

Oxfordshire CCG Equality Analysis Template	
Policy / Project / Function:	Commissioning Policy Statement 42e NHS Prescribing of Gluten Free Foods
PMO Reference Number	
Completed by:	Suzanne Bradshaw
Date of Analysis:	11.5.18
Equality Analysis signed off by:	Maggie Dent Date 21.5.2018
Analysis Rating: please highlight	<ul style="list-style-type: none"> • Red • Red/Amber • Amber • Green
Type of Analysis Performed: Please Tick ✓ or Highlight	<ul style="list-style-type: none"> • Business Case • Service re-design • Policy Analysis • Consultation • Meeting • Other
Please list any other policies that are related to or referred to as part of this analysis	Previous version : Commissioning Policy Statement 42d NHS Prescribing of Gluten Free Foods
Who does the policy, project or function affect? Please Tick ✓ or Highlight	<ul style="list-style-type: none"> • Employees - may affect pharmacy staff who will have to relay changes in policy to patients. • Service Users • Applicants • Members of the Public • Other (List Below)

Equality Analysis	
What are the aims and intended effects of this policy, project or function?	Oxfordshire Clinical Commissioning Group produces Commissioning Policy Statements (previously called Lavender Statements) to ensure evidence based and consistent prescribing to Oxfordshire residents. This policy aims to provide a framework for the prescribing of gluten free foods which is in line with national (NICE and Department of Health) and local guidance (Referral Guidelines Coeliac Disease Adults (September 2014)). The policy aims to ensure equitable access to gluten free foods for all patients in Oxfordshire, regardless of age or gender, with diagnosed Coeliac Disease. A gluten free diet is the only treatment for patients with Coeliac Disease and is a lifelong commitment to prevent long term complications.
Is any Equality Data available relating to the use or implementation of this policy, project or function? (See Completion Notes at the end of this document)	Yes – audits carried out in GP practices throughout Oxfordshire, covering usage of gluten free foods including age and gender.
List any Consultation e.g. with employees, service users, Unions or members of the public that has taken place in the development or implementation of this policy, project or function	OCCG NHS Prescriptions for Gluten-free food Consultation Report 2012 for previous version of the policy. Department of Health Public Consultation on Gluten Free Prescribing: Availability of Gluten Free Food on Prescription in Primary Care Both were public consultations – the first in Oxfordshire and the second was throughout England.

Equality Analysis Test:				
What impact will the implementation of this policy, project or function have on employees, service users or other people who share characteristics protected by <i>The Equality Act 2010</i> ?				
Protected Characteristic:	Neutral Impact:	Positive Impact:	Negative Impact (Potential adverse impact) :	Evidence of impact and if applicable, justification where a <i>Genuine Determining Reason</i> exists
Gender (Men and Women)	x			The policy states that patients diagnosed with coeliac disease will be entitled to 8 units of gluten free bread or flour/bread mixes per month regardless of age or gender (page 1).
Race (All Racial Groups)	x			The flour/bread mixes can be used to make bread and cakes for all racial groups and the policy contains a link to Coeliac UK where there are recipes for pitta bread, naan bread, chapattis, flat bread, Mazurek, etc. However, these resources are not available in other languages.
Disability (Mental, Physical, Learning Disability and sensory disability)	x			Gluten free products are prescribable to all patients with diagnosed Coeliac Disease, this is regardless of any disability. Audits have shown gluten free prescribing where appropriate to patients with disabilities.
Religion or Belief	x			Mainstream Christianity claims no dietary laws to speak of, whereas Judaism has numerous and rigorous dietary laws. In

				<p>Hinduism, food is one of the principal indices of social status, as food observances help to define caste ranking. Islamic dietary laws, on the other hand, bond the community of faithful in one whole, and in their rigor they lie somewhere in between Judaism and Christianity.</p> <p><i>Introduction to Dietary Laws in Islam 1 of 6 www.NewMuslims.com</i></p> <p>Grains are permitted in all religions so gluten free bread and flour/bread mixes are suitable for all religious groups.</p>
<p>Sexual Orientation (Heterosexual, Homosexual and Bisexual)</p>	x			<p>Gluten free products are prescribable to all patients with diagnosed Coeliac Disease; this is regardless of sexual orientation.</p>
<p>Pregnancy and Maternity</p>	x			<p>Gluten free products are prescribable to all patients with diagnosed Coeliac Disease; this is regardless of whether the patient is pregnant. Audits have shown gluten free prescribing where appropriate to patients who are pregnant.</p>
<p>Marital Status (Married and Civil Partnerships)</p>	x			<p>Gluten free products are prescribable to all patients with diagnosed Coeliac Disease, this is regardless of marital status.</p>
<p>Gender re-assignment A person proposing to undergo, is undergoing or has undergone a process (or part of a process) for the purpose of reassigning the</p>	x			<p>Gluten free products are prescribable to all patients with diagnosed Coeliac Disease, this is regardless of gender assignment.</p>

person's sex by changing physiological or other attributes of sex. A reference to a transsexual person is a person who has the protected characteristic of gender identity.				
Age (People of all ages)	x			The policy states that patients diagnosed with coeliac disease will be entitled to 8 units of gluten free bread or flour/bread mixes per month regardless of age or gender (page 1).
Other groups nominated by OCCG which could experience inequality of access or treatment, such as carers, veterans, homeless people and people living in socio-economic areas of deprivation in Oxfordshire.			x	Gluten free products are prescribable to all patients with diagnosed Coeliac Disease; all patients registered with a GP in Oxfordshire are entitled to prescriptions as long as they have a confirmed diagnosis of Coeliac Disease. For patients not registered with a GP, they can access GP services through walk in centres such as Banbury Medical Practice and Luther Street Medical Centre whose resources are available to the homeless and vulnerably housed. Substitute products available in supermarkets are generally more expensive than carbohydrate staples that contain gluten. Ongoing feedback from clinicians will be sought to measure the impact of this (page 2 of the policy).

