

H&F Equality Impact Analysis Tool

Conducting an Equality Impact Analysis

An EIA is an improvement process which helps to determine whether our policies, practices, or new proposals will impact on, or affect different groups or communities. It enables officers to assess whether the impacts are positive, negative, or unlikely to have a significant impact on each of the protected characteristic groups.

The tool is informed by the [public sector equality duty](#) which came into force in April 2011. The duty highlights three areas in which public bodies must show compliance. It states that a public authority must, in the exercise of its functions, have due regard to the need to:

- 1. Eliminate discrimination, harassment, victimisation, and any other conduct that is prohibited under the Equality Act 2010**
- 2. Advance equality of opportunity between persons who share a relevant protected characteristic and persons who do not share it**
- 3. Foster good relations between persons who share a relevant protected characteristic and persons who do not share it**

Whilst working on your Equality Impact Assessment, you must analyse your proposal against these three tenets.

General points

1. In the case of matters such as service closures or reductions, considerable thought will need to be given to any potential equality impacts. Case law has established that due regard cannot be demonstrated after the decision has been taken. Your EIA should be considered at the outset and throughout the development of your proposal, it should demonstrably inform the decision, and be made available when the decision is recommended.
2. Wherever appropriate, the outcome of the EIA should be summarised in the Cabinet/Cabinet Member report and equalities issues dealt with and cross referenced as appropriate within the report.
3. Equalities duties are fertile ground for litigation and a failure to deal with them properly can result in considerable delay, expense, and reputational damage.
4. Where dealing with obvious equalities issues e.g. changing services to disabled people/children, take care not to lose sight of other less obvious issues for other protected groups.
5. If you already know that your decision is likely to be of high relevance to equality and/or be of high public interest, you should contact the Strategy & Communities team for support.

Further advice and guidance can be accessed online and on the intranet:

<https://www.gov.uk/government/publications/public-sector-equality-duty>

<https://officesharedservice.sharepoint.com/sites/Governance/SitePages/Reports.aspx>

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Overall Information	Details of Full Equality Impact Analysis
Financial Year and Quarter	2024/25 / Q4
Name and details of policy, strategy, function, project, activity, or programme	<p data-bbox="560 384 2029 491">Title of EIA: Procurement of Hammersmith & Fulham's Genito-Urinary Medicine (GUM) and sexual and reproductive health (SRH) services Short summary:</p> <p data-bbox="560 531 2029 783">Local Authorities are required to provide a range of Sexual and Reproductive Health (SRH) services including GUM services. The Health and Social Care Act (2012) stipulates the mandated functions, which requires each local authority to provide, or secure the provision of, open access sexual health services in its area including: access to all types of contraception, preventing the acquisition and transmission of sexually transmitted infections (STIs); treating, testing and caring for people with STIs, partner notification, and provision of HIV pre-exposure prophylaxis (PrEP). GUM services are funded from the Public Health Grant.</p> <p data-bbox="560 826 2029 1158">Services must be open access, which means residents are entitled to visit sexual health facilities in any part of the country, without the need for a referral from a GP or other health professional. Pan-London arrangements and partnering agreements are in place to support this arrangement. The London Sexual Health Programme (LSHP) therefore exists as a partnership of 30 London local authorities that coordinates strategy and planning of sexual health services in the capital. The City of London Corporation hosts the Pan-London partnership and holds the management function of the programme, this includes arranging meetings, developing tariffs and oversight of the online services. The Pan-London partnership is in turn divided into sub-regions, with Hammersmith & Fulham part of the Inner North West London (INWL) sub-region, led by Westminster City Council.</p> <p data-bbox="560 1198 2029 1375">This report seeks approval to:</p> <ul style="list-style-type: none"> <li data-bbox="607 1235 2029 1375">- Procure a contract through a compliant procurement process under PSR 2023 Direct Award Process C for the provision of GUM Sexual Health Services with the process being undertaken collaboratively by Westminster City Council on behalf of LBHF (and the Royal Borough of Kensington and Chelsea).

