (BAME) personnel accounted for 7.0 per cent of the UK Regular Forces (10,470 personnel), at 1 October 2016.  At 1 October 2016, 95.6 per cent of the UK Regular Forces had a UK Nationality.  BAME personnel represented 5.3 per cent of outflow from the UK Regular   | No adverse impacts anticipated. The service is expected to be available to all veterans                        | Collate and review data from Commissioned services to identify any                                      | Commissioning at annual review by April 2018          |

|   | Forces in the 12 months to 30 September 2016, a decrease from 6.3 per cent in the 12 months ending 30 September 2015  Source: UK Armed Forces Biannual Diversity Statistics 1 October 2016   | irrespective of race   | variation to the expected prevalence  |   |
|---|--|--|---|---|
| Sexual<br>orientation -<br>including civil<br>partnership | There is currently no consistent local or national data available for Veterans. There is no precise local data on numbers of Lesbian, Gay and Bi-sexual (LGB) people in Plymouth, but nationally the government have estimated this to be between 5 - 7 per cent and Stonewall agree with this estimation given in 2005. This would mean that for Plymouth the figure is approximately 12,500 to 17,500 people aged over 16 in Plymouth are LGB. | No adverse impacts anticipated. The service is expected to be available to all veterans irrespective of sexual orientation | Collate and review data from Commissioned services to identify any variation to the expected prevalence | Commissioning<br>at annual<br>review by April<br>2018 |

# STAGE 3: ARE THERE ANY IMPLICATIONS FOR THE FOLLOWING? IF SO, PLEASE RECORD ACTIONS TO BE TAKEN

| Local priorities   | Implications   | Timescale and who is responsible |
|--|--|----------------------------------|
| Reduce the gap in average hourly pay between men and women by 2020.    | The Veterans Strategic Commissioning Framework seeks to improve the access to appropriate education and employment opportunities for all Veterans requiring support. No adverse impact has been identified.  |                                  |
| Reduce the inequality gap, particularly in health between communities. | The introduction of a strategic framework will support the reduction of (health) inequality experienced by Veterans by ensuring improved access to health & wellbeing services, especially to mental health services. No adverse impact has been identified.   |                                  |
| Good relations between different communities (community cohesion)      | The Veterans Strategic Commissioning Framework seeks to ensure the smooth transition from a military career into the civilian community. No adverse impact has been identified.  |                                  |
| Human rights Please refer to guidance                                  | Plymouth City Council recognises Article 14 of the Human Rights Act – The right to receive Equal Treatment and prohibits discrimination including sex, race, religion and economic and social status in conjunction with the Equalities Act which includes age and disability. All staff and service users will be treated fairly and their human rights will be respected. No adverse impact on human rights has been identified. |                                  |

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### **STAGE 4: PUBLICATION**

Responsible Officer Craig McArdle

Date 16 May 2017

Director, Assistant Director or Head of Service

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