

Equality Impact Assessment (EqIA) – myDorset Care Record (myDCR)

Initial Information

Name:	Jodie Crowfoot
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Members of the assessment team:	Dorset Care Record Programme Management Office Dorset Care Record Working Group My DCR Working Group Dorset Care Record Programme Board My DCR Programme Board Dorset Care Record CCIO Group Pan Dorset Information Governance Group Public Health Dorset Dorset Public Engagement Group Dorset Digital Engagement Group Outpatients Transformation Group Building Health Partnerships Partner Equality and Diversity Leads Partner Business Intelligence and Insight Services Dorset Race Equality Group Homelessness (Dorset CCG) Dorset wide Maternity Services (Better Births Programme) Maternity Voices Dorset Cancer Partnership People First Dorset Dorset Advocacy HealthWatch Dorset NHS Digital Third sector/Charities
Date assessment started:	1 August 2019
Date of completion:	3 March 2020
Date of review	12.11.20 23.06.2021
Version Number:	Version 2.2

Part 1: Background Information

Is this (please tick or expand the box to explain)

Existing	X
Changing, updating or revision	
New or proposed	
Other	

Is this (please tick or expand the box to explain)

Internal (employees only)	
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External (residents, communities, partners)	
Both of the above	x

What is the name of your policy, strategy, project or service being assessed?

Dorset Care Record – myDCR

What is the policy, strategy, project or service designed to do? (include the aims, purpose and intended outcomes of the policy)

What is the Dorset Care Record?

Health and Social Care organisations in Dorset hold different sets of records about individuals. Information in different records may be duplicated or incomplete. The Dorset Care Record is a new confidential system that will join up different records to create a more comprehensive and up to date record. Over time this will help improve the care patients receive.

The Dorset Care Record (DCR) will provide improved information sharing and therefore improved health outcomes for all population groups. The DCR clinical portal has been 'live' since February 2018 and basic personal data (name, address, date of birth, GP etc) is currently supplied by GP surgeries, the Dorset acute hospitals (Dorset County Hospital (DCH) and University Hospitals Dorset (UHD), Dorset Council and Bournemouth, Christchurch and Poole Council (Adult Services).

The Dorset Care Record partner organisations are: -

- Dorset Council
- Bournemouth, Christchurch and Poole Council
- University Hospitals Dorset
- Dorset County Hospital
- Dorset Health Care
- Dorset Clinical Commissioning Group (CCG) – representing GPs

The key drivers for sharing information are to:

- Enable citizens to improve their experience of care
- Provide a key to supporting integrated community services
- Reduce the risk for networked acute and unplanned care
- Improve safety and care through better decision making
- Less time repeating basic information by the citizen
- Better continuity of care for the citizen
- Better experience and outcomes for citizens
- Information is secure and shared appropriately

The citizen will be able to access their own record online and, for some cases, they can add content and collaborate with their care professionals in health and social care.

The benefits to trained staff will be: -

- Less time contacting other organisations/agencies for information
- Less time responding to queries from other organisations for information
- Quicker access to better information
- Access anywhere on a range of devices, once training has been completed

The Equality Impact Assessment for the Dorset Care Record – clinical portal (the original starting point for the DCR) can be found [here](#).

What is myDCR

myDCR is a system that will enable a citizen to access their own health and social care records. A health or social care practitioner will be able to invite a citizen to set up an account to view their own records such as appointments, medicines and letters.

MyDCR is currently in development and is undergoing technical testing. Following successful technical testing it will undergo user experience testing during winter 2020/21. It is anticipated that the first users will be able to access the live system by the Autumn of 2021.

myDCR will be accessible by individuals to enable more interaction and involvement in their health and care. Initially, this access will be limited to specific groups of Dorset citizens receiving health and care support in specialised areas, these will be known as pathways. Ultimately access will be available in some form to all Dorset residents.

What is the background or context to the proposal?

NHS Digital are actively promoting the use of universally available electronic personal health records (PHR). These will provide individuals with a lifelong resource of health information to help make health and care decisions. The information in the PHR is generated by health and social care providers and the individual.

