

.Equality Impact Assessment Report	Please enter responses below in the right hand columns
Date to EIA panel, department, DLT or DMT	21 June 2016
Sign-off path for EIA	Corporate EIA Panel
Title of Project, business area, policy/strategy	Commissioning intentions for HIV care and support services in Lambeth, Southwark and Lewisham 2016/17
Author	Adrian Kelly
Job title, division and department	Senior Commissioning Officer Public Health Commissioning Team, Children, Adults and Health
Contact email and telephone	Tel: 07720 829 277 AKelly@lambeth.gov.uk
Strategic Director Sponsor	Helen Charlesworth-May

London Borough of Lambeth Full Equality Impact Assessment Report

Please enter responses below in the right hand columns.

1.0 Introduction

1.1 Business activity aims and intentions

In brief explain the aims of your proposal/project/service, why is it needed? Who is it aimed at? What is the intended outcome? What are the links to the political vision, and outcomes?

The proposed changes are based on the 2012 LSL HIV Care and Support Review undertaken by Lambeth, Southwark and Lewisham PCTs and Councils. The review included extensive stakeholder consultation, including that with service users. This review recommended that mainstream or non-specialist HIV services would be better placed able to offer care and support services to people with living with HIV (PLWH) and that this might be desirable to avoid service duplication and to work towards de-stigmatising HIV as a long term condition. In addition, it would improve access to local services.

The LSL Sexual Health Strategy, 2014-17, committed to delivering on the recommendations of the review. The Lambeth public health commissioning team have led on implementing the Review in stages, consisting of:

- Procuring a new LSL-wide peer support and mentoring service which adopts an evidence-based expert patient model and aligns with the local NHS strategy for long-term medical conditions. The new service was procured in 2015 and is delivered by a partnership of local community and voluntary sector organisations
- Restructure the CASCAID mental health service delivered by South London and Maudsley NHS Trust (SLaM) – this was completed in 2015
- Restructure advice and advocacy, counselling and assessment/signposting services – creating new pathways into non-specialist HIV services in line with the recommendations of the Review. This document outlines the equalities impact of that proposed restructure which would involve reducing the number of HIV specialist services commissioned for people living with HIV (PLWH) from five to two.

The three separate HIV services that would no longer be provided are

- Advice & Advocacy provided by Terrence Higgins Trust. Lambeth residents living with HIV who use this service would access the appropriate borough based mainstream advice and advocacy services, such as Every Pound Counts and via One Lambeth.
- Counselling provided by Terrence Higgins Trust. Lambeth residents living with HIV who wish to access counselling would use Lambeth Talking Therapies Service, which is part of the Improving Access to Psychological Therapies service (IAPT).
- First Point provided by Metro. Signposting to support services will be continued and provided by the specified HIV Peer Support Service. The expectation is that the HIV treatment centres would work with the Metro peer support to undertake the appropriate sign posting and referral of their patients who needed support with their HIV diagnosis, they would encourage use of the peer support programme.

The new pathways to access advice and advocacy, counselling and assessment/signposting services for all PLWH will be alongside the general population of Lambeth, these services already work with PLWH:

Counselling

- IAPT for counselling: IAPT is a counselling service provided by South London and Maudsley. It is for any Lambeth residents regardless of HIV status who is:
 - Feeling down, low or depressed
 - Feeling stressed or anxious
 - Finding it hard to control worrying
 - Anxious in social situations
 - Experiencing low mood or anxiety in pregnancy or the first year after birth
 - Experiencing panic attacks
 - Experiencing flash backs of traumatic events
 - Caught up in excessive washing or checking
 - Experiencing anxiety, stress and low mood linked to a long-term medical condition

People can self-refer online, see their GP who will refer them or self-refer on the telephone.
<https://slam-iapt.nhs.uk/lambeth/welcome-to-lambeth-talking-therapies-service/>

Counselling is provided at multiple sites across the borough which will mean there are more sites at which people can be seen. Being part of the integrated counselling service should facilitate referral into more specialist counselling and mental health support should a service user require it.

Advice and Advocacy

One Lambeth for advice and advocacy: The principal advice offer is through One Lambeth Advice. This is offered over the phone, online or face-to-face. If the advice issue cannot be resolved straight away, an appointment is made with an advice agency for a more in-depth discussion or casework.

