

<b>Title of policy / procedure / function / project / decision:</b>	Brio Integrated Wellbeing Service
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### **Evidence based equality analysis**

Main aims, purpose and outcomes and how does it fit in with the wider aims of the organisation:

The Integrated Wellbeing (IWB) Service is commissioned by Cheshire West & Chester Council (CW&CC) and delivered by Brio Leisure (Brio).

The IWB Service consists of four pathways: Falls Prevention, Exercise on Referral, Adult Weight Management, and Smoking Cessation.

This Equality Analysis focuses on three pathways: Falls Prevention, Exercise on Referral, and Adult Weight Management. Smoking Cessation will remain unchanged and has additional funding allocated to expand the service to the population of Cheshire West and Chester.

### **Referral criteria**

There has been a review of the referral criteria for Exercise on Referral and Adult Weight Management. This review was necessary due to the capacity reduction in these two pathways. This review has resulted in some proposed changes, which can be found in Table 2. The proposed criteria are better aligned to the referral criteria with the Core20PLUS5 approach.

[NHS England » Core20PLUS5 \(adults\) – an approach to reducing healthcare inequalities](#)

Access to both pathways will be by GP/Health Professional referral only. This is consistent with the current operating model.

**Table 2: Proposed changes to referral criteria**

<b><u>Exercise on Referral</u></b>	
<b>Current criteria</b>	<b>Proposed criteria</b>
<ul style="list-style-type: none"> <li>• 18 years + old</li> <li>• Diagnosed with one of the following:               <ul style="list-style-type: none"> <li>✓ Chronic obstructive pulmonary disease (COPD)</li> <li>✓ Enduring mental health</li> <li>✓ Type 2 diabetes</li> <li>✓ Learning disability</li> <li>✓ Physical disability</li> </ul> </li> </ul>	<ul style="list-style-type: none"> <li>• 18 years + old</li> <li>• Diagnosed with one of the following:               <ul style="list-style-type: none"> <li>✓ Learning disability</li> <li>✓ Physical disability*</li> <li>✓ COPD</li> <li>✓ Severe mental illness (SMI)**</li> <li>✓ Cancer Prehab</li> </ul> </li> </ul>
<b><u>Adult Weight Management</u></b>	
<b>Current criteria</b>	<b>Proposed criteria</b>
<ul style="list-style-type: none"> <li>• 18 years + old</li> <li>• BMI 30 - 39.9</li> <li>• Diagnosed with one of the following:               <ul style="list-style-type: none"> <li>✓ Learning disability</li> <li>✓ Physical disability</li> <li>✓ Enduring mental health</li> </ul> </li> </ul>	<ul style="list-style-type: none"> <li>• 18 years + old</li> <li>• BMI 30 - 39.9</li> <li>• Diagnosed with one of the following:               <ul style="list-style-type: none"> <li>✓ Learning disability</li> <li>✓ Physical disability*</li> <li>✓ SMI**</li> <li>✓ Hypertension (medicated)</li> </ul> </li> </ul>

\*The current Physical disability criterion has seen many inappropriate referrals. For this reason, and due to decreased capacities, this criterion will be redefined as:

*A person's physical functioning is clinically evidenced as having a long-term negative effect on their ability to exercise, and they are in receipt of a qualifying disability benefit related to their physical function.*

Enduring mental health is the other criterion that has received many inappropriate referrals. This criterion has been amended to severe mental illness (SMI) for both pathways.

\*\* Eligible SMI conditions include: PTSD, schizophrenia, bipolar disorder or psychosis

Redefining the physical disability and enduring mental health criterion will help to ensure that the service is available to those residents who have the greatest need. This is important, especially when capacity is limited.

Type 2 diabetes has been removed from the criteria for Exercise on Referral. Residents living with type 2 diabetes will still be eligible if they meet another of the proposed inclusion criteria. The rationale for this change is to better align the service with the Core20PLUS5 approach.

Residents at risk of developing Type 2 diabetes in CW&C can be referred to the Healthier You NHS Diabetes Prevention Programme, also known as the Healthier You programme. This programme identifies people at risk of developing type 2 diabetes and refers them onto a nine-month, evidence-based lifestyle change programme.

In-line with the Core20PLUS5 approach, cancer prehab and hypertension have been added to the criteria for Exercise on Referral and Adult Weight Management respectively.