A personal health record (PHR) can be defined as follows:

- it's secure, usable and online
- it's managed by the person who the record refers to and they can add information to their PHR
- it stores information about that person's health, care and wellbeing
- health and care sources can add information to the PHR

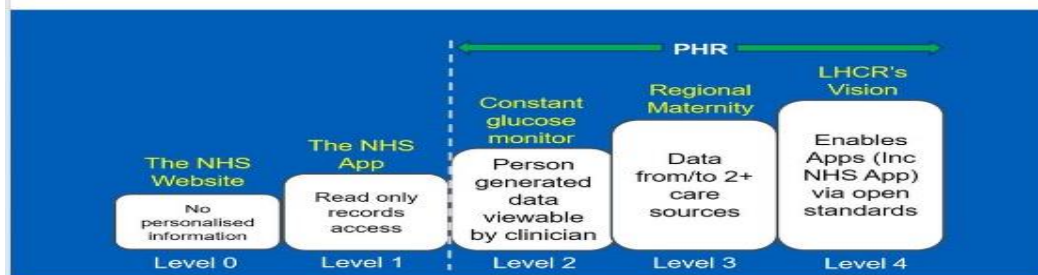
PHRs are sometimes called other things, like patient portals. They are PHRs if they meet this PHR definition.

As captured in the NHS Long Term Plan – practical priorities to drive NHS Digital transformation 'Protect patients' privacy and give them control over their medical record'. www.digital.nhs.uk/phrtoolkit

The ambition of 'Our Dorset' (Local NHS and councils working together) is for everyone to have the best possible health and care outcomes. By working together, we will be creating quality access to sustainable health and care services for people to have healthier, longer, fulfilling lives.

myDCR and pathways will provide Dorset residents with more choice and control about their care and how it is delivered. In addition, this work will enable improved access to services and their records.

PHR Maturity Model – Where are you?



Maturity levels

Level 0 example

The NHS website, which offers no personalised information.

Level 1 example

The NHS App, which offers read-only records access.

Level 2 example

A PHR that helps to manage a constant glucose monitor, where data generated by a person can be viewed by a clinician.

Level 3 example

A PHR that helps to manage regional maternity, where data comes to and from two or more care sources.

Level 4 example

A PHR that fits the Local Health Care Record (LHCR) vision, which enables apps including the NHS App via open standards.

Very few will need full access to the information held in the record. They will be built to show relevant information based on the needs of those using the system.

Not all systems will need both to add to and read from medical records, to meet their user's needs. Systems should not all be pushed down this route.

In time we will expect to see the DCR in Level 4 category.

We will be collaborating on a subset of clinical information from the main DCR Clinical portal plus specific/personal information provided by the citizen/patient to empower and self-manage to improve care outcomes.

The 'as is' is that there are no services currently available whereby the citizen can easily, safely and securely collaborate with clinicians in respect of their healthcare.

The 'to be' will be accessible via a secure portal. Citizens will belong to specialty cohorts and will be invited to join healthcare pathways following a discussion with their lead clinician. Citizens can decline to participate/join a pathway. They can also share/delegate some aspects to members of their circle of care.

The term "circle of care" is a term commonly used to describe the ability of certain health information custodians to assume an individual's implied consent to collect, use or disclose personal health information for the purpose of providing health care.

A lead clinician may choose not to invite some individuals to a pathway if they feel it may compromise their well-being (perhaps linked to safeguarding individuals potentially at harm) or they may not have capacity to safely interact and use the online services. We therefore look to introduce this in a carefully managed way and adjust where necessary.

These developments will also have benefits for clinicians, as patients will be supported on a self-management pathway, freeing up clinical capacity to see new patients and those with the most complex needs.

'Our Dorset' is one of the first ICS (Integrated Care Systems) and a key remit is the development of accessible services, individual choice, control and personalised pathways, across the County.

Part 2: Gathering information

What sources of data, information, evidence and research was used to inform you about the people your proposal will have an impact on?

Listed below are the sources of data/information the DCR has used to evidence and research the impact of the DCR Citizen Portal on the residents of Dorset.