Last year there were about 200 unused appointment slots across the network, and these are to deal with advice needs relating to benefits, housing and money/debt. In other cases (e.g. immigration, employment, consumer advice) people will be referred to other local or national organisations by One Lambeth Advice.

Every Pound Counts (EPC) is targeted at the most vulnerable residents and PLWH who meet EPC's criteria, would be able to access this service, otherwise they will access One Lambeth Advice.

Sign Posting

Peer Support service provided by Metro will be the new route for newly diagnosed patients to access support services. Peer support is available to patients at all HIV clinics in Lambeth, Southwark and Lewisham.

The two remaining services will be

- Family Support provided by PPC Metro. This typically complements input from children's social care who are also usually involved, often for child protection concerns. They also provide support to adolescents transitioning to adult services. Currently no alternatives that exist within the borough to meet this group of PLWH's needs.
- Peer Support and Mentoring provided by Metro through a consortium of HIV service providers. It has a strong evidence base of being effective and is recommended by the

British HIV Association (BHIVA) as a support service for PLWH. The new peer service also deliver on key aspects of those services under review, namely assessment and signposting for newly diagnosed people and one to one support via peer mentoring

The drivers for making changes to the HIV care and support services are to improve service effectiveness and better manage the service within a reducing financial envelope. In 2013 BHIVA published revised standards of care to inform and support commissioning of services across the system and provide a benchmark for the quality of care:

“In the three decades since the identification of HIV, progress in treatment and care has been enormous, with substantial improvements in both clinical outcomes and the lives of people living with HIV. Treatment outcomes for people with HIV in the UK are amongst the best in the world, which, despite current financial pressures, must be sustained and enhanced as new structures emerge within an evolving NHS.” Standard 2

“People living with HIV should be enabled to maximise self-management of their physical and mental health, their social and economic well-being, and to optimise peer-support opportunities.” Standard 9

Dealing with HIV must increasingly come into the mainstream. Mainstream services can now better meet the needs of people living with HIV than when the HIV-specific services for counselling and advice & advocacy were set up. The UK HIV stigma index identifies that only 27% of PLWH who participated in this research reported use of HIV-specific services. For London, this is reported as 34% people, they predominantly used services in the in the first year after diagnosis <http://stigmaindexuk.org/reports/2016/London.pdf> (p.9, section 6).

2.0 Analysing your equalities evidence

2.1 Evidence

Protected characteristics and local equality characteristics	Impact analysis For each characteristic please indicate the type of impact (i.e. positive, negative, positive and negative, none, or unknown)
Race	<p>An estimated 107,800 people were living with HIV in the UK in 2013. Along with men who have sex with men (MSM), black Africans are the groups most affected by HIV infection. (LASER 2014)</p> <p>In 2014, 3646 adult residents (aged 15 years and older) in Lambeth received HIV-related care: 3020 (number rounded up to nearest 5) men and 630 (number rounded up to nearest 5) women. Among these, 61.3% were white, 17.6% black African and 5.7% black Caribbean.</p> <p>Health Inequalities and BME Communities Evidence gathered locally during the consultation on the Lambeth, Southwark and Lewisham Sexual Health Strategy Section 3.1 and from research, (e.g. African Health and Sex Survey, 2013-14, Sigma Research, LSHTP, A Review of research Among Black African Communities Affected by HIV in the UK and Europe, Medical Research Council) also indicates that these health inequalities are driving factors including:</p> <ul style="list-style-type: none"> • Late Diagnosis of HIV • Difficulties in accessing services, including HIV testing services • Difficulties in accessing information about HIV and HIV prevention • Deprivation and immigration status • HIV stigma <p>Lambeth Council commissions the Citizens Advice Bureau to provide welfare advice for all residents regardless of HIV status through One Lambeth Advice and recognising that vulnerable groups, such as those with disabilities or long term conditions, who need additional support there is Every Pound Counts. The council is working with the providers to ensure they are prepared for increased use by PLWH and have an awareness particular issues that may be experienced by different ethnic groups in relation to being HIV positive.</p> <p>Equally, NHS funded counselling services are widely available as part of the Government’s IAPT programme. Training on HIV and mental health was provided to the IAPT team in the summer of 2013, by HIV specialists at SLaM, this was followed by enhanced training for “High Intensity” workers over the autumn. HIV specialists at SLaM are currently talking to mainstream mental</p>