Lead officer: Paul Francis (Inclusive Leisure Manager, CW&C Council), Liane Goryl (Strategic Commissioning Programme Manager, CW&C Council), Chris Turner (Communities Director, Brio Leisure)

Stakeholders: CW&C residents, CW&C Council, Brio Leisure, Elected Members, referring Health Professionals, Social Care Professionals, Health and Social Care system

For each of the areas below, an assessment needs to be made on whether the policy has a positive, negative or neutral impact, and brief details of why this decision was made and notes of any mitigation should be included. Where the impact is negative, this needs to be given a high, medium or low assessment. It is important to rate the impact of the policy based on the current situation (i.e. disregarding any actions planned to be carried out in future).

High impact – a significant potential impact, risk of exposure, history of complaints, no mitigating measures in place etc.

Medium impact –some potential impact exists, some mitigating measures are in place, poor evidence

Low impact – almost no relevancy to the process, e.g. an area that is very much legislation led and where the Council has very little discretion

	<b>Neutral</b>	<b>Positive</b>	<b>Negative</b>
Target group / area			
<b>Race and ethnicity</b> (including Gypsies and Travellers, refugees, asylum seekers etc.)	Current provision of services allows all people to access IWB services local to them regardless of their race or ethnicity. People accessing services can do so without racial or ethnic discrimination.		
<b>Disability</b> (as defined by the Equality Act - a physical or mental impairment)	Services are contracted to and must operate an Equality and Diversity Policy which complies	It is recognised that people with restricted mobility find it harder to maintain a healthy weight. Further to	Low Type 2 diabetes has been removed from the criteria

<p>that has a substantial and long-term adverse effect on a person's ability to carry out normal day-to-day activities)</p>	<p>with the requirement of all current equality legislation, and in particular, the Equality Act 2010 and any subsequent amendment of the act and this is stated within Brio contracts</p>	<p>this, weight gain or body fat redistribution are common side effects of many widely used drugs. Often accompanying this weight gain are worsened health risks, including an increased incidence of the metabolic syndrome, type 2 diabetes, and other cardiovascular risk factors.</p> <p>Redefining the physical disability criteria will increase capacity for those residents that meet the proposed criteria</p> <p>Hypertension has been added to the list of inclusion criteria for the Weight Management pathway</p>	<p>for Exercise on Referral so residents living with this health condition will no longer be eligible unless they meet another criteria. This is mitigated in that residents at risk of developing type 2 diabetes in CW&amp;C can be referred to the Healthier You NHS Diabetes Prevention Programme, also known as the Healthier You programme. This programme identifies people at risk of developing type 2 diabetes and refers them onto a nine-month, evidence-based lifestyle change programme.</p>
<p><b>Sex</b> (male or female)</p>	<p>Providers are required to operate within the guidance of The Equality</p>		

	<p>Act 2010 which provides the legislative framework, guidelines for assessments and specifies that all assessments should be specific to individuals and their sex.</p>		
<p><b>Gender identity</b> (gender reassignment)</p>	<p>Brio are required to operate within the guidance of The Equality Act 2010 which provides the legislative framework, guidelines for assessments and specifies that all assessments should be specific to individual which includes gender identity.</p>	<p>Trans people are more at risk of inequalities in health. A study found that trans men were more likely to have a body mass index (BMI) in the obese category when compared to non-trans peers.</p> <p>Trans people have an increased risk of developing an eating disorder. A primary driver of this is likely oppressive social stigma.</p> <p>For one study, researchers surveyed more than 80,000 high school students in Minnesota. They found that transgender and gender nonconforming students were more likely to skip</p>	

		<p>meals than cisgender students. They also consumed soda and fast food more often.</p> <p>During medical transition, studies have found increased BMI and cardiovascular risk, particularly in trans men</p>	
<p><b>Religion and belief</b> (including lack of belief)</p>	<p>Brio services, including the IWB service are open to anyone regardless of their religion and belief.</p> <p>Under the current IWB contract, in relation to religion and belief, all providers are required to operate within the guidance of The Equality Act 2010 which provides the legislative framework, guidelines for assessments and specifies that all</p>		

	assessments should be specific to individual.		
<b>Sexual orientation</b> (including heterosexual, lesbian, gay, bisexual and others)	<p>Then IWB contract requires the provider to operate within the guidance of The Equality Act 2010 which provides the legislative framework, guidelines for assessments and specifies that all assessments should be specific to individual. This includes reference to sexual orientation.</p> <p>Services are accessible regardless of their sexual orientation.</p>	<p>Non-heterosexual people have a higher risk for health and nutrition-related disparities across the life course compared to the heterosexual population.</p> <p>A review on the relationship between minority stress and health found that non-heterosexual people “experience higher rates of physical health problems.”</p> <p>Among them were problems related to heart and immune health, both of which a healthy diet can help support.</p>	
<b>Age</b> (children and young people aged 0 – 24, adults 25 – 50, younger older people 51 – 75/80; older older people 81+. Age bands are for illustration)	Only residents aged 65+ are eligible for the Falls Pathway. This is the target population due to higher rates of falls in		