- Digital Inclusion in Dorset produced by Citizens On-Line in April 2019 – this document provides a comprehensive overview of digital inclusion issues within Dorset and identifies opportunities to improve them.
<https://dorsetcc.sharepoint.com/sites/CmBDC/Digital%20Council%20Documents/Digital%20Skills/DorsetSwitchFindsRecsFinal.pdf>
- Local Digital Declaration – this is a central government initiative that Dorset Council and Bournemouth, Christchurch and Poole Councils have fully supported. It shows a commitment to use the power of digital technology to improve services, benefitting people and communities.
<https://dorsetcc.sharepoint.com/sites/CmBDC/SitePages/Local%20Digital%20Declaration.aspx>
- The state of Dorset 2019 – for general population, deprivation, health and well-being and economic information in Dorset.
<https://apps.geowessex.com/insights/Reports>
- Hidden Dorset II report (2018) produced by Dorset Community Foundation – provides information about areas of deprivation in Dorset.
<https://www.dorsetcommunityfoundation.org/wp-content/uploads/2018/09/FullHiddenDorsetReport.pdf>
- NHS England research about health inequalities (2018)
<https://www.england.nhs.uk/ltphimenu/definitions-for-health-inequalities/#health-inequalities>
- Dorset Digital Champions – Dorset has approx 70 champions who assist Dorset residents 'get online'. Around 21% of Dorset residents are not confident using the internet. <https://www.dorsetcouncil.gov.uk/business-consumers-licences/superfast-dorset/getting-online.aspx>
- The Digital infrastructure Strategy for Dorset (2015) sets out the vision and approach to transform Dorset into a digital economy community
<https://www.dorsetcouncil.gov.uk/business-consumers-licences/superfast-dorset/superfast-pdfs/digital-infrastructure-strategy-for-dorset.pdf>
- The NHS long term plan sets out the vision to ensure the NHS is fit for the future across all services. <https://www.longtermplan.nhs.uk/>
- The Accessible Information Standards (1 August 2016) sets out clear guidelines for health and social care to ensure the communication and support needs are met for all patients with a disability, impairment or sensory loss accessing services has the appropriate. <https://www.england.nhs.uk/ourwork/accessibleinfo/>
- The Office of National Statistics – Internet users 2019.
<https://www.ons.gov.uk/businessindustryandtrade/itandinternetindustry/bulletins/internetusers/2019>

What did this data, information, evidence and research tell you?

The research identified the following: -

- Access to improved broadband to a wider population in Dorset across all age groups.
- An identified lack of access to digital services in some groups restricts access to services e.g. in places where superfast broadband is not available
- NHS England aspire to encourage and make the best use of digital platforms to assist in providing the best services to residents

Is further information needed to help inform this proposal?

Currently myDCR is still in development and therefore it is not clear what additional information will be needed and the impacts on the protected characteristics. This EqIA will be reviewed following the user testing.

Part 3: Engagement and Consultation

What engagement or consultation has taken place as part of this proposal?

Consultation with the stakeholders listed on the first section of this document has taken place from the inception of the DCR and continues to be an integral part of the work moving the DCR forward.

Two of the main stakeholder groups for the DCR are the Dorset CCG Public Engagement Group (PEG) and the Patient Participation Group (PPG). The message from these groups was very clear at the original citizen portal and pathways workshop held in January 2019 – they want as much control and access to their health and care records as they can reasonably have. They consider that the better-informed Dorset residents are, the better the outcomes.

In the first instance a workshop led by the DCR's suppliers Orion Health, demonstrated the potential functionality of the system, which will enable people across the county to log on to their own record.

Further engagement, communications and workshops will take place as the citizen portal is developed.

INTEREST GROUP	TYPE OF ENGAGEMENT	DATES	ANY FEEDBACK
Dorset Care Record Programme Board	Regular monthly meetings – to discuss all aspects of the programme	Every month	Notes of meeting and agreed actions are available from the Project Management Office
Dorset Care Record Working Group	Regular weekly meetings – to discuss all aspects of the programme	Every week	Notes of meeting and agreed actions are available from the Project Management Office
myDCR Working Group	Regular weekly meetings to discuss all aspects of the citizen portal	Weekly	Notes of meeting and agreed actions are available from

			the Project Management Office
myDCR Project Board	Regular monthly meetings – to discuss all aspects of the citizen portal	Monthly meeting	Notes of meeting and agreed actions are available from the Project Management Office
Dorset Care Record CCIO (Chief Clinical Information Officers) group	Regular monthly meetings – to discuss and agree all relevant aspects of the programme	Every month	Notes of meeting and agreed actions are available from the Project Management Office
Pan Dorset Information Governance Group	Meets 4 times per year – to discuss information governance and data protection aspects of the programme – currently this group is not operational but still consulted via emails and smaller group team meetings where necessary	Quarterly	Notes of the meetings are held by the DCR Privacy Officer
Dorset Digital Engagement Group	Regular updates on engaging with public on use digital technology	Monthly	
Dorset Public Engagement Group	Patient Engagement Groups are invited to attend any relevant workshops to offer their opinion and raise questions. Regular updates sent out from the communications manager	Monthly – comm and engagement dashboard which provides updates on any events, social media and developments	
Building Health Partnerships	Cross section of public, private and third sector organisations – supporting my DCR with testing and encouraging digital access	Monthly	
Outpatients Transformation Group	Clinicians who will be supporting on boarding of users – regular updates sent	As and when	
Public Health Dorset	Invited to events and meetings	As and when	