	<p>health services, including IAPT to identify current training needs and ensure that people living with HIV are able to access mainstream services that are “HIV competent”. This will include looking at issues around ethnicity and HIV.</p> <p>The peer support programme provided by Metro will provide assessment and signposting for all newly diagnosed people. The peer support and mentoring programme provides people the opportunity to be supported by someone from a similar ethnic background should they wish. There is a specific peer support group for people of African origin.</p> <p>There are neither data, nor any identified reasons to suggest that the closure of these services will disproportionately affect a single group. In fact by mainstreaming services so that PLWH no longer access separate services makes provision more inclusive for service users who would not wish to be known to be accessing an HIV service only.</p> <p>It is anticipated that the IAPT service will be promoted to include targeting PLWH. In addition, plans are for funding IAPT to increase, thereby creating more capacity for counselling. It is thus anticipated that access to local counselling for PLWH will increase as the IAPT service develops.</p> <p>The peer support programme provided by Metro will provide assessment and signposting for all newly diagnosed people. The peer support and mentoring programme provides people the opportunity to be supported by someone of the same gender should they wish.</p> <p>Local advice services have indicated that they are able to provide a service for PLWH in the borough, and that they already have the expertise around the main issues for which PLWH currently access services from THT, namely welfare benefits, debt advice and housing.</p> <p>The impact is thus positive</p>
Gender	<p>In 2014, 3646 adult residents received HIV-related care. With regards to exposure, 68% probably acquired their infection through sex between men and 27.1% through sex between men and women, the majority of the latter being BAME. HIV disproportionately affects men. In 2014-15 two thirds of service users of the THT services and three quarters of First Point were men.</p> <p>Lambeth Council commissions the Citizens Advice Bureau to provide welfare advice for all residents regardless of HIV status through One Lambeth Advice and recognising that vulnerable</p>

	<p>groups, such as those with disabilities or long term conditions, who need specialist additional support there is EPC. The council is working with the providers to ensure they so they are prepared for any increased use by PLWH and have an awareness particular issues that may be experienced by different genders in relation to being HIV positive.</p> <p>Equally, NHS funded counselling services are widely available as part of the Government’s Improve Access to Psychological Therapies (IAPT) programme. Training on HIV and mental health was provided to the IAPT team in the summer of 2013, by HIV specialists at SL&M, this was followed by enhanced training for “High Intensity” workers over the autumn. HIV specialists at SL&M are currently talking to mainstream mental health services, including IAPT to identify current training needs and ensure that PLWH are able to access mainstream services that are “HIV competent”. This will include looking at issues around gender and HIV. It is anticipated that the IAPT service will be promoted to include targeting PLWH. In addition, plans are for funding IAPT to increase, thereby creating more capacity for counselling. It is thus anticipated that access to local counselling for PLWH will increase as the IAPT service develops.</p> <p>The peer support programme provided by Metro will provide assessment and signposting for all newly diagnosed people. The peer support and mentoring programme provides people the opportunity to be supported by someone of the same gender should they wish.</p> <p>Local advice services have indicated that they are able to provide a service for PLWH in the borough, and that they already have the expertise around the main issues for which PLWH currently access services from THT, namely welfare benefits, debt advice and housing.</p> <p>The impact is thus positive</p>
<p>Gender re-assignment</p>	<p>Although there is a lack of evidence the little that is available indicates that trans people experience health inequalities (e.g. Transgender Sexual and Reproductive Health: Unmet Needs and Barriers to Care April 2012 National Center for Transgender Equality), including sexual health inequalities which may include higher rates of HIV, and difficulties accessing services and relevant information. It has been estimated that there are 20 transgender people per 100,000 population, meaning that there are approximately 50-60 transgender people in Lambeth.</p> <p>Service providers are required collect data on gender identify, at present the numbers of service</p>