<p>Sustainability:</p> <ul style="list-style-type: none"> • Economic, Social and Environmental considerations in the design, procurement and commissioning of services for the people of Oxfordshire. • Delivery of an affordable healthcare service for improving population wellbeing and reducing health inequalities. • Have sustainable models of health care been considered? 	<p>x</p>			<p>Prior to 2012, a much wider range of gluten free foods were available on prescription to patients with diagnosed Coeliac Disease. A decision was taken after the Public Consultation to limit this to bread and flour/bread mixes. The mixes can be used to make a wide range of food types containing flour. Since 2012 there has been a large increase in gluten free products available in supermarkets and the cost of these items is more competitive with gluten containing equivalents. With the increased availability of gluten free foods in supermarkets, patients with diagnosed Coeliac Disease are less disadvantaged with accessing gluten free staples.</p> <p>OCCG aims to deliver high quality care and improved public health with efficient use of resources. By supplying gluten free bread and flour/bread mixes (which can be used to make a wide range of dishes), OCCG is contributing to the prevention of long term complications for Coeliac patients and making good use of limited resources in a sustainable manner.</p>
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Action Planning:

As a result of performing this analysis, what actions are proposed to remove or reduce any risks of adverse outcomes identified on employees, service users or other people who share characteristics protected by *The Equality Act 2010*?

Identified Risk:	Recommended Actions:	Responsible Lead:	Completion Date:	Review Date:
People on low income	Ongoing feedback from clinicians will be sought to measure the impact of this (page 2 of the policy).	Suzanne Bradshaw	31.8.18	31.8.18

Cut and paste this table if required.

Completion Notes

<p>Analysis Ratings:</p>	<p>After completing this document, rate the overall analysis as follows:</p> <ul style="list-style-type: none"> • Red: Risk of discrimination exists (direct, indirect, unintentional or otherwise) to one or more of the 9 <i>Protected Characteristics groups</i>. It is recommended that the use of the activity or policy be suspended until further work or analysis is performed. • Red Amber: Risk of discrimination exists (direct, indirect, unintentional or otherwise) to one or more of the 9 <i>Protected Characteristics groups</i>. However, a genuine determining reason may exist that could legitimise or justify the use of this activity or policy and further professional advice should be taken. • Amber: Risk of discrimination (as described above) exists and this risk may be removed or reduced by implementing the actions detailed within the <i>Action Planning</i> section of this document. • Green: The policy or activity does not appear to have any adverse effects on 9 <i>Protected Characteristics groups</i> and no further actions are recommended at this stage.
<p>Equality Data:</p>	<p>Equality data is internal or external information that may indicate how the activity or policy being analysed can affect different groups of people who share the nine <i>Protected Characteristics</i> – referred to hereafter as '<i>Equality Groups</i>'. Examples of Equality Data include: (this list is not definitive)</p> <ol style="list-style-type: none"> 1. Application success rates by <i>Equality Groups</i> 2. Complaints by <i>Equality Groups</i> 3. Service usage and withdrawal of services by <i>Equality Groups</i> 4. Grievances or decisions upheld and dismissed by <i>Equality Groups</i> 5. Demographic data for <i>Equality Groups</i> 6. Health Intelligence for <i>Equality Groups</i>
<p>Legal Status:</p>	<p>This document is designed to assist organisations in "<i>Identifying and eliminating unlawful Discrimination, Harassment and Victimisation</i>" as required by <i>The Equality Act Public Sector Duty 2011</i>. An Equality Impact Analysis is not, in itself, legally binding and should not be used as a substitute for legal or other professional advice.</p>

Genuine Determining Reason	<p>Certain discrimination may be capable of being justified on the grounds that:</p> <ul style="list-style-type: none"> • <i>A genuine determining reason exists</i> • <i>The action is proportionate to the legitimate aims of the organisation</i> • Where this is identified, it is recommended that professional and legal advice is sought prior to completing an Equality Impact Analysis.
Sustainability	<p>Sustainable development is about balancing social, economic and environmental considerations, meeting the needs of people now and in the future.</p> <p>OCCG Sustainability Strategy and Management Plan: http://www.oxfordshireccg.nhs.uk/wp-content/uploads/2015/09/Paper-15.84-Sustainability-Strategy-and-Management-Plan.pdf</p> <p>Sustainable Health Care – sustainable models based on prevention and efficiency; and targeted so that services are appropriate for the diverse population, and are used effectively and efficiently.</p> <p>A sustainable health and care system is achieved by delivering high quality care and improved public health without exhausting natural resources or causing severe ecological damage. Sustainable Health and Care Sector – efficient use of resources e.g. energy, clinical waste, use of medication etc.</p>

Once completed please send a copy of the Equality Analysis and the Policy/Activity to Maggie Dent, Equality and Access Manager, Governance team (Rachel Jeacock), and also to Sean Beeken (PMO) if it is for a Business Case.

For more information contact members of the Equality and Diversity Working Group:

1. **Delivery & Localities:** Maggie Dent, Equality and Access Manager and Chris Walkling, Senior Commissioning Manager
2. **Quality:** Cat D'Angelo, Safeguarding Support Officer
3. **Finance/PMO:** Sean Beeken
4. **Governance:** Rachel Jeacock, Governance Manager
5. **Communications team SCWCSU:** Sara Price, Senior Communications & Engagement Account Manager