Dorset Race Equality Council	Contact with the gypsy and traveller community has been via the Dorset Race Equality Council	Attendance at the meetings – most recent November 2020	
LGBTQ + groups in Dorset	These groups have been made aware of the Dorset Care Record. They receive regular updates on progress electronically	As and when	So far, they only want 'light touch' updates
Dorset wide Maternity Services (Better Births Programme) and maternity voices	Invited and attended workshops whilst the maternity pathway was in development. The maternity pathway in DCR is no longer progressing but regular contact is still maintained with the midwives	Regular communication continues between DCR project manager and the midwives	
Dorset Cancer Partnership	Actively involved in the development of the cancer follow up pathway	Regular communication with the cancer project manager	
People First Dorset	Invited to events and in receipt of updates from the communications manager in an electronic format. DCR speakers attend their events and meetings in 2019. People First Dorset produce videos and leaflets on behalf of DCR	As and when required	
Dorset Advocacy	Invited to events and in receipt of updates from the communications manager in an electronic format.		
Healthwatch Dorset	Invited to events and in receipt of updates from the communications manager in an electronic format.	Regular updates sent electronically.	Regularly comment on DCR progress

	Our Communication Manager was a speaker at their annual meeting 2019		
Third Sector/Charities/Parish Councils	Invited to events and in receipt of updates from the communications manager in an electronic format. Staff from the Project Management Office attend open days and presentations when requested.	Regular written updates	
Dorset Prisons	Engagement with this group has only started recently. A letter has been sent to each Governor offering to visit and provide information	At an early stage	
Our Dorset Comms Network	Written and oral updates	Monthly	Comments on DCR progress and implementation
PEG	Updated briefing for Stephen Slough went to all members	June 2021	
MyDCR video tender	Tender circulated to bid for the myDCR video	June 2021	
MyDCR Branding/logo	Created with the help of key stakeholders	January 2021	
myDCR leaflet/poster	Created with the help of key stakeholders	March 2021	

How will the outcome of consultation be fed back to those who you consulted with?

All outcomes of consultations or updates to the Dorset Care Record are fed back to partners and stakeholders with an expectation that they will cascade within their groups/organisations.

In addition, regular updates and information about new releases in the Dorset Care Record are added to the news feed on the DCR website, DCR staff website as well as on DCR social media (twitter page currently has just less than 1100 followers).

DCR website - <https://news.dorsetcouncil.gov.uk/dorset-care-record/>

The Dorset Care Record communications officer attends a variety of open days, conferences, seminars, patient groups, charitable organisations, specialist groups to

provide information and updates about all aspects of the Dorset Care Record including assurance of continued security of data.

Please refer to the Equality Impact Assessment Guidance before completing this section.

Not every proposal will require an EqlA. If you decide that your proposal does **not** require an EqlA, it is important to show that you have given this adequate consideration. The data and research that you have used to inform you about the people who will be affected by the policy should enable you to make this decision and whether you need to continue with the EqlA.

Please tick the appropriate option:

An EqlA is required (please continue to Part 4 of this document)	x
An EqlA is not required (please complete the box below)	

This policy, strategy, project or service does not require an EqlA because:

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Name:

Job Title:

Date:

Please send a copy of this document to [Diversity & Inclusion Officer](#)

Next Steps:

- The EqlA will be reviewed by Business Intelligence & Communications and if in agreement, your EqlA will be signed off.
- If not, we will get in touch to chat further about the EqlA, to get a better understanding.

Part 4: Analysing the impact

Who does the service, strategy, policy, project or change impact?

- If your strategy, policy, project or service contains options you may wish to consider providing an assessment for each option. Please cut and paste the template accordingly.

For each protected characteristic please choose from the following options:

- Please note in some cases more than one impact may apply – in this case please state all relevant options and explain in the ‘Please provide details’ box.

Positive Impact	the proposal eliminates discrimination, advances equality of opportunity and/or fosters good relations with protected groups.
Negative Impact	Protected characteristic group(s) could be disadvantaged or discriminated against
Neutral Impact	No change/ no assessed significant impact of protected characteristic groups
Unclear	Not enough data/evidence has been collected to make an informed decision.