	<p>users identifying as transgender are very low.</p> <p>The impact is thus unknown</p>
<p>Disability</p>	<p>There is limited data and research available on the needs of people with learning disabilities or physical disabilities.</p> <p>There are approximately 17,000 moderately or severely disabled people of working age in Lambeth and around 33,000 with a common mental disorder. However, the number of people living with HIV who are also disabled and/or have a mental health problem in Lambeth is unknown. Despite the success of anti-HIV treatments which result in people with HIV being able to live long and healthy lives small numbers, especially those diagnosed late, will become ill and may become disabled. Research shows that people living with HIV are more likely to have a mental health problem such as anxiety or depression, compared with the general population i.e. people who do not have a long term condition. (Psychological support services for people living with HIV, National AIDS Trust, 2010).</p> <p>The additional investment in IPAT has the potential to be beneficial for PLWH as these services are integrated into the mental health pathway in the borough. There is stigma associated with HIV therefore this may impact on the ability or willingness of some PLWH to engage with the IAPT service.</p> <p>It is anticipated that the IAPT service will be promoted to include targeting PLWH. In addition, plans are for funding IAPT to increase, thereby creating more capacity for counselling. It is thus anticipated that access to local counselling for PLWH will increase as the IAPT service develops.</p> <p>The peer support programme provided by Metro will provide assessment and signposting for all newly diagnosed people. The peer support and mentoring programme provides people the opportunity to be supported by someone of the same gender should they wish.</p>

	<p>Local advice services have indicated that they are able to provide a service for PLWH in the borough, and that they already have the expertise around the main issues for which PLWH currently access services from THT, namely welfare benefits, debt advice and housing.</p> <p>The impact is thus positive and negative.</p>
<p>Age</p>	<p>The age of the cohort for PLWH is now older, nationally of those people accessing HIV care, just less than half (48%) are aged 45 years or older, and 16% are 55 or older. Within current service provision nearly half the advice and advocacy service users are in the 45-54 age range.</p> <p>Lambeth Council commissions the Citizens Advice Bureau to provide welfare advice for all residents regardless of HIV status through One Lambeth Advice and recognising that vulnerable groups, such as those with disabilities or long term conditions, who need specialist additional support there is EPC. The council is working with the providers to ensure they are prepared for any increased use by PLWH and have an awareness particular issues that may be experienced by different ages groups in relation to being HIV positive. Additionally Age UK Lambeth (AUKL) provides a range of welfare and other services for residents aged 55 plus, Lambeth Council will work with AUKL to ensure that they are HIV aware and welcoming for PLWH.</p> <p>Equally, NHS funded counselling services are widely available as part of the Government's Improve Access to Psychological Therapies (IAPT) programme. Training on HIV and mental health was provided to the IAPT team in the summer of 2013, by HIV specialists at SL&M, this was followed by enhanced training for "High Intensity" workers over the autumn. HIV specialists at SL&M are currently talking to mainstream mental health services, including IAPT to identify current training needs and ensure that PLWH are able to access mainstream services that are "HIV competent". This will include looking at issues around aging and HIV. It is anticipated that the IAPT service will be promoted to include targeting PLWH. In addition, plans are for funding IAPT to increase, thereby creating more capacity for counselling. It is thus anticipated that access to local counselling for PLWH will increase as the IAPT service develops.</p> <p>The peer support programme provided by Metro will provide assessment and signposting for all newly diagnosed people. The peer support and mentoring programme provides people the opportunity to be supported by similar to themselves.</p>

