

Full equalities impact assessment

Directorate: **Public Health** Service: **Local Area Agreement (LAA) Target NI 150**

Piece of work being assessed: **▪ LAA on Mental Health and Employment (NI 150) – this LAA aims to increase the percentage of adults (18-69) receiving secondary mental health services in paid employment at the time of their most recent assessment, formal review or other multi-disciplinary care planning meeting ¹ by 1.5% on baseline by 2010/11.**

Aims of this piece of work: **To assess the employment status of users of secondary mental health services with respect to the 6 equalities strands to inform the delivery of this new LAA for Sheffield.²³**

Name of lead person: **Sheila Paul, CPH, NHS Sheffield** Other partners/stakeholders involved: **Jason Rowlands, SHSCFT
Diana Clegg, NHS Sheffield
Gary McCulloch, NHS Sheffield
Sheila Paul, NHS Sheffield**

Date of assessment: **27/4/09**

Who is intended to benefit from this piece of work? **Adult users of secondary mental health services (target group for the LAA), employment services working to support mental health service users into paid employment, the Employment Multiagency Group leading delivery of this LAA. This EIA has been undertaken on behalf of the Employment Multiagency Group (EMAG) for Sheffield First for Health and Wellbeing Performance Monitoring Group.**

¹ Target group - Adults receiving secondary mental health services: Those aged 18 to 69 who are receiving secondary mental health services and who are on the Care Programme Approach. This includes clients who have at least one open episode containing two or more events (any service, any type of event).

² Data shown presents a snapshot of the employment status of service users gathered in April 2009 and supplied by Sheffield Health and Social Care Foundation Trust April 2009.

³ Approach – This EIA utilises local data to assess against the 6 equalities strands. Data on other users of secondary mental health services not on the Care Programme Approach (CPA) is used as a comparator, as appropriate.

Single Equality Scheme strand	Baseline data and research on the population that this piece of work will affect What is available? What does it show? Are there any gaps? Use both quantitative and qualitative research and user data Include consultation with users if available	Is there likely to be a differential impact? Yes or no
Gender	<p>Clients on CPA have lower levels of employment compared to other users of secondary mental health services (7.2% in employment compared to 27.1% among users of secondary mental health services non on CPA).</p> <p>For clients on CPA with employment status recorded, a higher proportion of women than men were in paid employment, with rates of 9.8% and 5.3% respectively – women in this group were nearly twice as likely to be in paid employment (Odds Ratio 1.9, 95%CI 1.3 to 3.0).</p> <p>It must be noted, however, that there is a high level of missing data, and that employment status was not available for 9.0% of all people on CPA.</p> <p>Different rates of employment by gender are also seen among other users of secondary mental health services (not on CPA), with a higher proportion of women than men were in employment (31.9% and 22.3% respectively).</p>	Yes Indicates relatively low levels of paid employment among men compared to women on CPA.
Race	<p>BME groups make up 20.5% of clients aged 18 to 69 years on CPA where ethnicity was recorded. At the time of the 2001 UK census, the racial composition of Sheffield's population was 91.2% White, 4.6% Asian, 1.8% Black, and 1.6% Mixed. Among clients on CPA with employment status recorded, 7.7% of people recoding their ethnicity as White/White British/White Irish and 5.6% of BME groups were in employment. This difference was not statistically significant.</p> <p>This picture differs from the population of service users not on CPA, the data show that BME groups as a whole were half as likely to be in employment compared to White groups (Odds ratio 0.5, 95%CI 0.4 to 0.6).</p> <p>It is noted that these rates are based on small numbers and so it is not possible to compare employment rates across individual ethnic groups. There is a high level of</p>	No

	missing data on employment status by ethnic group (8.7% among the White ethnic group and 9.5% among BME groups as a whole).	
Disability	<p>Disability is not routinely recorded by secondary mental health services at SHSCFT. Unable to establish quantitative differences in employment status among disabled and non-disabled users of secondary mental health services.</p> <p>It is noted that two thirds of the Sheffield population are of working age (16 to 64). 8% are in receipt of Incapacity Benefit (27,000). Of these 35% have a mental health condition.</p>	Unknown - unable to establish from routine data
Sexual orientation	Sexual orientation is not routinely recorded by secondary mental health services at SHSCFT. Unable to establish quantitative differences in employment status by sexual orientation among users of secondary mental health services.	Unknown - unable to establish from routine data
Age	There are differences in the proportion of people on CPA and in employment by agegroup. The highest level of employment is in the 20-29 year ageband and the lowest in 18-19 year olds and the 60-69 year ageband (please see graph). This pattern reflects that of other users of secondary mental health service users in employment (range 9.3% in 18-19 year olds to 32.2% in employment among 30-39 year old users of secondary mental health services not on CPA). These rates are based on small numbers, which may affect the reliability of estimates of employment status by ageband.	Yes Indicates relatively low levels of paid employment among 18-19 yr olds and 40 year olds+ on CPA