Age:	<i>Positive</i>		
What age bracket does this affect?	All age groups		
Please provide details:	The population of Dorset Council area is as follows:		
	Population	Total	Percentage
			England and Wales
	All persons	376,480	-
	0-15 years	59,930	15.9%
	16-64 years	208,740	55.4%
	65+ years	107,810	28.6%
	Source: 2018 Mid-Year Estimates, Office for National Statistics		
	Dorset has a much greater proportion (29%) of the population aged 65 and over, higher than England and Wales (18%). Over the period 2008 - 2018, the number aged 65+ grew by 22,500 (up by 26%). However, the working age population dropped by 9,200 in Dorset and the number of children fell by 900. The number of children in Dorset is 59,900¹. The number of 0-4-year olds is expected to decrease by about 600, but the number of 5-15-year olds will decrease by almost 100 between 2018 and 2028². Dorset Council produces population projections which look forward 25 years and are revised on an annual basis. It should be noted the Dorset Care Record will cover both the Dorset Council area and the Bournemouth, Christchurch & Poole Council area, however this EqlA covers just the Dorset Council area.		

¹ 2017 Mid-year estimates, 0-15-year-olds, ONS

² 2017-based trend population projections, ONS

	Internet Usage: Virtually all adults aged 16-44 years in the UK were recent internet users (99%) in 2019, compared with 47% of adults aged 75 years and over. In addition, the number of adults who had never used the internet in 2019 was .7.5% down from 8.4% in 2018 (ONS, 2019) We anticipate that the introduction of a citizen portal will provide improved access to personal health and care data.
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Disability: (including physical, mental, sensory and progressive conditions)	Positive		
Does this affect a specific disability group?	All groups		
Please provide details:	The disability profile for Dorset Council area is as follows:		
	Category	Number	%
	All Usual Residents	365,153	
	Day to day activities limited a lot	30,710	8%
	Day to Day Activities Limited a little	41,457	11%
	Source: Census 2011, Office for National Statistics		
	One in five of Dorset’s population consider that they have a long-term health problem or disability³. In former council area of Weymouth and Portland this accounts for 22% of residents, compared to former North Dorset council area with 18%. In addition, the number of residents with a disability, claiming disability benefits is 4.6% in the Dorset Council area, but the former local authority areas of Weymouth & Portland it is 6.1% and Purbeck is 3.9%⁴. Internet Usage: In 2019, the proportion of recent internet users was lower for adults who were disabled (78%) compared with those who were not disabled (95%). The difference between internet use in disabled and non-disabled adults was greater in older age groups. For adults aged 75 years and over 41% of disabled adults and 54% of non-disabled adults were recent internet users. In comparison, there was little difference in recent internet use for disabled and non-disabled adults in the 16-24 age group; 98% of disabled adults and 99% of non-disabled adults in this age groups were recent internet users.		

³ Census 2011, ONS

⁴ Dorset Council, State of Dorset 2019

	Since 2014, the number of disabled adults who had recently used the internet increased by 13 percentage points to just over 10 million in 2019 (ONS, 2019). As computers, mobile and tablet devices all have built in accessibility features which support people with a range of disabilities this should ensure that disabled people are able to access the citizens portal. However, user testing will include accessibility testing to ensure that the portal is accessible. We anticipate that the introduction of a citizen portal will provide improved access to personal health and care data.
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Gender Reassignment & Gender Identity:	<i>Unclear impact</i>
Please provide details:	Robust statistical data at a Local Authority level on Sexual Orientation and Gender Identity does not currently exist apart from data on couples living in a same sex relationship from the Census 2011 (see sexual orientation). Nationally, data is also very limited on people who identify as Transgender and non-binary. Recent research by Stonewall and YouGov^[1] focused on the experiences of more than 800 trans and non-binary people. This research found that a significant number of trans people face poor treatment when accessing healthcare services, despite the legal duty of all health and social organisations to provide equal treatment and tackle discrimination, 7% of trans people said they have been refused care because they are LGBT. We recognise that further work needs to be carried out in this area to fully understand the needs when accessing healthcare services. ^[1] LGBT - Trans report, Stonewall; 2018

Pregnancy and maternity:	Positive
Please provide details:	Research from Dorset Clinical Commissioning Group (CCG) in 2014 suggested that the number of births in Dorset local authority area (formerly Dorset County Council area) was decreasing slightly year on year from 3734 in 2008 to 3658 in 2011 and with the proportion of Dorset women aged 15 to 44 to decrease by 2020 this may indicate a decrease in birth-rate in the future.