	<p>Local advice services have indicated that they are able to provide a service for PLWH in the borough, and that they already have the expertise around the main issues for which PLWH currently access services from THT, namely welfare benefits, debt advice and housing.</p> <p>The impact is thus positive</p>
<p>Sexual orientation</p>	<p>Of the 3646 adult residents receiving HIV-related care in 2014, 68% probably acquired their infection through sex between men. HIV disproportionately affects gay men. In 2014-15 almost half of thirds of service users of the THT services and First Point were gay men.</p> <p>Lambeth Council commissions the Citizens Advice Bureau to provide welfare advice for all residents regardless of HIV status through One Lambeth Advice and recognising that vulnerable groups, such as those with disabilities or long term conditions, who need specialist additional support there is EPC. The council is working with the providers to ensure they are prepared for any increased use by PLWH and have an awareness particular issues that may be experienced by different ages groups in relation to being HIV positive. Additionally Age UK Lambeth (AUKL) provides a range of welfare and other services for residents aged 55 plus, Lambeth Council will work with AUKL to ensure that they are HIV aware and welcoming for PLWH.</p> <p>Equally, NHS funded counselling services are widely available as part of the Government’s IAPT programme. Training on HIV and mental health was provided to the IAPT team in the summer of 2013, by HIV specialists at SLAM, this was followed by enhanced training for “High Intensity” workers over the autumn. HIV specialists at SLAM are currently talking to mainstream mental health services, including IAPT to identify current training needs and ensure that PLWH are able to access mainstream services that are “HIV competent”. This will include looking at issues around sexual orientation and HIV.</p> <p>It is anticipated that the IAPT service will be promoted to include targeting PLWH. In addition, plans are for funding IAPT to increase, thereby creating more capacity for counselling. It is thus anticipated that access to local counselling for PLWH will increase as the IAPT service develops.</p> <p>The peer support programme provided by Metro will be refocused to support people who may have found out about services through First Point. The peer support programme endeavours to</p>

	<p>provide people the opportunity to be supported by someone of the same sexual orientation should they wish. There is a specific peer support group for gay men.</p> <p>It is anticipated that the IAPT service will be promoted to include targeting PLWH. In addition, plans are for funding IAPT to increase, thereby creating more capacity for counselling. It is thus anticipated that access to local counselling for PLWH will increase as the IAPT service develops.</p> <p>The impact is thus positive</p>
Religion and belief	<p>There is limited evidence on the relationship between religion and belief and HIV. However, evidence gathered locally during the consultation on the Lambeth, Southwark and Lewisham Sexual Health Strategy indicates that:</p> <ul style="list-style-type: none"> • The role faith leaders play is important in relation to delivering work in the sexual health promotion and HIV prevention work in the community • Involving local faith organisations e.g. churches and mosques is important in relation to delivering work in the sexual health promotion and HIV prevention work in the community <p>Service specifications will be explicit in terms of meeting the needs of different religious groups and taking into account of religious beliefs. Awareness work with providers will include gaining an understanding the impact that religion can have on PLWH.</p> <p>The impact is thus unknown</p>
Pregnancy and maternity	<p>The numbers of children born with HIV are reducing due to medical advances. However there are still issues for women living with HIV around childbirth and disclosure.</p> <p>Family Support provided by PPC Metro will be maintained. This typically complements input from children’s social care who are also usually involved, often for child protection concerns. They also provide support to adolescents transitioning to adult services. The service is used predominantly by women.</p>

	<p>This service has been prioritised over the advice and advocacy and counselling services because there are no alternatives that exist within the borough to meet this group of PLWH's needs.</p> <p>The impact is thus positive</p>
Marriage and civil partnership	<p>There is a lack of evidence on the relationship between marriage and civil partnership and HIV. No data is collected in by the providers on marriage and civil partnership and future research e.g. service reviews, can capture information on service use and the characteristic.</p> <p>The impact is thus unknown</p>
Socio-economic factors	<p>There is evidence that some PLWH experience poverty and social hardship - National Aids Trust and Terence Higgins Trust 2010. There is also some evidence that impact of the welfare reforms may have a negative impact on some PLWH - Impact of the Welfare Reforms 2014 Counterpoint Policy Alliance.</p> <p>Lambeth Council commissions the Citizens Advice Bureau to provide welfare advice for all residents regardless of HIV status through "One Lambeth Advice" and recognising that vulnerable groups, such as those with disabilities or long term conditions, who need additional support there is Every Pound Counts. The council will work with the providers to ensure they are prepared for increased use by PLWH. These services specialise in benefits advice and income maximisation. PLWH with therefore have access to specialist services that are part of a local network of advice and advocacy services.</p> <p>Lambeth Council commissions the Citizens Advice Bureau to provide welfare advice for all residents regardless of HIV status through One Lambeth Advice and recognising that vulnerable groups, such as those with disabilities or long term conditions, who need specialist additional support there is EPC. The council is working with the providers to ensure they are prepared for any increased use by PLWH and have an awareness particular issues that may be experienced by different ages groups in relation to being HIV positive. Additionally Age UK Lambeth (AUKL) provides a range of welfare and other services for residents aged 55 plus, Lambeth Council will work with AUKL to ensure that they are HIV aware and welcoming for PLWH.</p> <p>Equally, NHS funded counselling services are widely available as part of the Government's Improve Access to Psychological Therapies (IAPT) programme. Training on HIV and mental health was provided to the IAPT team in the summer of 2013, by HIV specialists at SLaM, this was</p>