	<ul style="list-style-type: none"> - Enter into an inter-authority agreement or MOU with Westminster City Council and the Royal Borough of Kensington and Chelsea as may be required to govern the terms of the collaboration. - Delegate the decision to award at the end of Direct Award Process C to the Deputy Leader of Hammersmith & Fulham.
Lead Officer	Name: Craig Holden Position: Senior Lead, Adult Public Health Email: craig.holden@lbhf.gov.uk Telephone No: 07795127385
Date of completion of final EIA	28 / 02 / 2025

Section 02	Scoping of Full EIA		
Plan for completion	Timing: 2024-25 Resources: Public Health Commissioners		
Analyse the impact of the policy, strategy, function, project, activity, or programme	Analyse the impact of the policy on the protected characteristics (including where people / groups may appear in more than one protected characteristic). You should use this to determine whether the policy will have a positive, neutral, or negative impact on equality, giving due regard to relevance and proportionality.		
	Protected characteristic	Analysis	Impact: Positive, Negative, Neutral
	Age	The service will be procured for all adults and young people resident in the borough to use. Hammersmith & Fulham has a younger than average population compared to the rest of the country, and young people are more likely to be diagnosed with an STI. In 2023, 44 per cent of diagnoses of new STIs in H&F residents made in SRH services were in people aged 25-to-34-years-old, 27 per cent of	Positive

		<p>diagnoses were in young people aged 15-to-24-years-old. Young people are also more likely to become re-infected with STIs, as a result of high risk-taking sexual behaviours, such as unprotected sex without a condom.</p> <p>The needs of young people are a service priority, and the service aims to ensure increased engagement with young people. The service currently offers a dedicated specialist clinic for young people under the age of 21-years, and targeted outreach services in partnership with the voluntary and community sector to engage young people.</p> <p>It is recognised that there is a need for service access for older people as well, and this is recognised in the provision of open access of services for all. The service has also close working links with the Support and Advice for Sexual Health (SASH) service to support individuals of all ages.</p>	
	Disability	In 2021, 12.5% of Hammersmith & Fulham residents identified as Disabled. All young people and adults who are resident in the local authority have open access to SRH services, and the service provides equitable access to all. The service currently offers a dedicated specialist clinic for people living with Learning Disabilities and Difficulties, as well as outreach for sexual health screening, health promotion, contraception delivery with tailored support for Disabled residents .	Positive
	Gender reassignment	Trans and non-binary people are a demographic group deemed as a service priority as they are often the most vulnerable in terms of access and/or at greatest risk of poor sexual health outcomes. There are currently four clinics across inner northwest London which have	Positive

		evolved to meet the needs of the Trans and non-binary community by linking in with other local services, and offer dedicated specialist clinics for trans and non-binary clients.	
	Marriage and Civil Partnership	There are no identified impacts for marriage and civil partnerships	Neutral
	Pregnancy and maternity	<p>Under-18 conception rates in the borough have dropped significantly in the last twenty years. In 2021, the conception rate for under 18s in Hammersmith & Fulham was 5.4 per 1,000, significantly lower than the rate for London (9.5 per 1,000) and England (13.1 per 1,000). Abortion rates have remained relatively stable in the last five years in Hammersmith & Fulham, with a total abortion rate of 21.1 per 1,000 in 2021. However, this was higher than the national average (19.2 per 1,000).</p> <p>As part of a whole system approach the service aims to support individuals to have control over their reproductive health to ensure pregnancies are planned, health is optimised both before and during pregnancy, and those who do not wish to have children can effectively prevent pregnancy.</p> <p>The service will ensure all women resident to Hammersmith & Fulham should have easy access to a choice of contraception, promoting and increasing use of the most effective forms of long-acting reversible contraception (LARC), including for disadvantaged or under-served communities. There should also be clear open signposting to abortion services.</p>	Positive
	Race	Hammersmith & Fulham is an ethnically diverse borough. 63% of residents identify with White ethnic groups, compared to 81% in England. Black and Minority Ethnic populations have been shown to	Positive

		<p>be disproportionately affected by poor sexual and reproductive health, and thus the needs of BME communities are a service priority. In 2022, STI diagnostic rates were highest among Hammersmith & Fulham resident of Black, Mixed and Other ethnicity. There is also over representation of new STI and HIV diagnoses amongst individuals of Black and Other ethnicity compared to the local population in Hammersmith & Fulham.</p> <p>The service will be required to work with groups most at risk of sexual ill health. The service will be expected to tackle inequalities faced by Black and Multi Ethnic groups, ensure equality of access and treatment for all residents, provide culturally sensitive services and deal robustly with all incidents of racially motivated harassment, violence and/or abuse.</p>	
	Religion/belief (including non-belief)	There are no identified impacts for religion/belief. The service will be expected to continue to support residents to practice their religion/beliefs.	Neutral
	Sex	Hammersmith & Fulham has a slightly bigger female population, with 53% being female and 47% male. Between 2018 and 2024, a greater proportion of interventions at SRH services have been for female patients. As highlighted in the UK Government's Women's Health Strategy ¹ , women spend a significantly greater proportion of their lives in ill health and disability when compared to men. Priority areas include fertility, pregnancy, menstrual health, and gynaecological conditions. Access and uptake of SRH services can vary amongst groups, and it is important that the service ensures equitable access for women to ensure better sexual health outcomes, including uptake of long-acting contraception, cervical screening, and HIV PrEP.	Positive