	<p style="text-align: center;">Proportion of people on CPA and in paid employment</p>  <p>It is noted that data by ageband was missing for 9.0% of clients on CPA.</p>	
<p>Religion/belief</p>	<p>The data indicate differences in levels of employment among the target group by religion. The proportion of clients in the target group in employment ranged from 0% among Hindu, Jehovah's Witness and Methodist and Pentecostal religion to 33% among clients of Jewish faith.</p> <p>These rates are again based on small numbers with a high level of missing data (9%), and so it is not possible to compare employment rates by individual religion/belief group. Small numbers may affect the reliability of estimates of employment status by religion/belief.</p>	<p>Unable to establish due to small numbers.</p>
<p>Human Rights</p>	<p>Will this piece of work impact on anyone's human rights? This LAA (NI150) aims to reduce social exclusion by increasing access to</p>	<p>No</p>

	<p>employment and employment opportunities for a key vulnerable group that have relatively high rates of unemployment compared to the general population⁴, specifically people in contact with secondary mental health services and on the Care Programme Approach.</p>	
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Equalities Impact Assessment Action Plan

Strand	Issue	Action required	How will you measure the impact/outcome?	Timescale	Lead
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⁴ 1.3% of the Sheffield population claimed Job Seekers Allowance in April 2008. Directly comparable data are not available, however, we know that in April 2009, 55.6% of clients on CPA were unemployed)

<p>Gender</p>	<p>Data indicate a relatively high proportion of women on CPA in paid employment compared to men on CPA.</p> <p>9% missing data on employment status by gender</p>	<p>Mapping of supported employment provision should include review of supported employment programmes targeted at men so that gaps can be identified and action plan developed.</p> <p>Ongoing monitoring of participation in supported employment programmes by gender.</p> <p>Improve data completeness on employment status</p>	<p>Mapping of supported employment provision completed.</p> <p>Ongoing data monitoring within SHSCT and reporting to EMAG</p>	<p>Q2 2009/10</p> <p>Next cut of data due 09/09</p>	<p>Eve Waite (EMAG)</p> <p>Jason Rowlands, SHSCT; Diana Clegg, NHS Sheffield</p>
<p>Race</p>	<p>EIA indicates a high level of missing data on employment status by ethnic group (8.7% among the White ethnic group and 9.5% among BME groups as a whole).</p>	<p>Improve data completeness on employment status in all ethnic groups</p>	<p>Research in this area is required in order to establish good practice in supporting different ethnic groups in contact with secondary mental health services into employment, including consultation with local groups and providers of employment support.</p> <p>Employment status</p>	<p>Sep 2009</p>	<p>EMAG</p>

			<p>recording similar in White groups as a whole and BME group as a whole.</p> <p>Ongoing data monitoring within SHSCT and reporting to EMAG</p>	Next cut of data due 09/09	Jason Rowlands, SHSCFT; Diana Clegg, NHS Sheffield
Disability	Unable to establish whether there are any differences in employment status among people on CPA by disabled status.	<p>Explore potential for collecting data on disability in Diversity Plans.</p> <p>Data on participation levels in supported employment programmes by disabled status needs to be identified.</p>	Data on disability collected routinely among clients on CPA and high level of data completeness.	May 2010	Jason Rowlands, SHSCFT EMAG
Sexual orientation	Unable to establish whether there are any differences in employment status among clients on CPA by sexual orientation as evidence not routinely collected by secondary mental health services.	Explore potential for collecting data on sexual orientation in Diversity Plans.	Data on sexual orientation collected routinely among clients on CPA and high level of data completeness.	May 2010	Jason Rowlands, SHSCFT
Age	Indicates relatively low levels of paid employment among 18-19 yr olds and 40 year olds+ on CPA	Consider establishing age appropriate employment support for target group.	Increased level of employment among 18 to 19 year olds and 40+ agegroups.	April 2011	EMAG
Religion/belief	Sensitivity to Faith and any relevant implications for employment for individuals.	Ensure Faith is taken into account as part of vocational assessments.	As per Action Plan	April 2011	EMAG