	<p>followed by enhanced training for “High Intensity” workers over the autumn. HIV specialists at SLaM are currently talking to mainstream mental health services, including IAPT to identify current training needs and ensure that PLWH are able to access mainstream services that are “HIV competent”. This will include looking at issues around sexual orientation and HIV.</p> <p>It is anticipated that the IAPT service will be promoted to include targeting PLWH. In addition, plans are for funding IAPT to increase, thereby creating more capacity for counselling. It is thus anticipated that access to local counselling for PLWH will increase as the IAPT service develops.</p> <p>The peer support programme provided by Metro will be refocused to support people who may have found out about services through First Point. The peer support programme endeavours to provide people the opportunity to be supported by someone of the same sexual orientation should they wish. In addition, the peer support service will be able to signpost people to access hardship funds.</p> <p>The impact is thus positive</p>
Language	<p>Lambeth is a very ethnically diverse borough, and for many residents English may not be a first language. However, there is a lack of robust evidence on the links between language and HIV.</p> <p>The mainstream service providers in Lambeth are used to working with an ethnically diverse client group. Work will be undertaken to ensure that they are aware where they can access information on HIV in different languages, some service do have staff and volunteers who speak different languages.</p> <p>The peer support programme provided by Metro will be refocused to support people who may have found out about services through First Point. The peer support programme endeavours to provide people the opportunity to be supported by someone of a similar background, this can include languages spoken.</p> <p>The impact is thus positive</p>
Health	<p>PLWH like other people living with long term conditions are likely to experience mental ill-health. (see disability).</p>

	<p>Mainstreaming provision will contribute to the normalisation of HIV, particularly due to multiple co-morbidities now being faced by PLWH and an aging cohort of PLWH needing to use services that are commissioned for older people.</p>
<p>2.2 Gaps in evidence base <i>What gaps in information have you identified from your analysis? In your response please identify areas where more information is required and how you intend to fill in the gaps. If you are unable to fill in the gaps please state this clearly with justification.</i></p>	<p>There are gaps in:</p> <ul style="list-style-type: none"> • Sexual health and transgender • Language • Religion and belief • Marriage and Civil Partnership <p>There is a lack of evidence and research in these areas in relation to sexual health. Transformed services will have the ability to monitor in relation to transgender and language needs. Services are provided to all irrespective of religion and belief and marriage and civil partnership.</p> <p>All services commissioned by LB Lambeth need to comply with equalities legislation, therefore discussions can take place with the relevant commissioners to ensure that they are abiding by their equalities duties.</p>
<p>3.0 Consultation, Involvement and Coproduction</p>	
<p>3.1 Coproduction, involvement and consultation <i>Who are your key stakeholders and how have you consulted, coproduced or involved them? What difference did this make?</i></p>	<p>The key stakeholders are PLWH who live in Lambeth, Southwark or Lewisham (LSL) use the services affect by these changes and the providers of these services - THT, Metro and PPC.</p> <p>Extensive stakeholder and service user consultation was undertaken for the 2012 review to inform the direction of travel for HIV care and support service provision in LSL. Meetings were held with the providers of these services early in the calendar year to give them an indication desire to continue to implement the findings of the 2012 review and the impact the budget savings will have on wider service provision.</p> <p>Consultation with service users was organised with each of the affected provider services. This took the form of drop in sessions and a focus group, additionally service users who were unable to attend an event were invited to complete a questionnaire online or submit a paper copy. In</p>