¹ Department of Health and Social Care, 'Women's Health Strategy for England', 2022. Available: [Women's Health Strategy for England - GOV.UK](https://www.gov.uk/government/publications/womens-health-strategy-for-england)

		The service has set up a women's only space and a dedicated HIV PrEP clinic for women. The service works closely with local specialist organisations to target high risk groups that are under-represented in the service, including outreach services for both female and male sex workers.	
	Sexual Orientation	<p>Gay, bisexual and other men who have sex with men (GBMSM) accounted for 42 per cent of all new STI diagnoses in Hammersmith & Fulham residents in 2022. Gay and bisexual men make up less than 5% of the Hammersmith & Fulham population (from the estimated proportion of gay/lesbian and bisexual men and women), which suggests this group have a high burden of disease. In 2023, the majority of syphilis and gonorrhoea diagnoses in Hammersmith & Fulham residents were for gay men, accounting for 75 per cent and 63 per cent respectively.</p> <p>The services clinics are recognised as a centre of excellence for the LGBTQ+ community. The service will be expected to continue to ensure equality of access and treatment for all residents, and deal robustly with all incidents of homophobic harassment, violence and/or abuse. The service will be expected to address health inequalities by prioritising resources based on need in accordance with the UKHSA STI prioritisation Framework².</p>	Positive
	Care Experienced as a Protected Characteristic	There are no identified impacts for Care Experienced people.	Neutral

² UK Health Security Agency, "STI Prioritisation Framework", 2024. Available: [STI Prioritisation Framework - GOV.UK](#)

	<p>Human Rights or Children's Rights</p> <p>If your decision has the potential to affect Human Rights or Children's Rights, please contact your Equality Lead for advice</p> <p>Will it affect Human Rights, as defined by the Human Rights Act 1998?</p> <p>No</p> <p>Will it affect Children's Rights, as defined by the UNCRC (1992)?</p> <p>No</p>
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Section 03	<p>Analysis of relevant data</p> <p>Examples of data can range from census data to customer satisfaction surveys. Data should involve specialist data and information and where possible, be disaggregated by different equality strands.</p>
Documents and data reviewed	<p>A full Sexual and Reproductive Health Needs Assessment has been undertaken by Public Health in support of this procurement. This has included analysis of data from a range of specialist resources, including UKHSA Sexual and Reproductive Health Profiles³, Summary Profile of Local Authority Sexual Health (SPLASH) report, GUMCAD STI Surveillance System⁴, and Sexual and Reproductive Health Activity Data Set (SRHAD) collection⁵.</p>
New research	<p>If new research is required, please complete this section</p>

Section 04	Consultation
Consultation	<p>Details of consultation findings (if consultation is required. If not, please move to section 06) – n/a</p>

³ Department of Health and Social Care, "Sexual and Reproductive Health Profiles", 2024. Available: [Sexual and Reproductive Health Profiles | Fingertips | Department of Health and Social Care](#)

⁴ UK Health Security Agency, "GUMCAD STI Surveillance System", 2024

⁵ NHS Digital, "Sexual and Reproductive Health Activity Data Set (SRHAD) collection", 2024

Analysis of consultation outcomes	
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Section 05	Analysis of impact and outcomes
Analysis	What has your consultation (if undertaken) and analysis of data shown? You will need to make an informed assessment about the actual or likely impact that the policy, proposal, or service will have on each of the protected characteristic groups by using the information you have gathered. The weight given to each protected characteristic should be proportionate to the relevant policy (see guidance) – n/a.

Section 06	Reducing any adverse impacts and recommendations
Outcome of Analysis	No adverse impacts are anticipated.

Section 07	Action Plan					
Action Plan	Note: You will only need to use this section if you have identified actions as a result of your analysis					
	Issue identified	Action (s) to be taken	When	Lead officer and department	Expected outcome	Date added to business/service plan

Section 08	Agreement, publication and monitoring
Senior Managers' sign-off	Name: Dr Nicola Lang Position: Director of Public Health

	Email: nicola.lang@lbhf.gov.uk Telephone No: 07769 199 396 Considered at relevant DMT:
Key Decision Report (if relevant)	Date of report to Cabinet/Cabinet Member: 16 / 06 / 2025 Key equalities issues have been included: Yes
Equalities Advice (where involved)	Name: Yvonne Okiyo Position: Strategic Lead Equity, Diversity and Inclusion Date advice / guidance given: 04.03.25 Email: yvonne.okiyo@lbhf.gov.uk Telephone No: 07824 836 012