<p>only as overriding consideration should be given to needs)</p>	<p>this age group. There is no upper age limit.</p> <p>Providers are required to operate within the guidance of The Equality Act 2010 which provides the legislative framework, guidelines for assessments and specifies that all assessments should be specific to individual which includes age.</p>		
<p><b>Care Experienced</b> (all young people and adults who have been in the care of Cheshire West and Chester Council – for a period of 13 weeks or more – from the age of 14 years. This includes those children/young people for whom the Council currently or have previously held corporate parenting responsibilities)</p>	<p>The IWB programme is open to anyone aged 18 and over requiring support including those who are care experienced, provided they meet the referral criteria.</p>		
<p><b>Carers</b> (people who care for others, informally or formally)</p>	<p>The IWB service is open to anyone requiring support including those</p>		

	<p>who care for others, provided they meet the referral criteria.</p> <p>Services are open at varying times and locations to allow for ease of access by people to include those with caring responsibilities.</p>		
<p><b>Rural communities</b></p>			<p>Low.</p> <p>The IWB Service will continue to be delivered from Brio leisure centres, which is no change to the current operating model.</p> <p>In CW&amp;C, the rural locality has the lowest rates of emergency admissions for falls in persons aged 65+, although further work is needed to understand the reasons for this.</p> <p>The highest rates of emergency hospital admissions due to falls occur in urban areas of the</p>

			<p>borough, in particular Northwich and Winsford.</p> <p>We are exploring the potential for Brio to share record level data with the Insight and Intelligence team, so if there were any geographical inequalities in access/take up, the locations for delivery of the service could be explored further following the pilot, to inform future iterations of the service.</p>
<p><b>Areas of deprivation</b> (include any impact on people living in poverty who may not live in areas identified as deprived)</p>		<p>People who live in more deprived areas may be at increased risk of excess weight and inactivity</p>	
<p><b>Human rights</b> (see guidance note for key areas to consider)</p>	<p>It is not felt that there will be any impact upon the human rights of residents</p>		

	<p>The Human Rights Act 1998 underpins the IWB contract and is referenced within the contract documentation and is part of the providers statutory obligations.</p>		
<p><b>Health and wellbeing and Health Inequalities</b> (consider the wider determinants of health such as education, housing, employment, environment, crime and transport, plus impacts on lifestyles and effects on health and care services)</p>		<p>Improved health, – specifically in diet-related diseases such as obesity, diabetes, cancer, heart disease, and tooth decay.</p> <p>Implementing a paid for model enables the capacity for the three pathways to remain as high as possible.</p>	
<p><b>Procurement/partnership</b> (if project due to be carried out by contractors/partners etc, identify steps taken to ensure equality compliance)</p>	<p>Low</p> <p>CW&amp;CC works closely in partnership with Brio Leisure and the IWB Team.</p> <p>We will ensure that this Equality Analysis and any advice/recommendation</p>		

	<p>s are shared with Brio and the IWB Team.</p> <p>The future recommissioning will comply with corporate procurement guidance and processes which includes guidance on equality compliance.</p>		
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**Evidence (see guidance note for details of what to include here):**

**Action plan:**

<b>Actions required</b>	<b>Priority</b>	<b>Outcomes required</b>	<b>Officer responsible</b>	<b>Review date</b>
If approved, paid for model to be communicated to Elected Members and referring Health Professionals	High	Communications to be circulated to Health Professionals	Liane Goryl	01-08-24
Brio to work with referring Health Professionals re: signposting to alternative physical activity options in their local area	High	Signposting to Live Well website and relevant information added onto the Primary Care GENEIO system	Chris Turner	01-09-24

Data and learning from the ten-month pilot will be used to inform future models of the IWB service so that where possible barriers to attendance and participation are removed	High	Explore the sharing of record level data from the IWB service with the Council's Insight and Intelligence Team so that any inequalities in attendance/dropout rates can be monitored	Paul Francis	01-09-24
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<b>Sign off</b>	
Lead officer:	Paul Francis Inclusive Leisure Manager Cheshire West and Chester Council
Approved by Tier 4 Manager:	Paul Hickson Senior Manager, Health and Wellbeing Cheshire West and Chester Council
<b>Moderation and/or Scrutiny</b>	
Date:	
<b>Date analysis to be reviewed based on rating</b> (high impact – review in one year, medium impact - review in two years, low impact in three years)	

**Please forward the completed Equality Analysis to the Equality and Diversity Managers for publishing on the Council's website**