	<p>addition to copies of the questionnaire were made available to the HIV treatment centres in LSL for their patients.</p> <p>The engagement programme was to inform service users of the current financial context and the proposed changes and gauge an understanding of their use of the current HIV care and support services, their use of mainstream services and what might considerations would need to be in place to enable them to consider using mainstream services. It would give a clear service user 'voice' in any recommendations which are put forward.</p> <p>An additional public consultation encompassing all the proposed strategic changes to public health services was undertaken. This included an online survey, public consultation events and consultation with Local care Networks, GP Networks and Providers. This consultation included a focus on the proposed HIV Care and Support Changes. <i>The results of the online survey with the public were that 48% of respondents supported the proposed changes, 37% opposed the changes and 16% neither opposed nor supported. (To 25th May 2016).</i></p> <p>There has been some feedback to the consultation raising concerns about the quality and ability of the non-HIV services to work with PLWH. These concerns had not previously been raised with the commissioners by HIV advocacy services therefore until now no remedial work or investigation into the issues raised has taken place. Now that they have it is possible for the HIV commissioner to address these issues with the relevant mainstream services commissioners.</p>
<p>3.2 Gaps in coproduction, consultation and involvement <i>What gaps in consultation and involvement and coproduction have you identified (set out any gaps as they relate to specific equality groups)? Please describe where more consultation, involvement and/or coproduction is required and set out how you intend to undertake it. If you do not intend to</i></p>	<p>This engagement programme was time limited and by working with the service providers sought to ensure that reflect the epidemiology of HIV. The responses indicate that African and heterosexual population groups were population were over represented in the responses. The age cohort and gender of respondents was roughly in line with the epidemic. It must be noted that not all respondents responded to the questions about their identity.</p> <p>This engagement was building upon the previous work that was undertaken for the previous review undertaken by the NHS.</p>

<p><i>undertake it, please set out your justification.</i></p>	
<p>4.0 Conclusions, justification and action</p>	
<p>4.1 Conclusions and justification <i>What are the main conclusions of this EIA? What, if any, disproportionate negative or positive equality impacts did you identify at 2.1? On what grounds do you justify them and how will they be mitigated?</i></p>	<p>The overall suite of changes (as set out above) do not involve the removal of any support that will not be available elsewhere or changing processes in any way that is likely to be harmful to any group of residents, regardless of the equalities' group into which they may belong. However, we need to be mindful of any unintended consequences by ending some separate HIV service provision as for some PLWH they may have only used care and support services that were specifically for PLWH.</p> <p>It has highlighted the real and genuine concerns that some PLWH have about using non-HIV specific services. In particular their fear of stigma, discrimination and the confidentiality of the other providers. Therefore work will be undertaken with the HIV service providers to ensure that their staff and service users are informed about the legal and confidentiality frameworks including data protection to which council commissioned care and support services must adhere too. Also work will be undertaken with the mainstream service providers to ensure that they are aware of the concerns some PWLH will have about accessing services that are not familiar with and that staff are suitably trained to be HIV aware. It is proposed to work the Positive People's Network to deliver training and awareness with the range of specialist advice and advocacy providers and to support continued training of IAPT by the CASCAID service.</p> <p>Additionally work will be undertaken with the current providers of services during any transition phase to inform service users and the HIV treatment centres of the new pathways to enable PLWH get the specialist care and support services that are available. Mainstreaming provision will help contribute towards the normalisation of HIV and this reduce stigma.</p>
<p>4.2 Equality Action plan <i>Please list the equality issue/s identified through the evidence and the mitigating action to be taken. Please also detail the date when the action will be taken and the name and job title of the responsible officer.</i></p>	
<p>Equality Issue</p>	<p>Mitigating actions</p>

Unintended consequences	Whatever commissioning decision is taken there will be an expectation that any service providing separate services for PLWH will feedback to the relevant commissioner(s) problems or issues faced by PLWH using mainstream services to enable service improvements to take place.
Gaps in service provision	
5.0 Publishing your results	
The results of your EIA must be published. Once the business activity has been implemented the EIA must be periodically reviewed to ensure your decision/change had the anticipated impact and the actions set out at 4.2 are still appropriate.	
EIA publishing date	
EIA review date	
Assessment sign off (name/job title):	

All completed and signed-off EIAs must be submitted to equalities@lambeth.gov.uk for publication on Lambeth’s website. Where possible, please anonymise your EIAs prior to submission (i.e. please remove any references to an officers’ name, email and phone number).