Race and Ethnicity:	<i>Unclear</i>
Please provide details:	Dorset has much lower levels (4.4%) of Black, Asian and Minority Ethnic (BAME) residents than the country as a whole

	(19.5%). The highest proportion of Dorset's BAME population are classified as 'White Other' who make up approximately 41% of Dorset's BAME population.⁵ This classification includes people who identify as white but who do not have UK national identity. <table border="1"> <thead> <tr> <th>Race & Ethnicity</th><th>%</th></tr> </thead> <tbody> <tr> <td>All Residents</td><td>365,153</td></tr> <tr> <td>White British & Northern Irish</td><td>95.6</td></tr> <tr> <td>White: Gypsy or Irish Traveller</td><td>0.1</td></tr> <tr> <td>Other White</td><td>2.3</td></tr> <tr> <td>Mixed/Multiple Ethnic Groups</td><td>0.8</td></tr> <tr> <td>Asian/Asian British</td><td>0.9</td></tr> <tr> <td>Black/African/Caribbean/Black British</td><td>0.2</td></tr> <tr> <td>Other Ethnic group</td><td>0.1</td></tr> </tbody> </table> Source: Census 2011, Office for National Statistics The Dorset Care Record and myDCR will cover both the Dorset Council area and Bournemouth, Christchurch & Poole Council (BCP) area. Information from BCP Council tells us that there are over 60 languages spoken in Dorset, this is a particularly high figure due to a transient population and language schools in Bournemouth. We have had Dorset Care Record leaflets translated into the following languages: Polish, Czech, Mandarin and Urdu. More recently (December 2019) at the request of social workers working with refugees and asylum seekers Pashtu, Arabic, Tigrinya and Kurdish-Sorani have been added. At this point in time, it is too early in the development of my DCR (citizen portal) to assess the impact on this protected characteristic and will be re-visited once the portal is tested.	Race & Ethnicity	%	All Residents	365,153	White British & Northern Irish	95.6	White: Gypsy or Irish Traveller	0.1	Other White	2.3	Mixed/Multiple Ethnic Groups	0.8	Asian/Asian British	0.9	Black/African/Caribbean/Black British	0.2	Other Ethnic group	0.1
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Religion or belief:	<i>Unclear</i>																
Please provide details:	The profile of Dorset Council area is as follows: <table border="1"> <thead> <tr> <th>Religion or Belief</th><th>%</th></tr> </thead> <tbody> <tr> <td>All Residents</td><td>365,153</td></tr> <tr> <td>Christian</td><td>65.1</td></tr> <tr> <td>Buddhist</td><td>0.3</td></tr> <tr> <td>Hindu</td><td>0.1</td></tr> <tr> <td>Jewish</td><td>0.1</td></tr> <tr> <td>Muslim</td><td>0.3</td></tr> <tr> <td>Sikh</td><td>0</td></tr> </tbody> </table>	Religion or Belief	%	All Residents	365,153	Christian	65.1	Buddhist	0.3	Hindu	0.1	Jewish	0.1	Muslim	0.3	Sikh	0
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⁵ Census 2011, ONS

	Other Religion	0.5
	No Religion	25.4
	Religion Not Stated	8
	Source: Census 2011, Office for National Statistics	
	Just over 1% of the population identify with other religions including Islam, Buddhism, Hinduism, Judaism and Sikhism and these tend to be concentrated in Dorset towns; Weymouth has just over 300 residents who identify with Islam. There are also concentrations around military establishments such as Blandford Camp where the Gurkhas and their families live who are predominantly Hindu. At this point in time, it is too early in the development of myDCR to assess the impact on this protected characteristic and will be re-visited.	

Sexual orientation:	<i>Unclear</i>																												
Please provide details:	Robust statistical data at a Local Authority level on Sexual Orientation and Gender Identity does not currently exist apart from data on couples living in a same sex relationship from the Census 2011 (as listed in the table below).																												
	<table><tr><th>Sexual Orientation</th><th>Number</th><th>%</th></tr><tr><td>All categories Living arrangements</td><td>297,603</td><td></td></tr><tr><td>Living in a couple: In a registered same-sex civil partnership or cohabiting (same-sex)</td><td>1,866</td><td>0.63</td></tr></table>	Sexual Orientation	Number	%	All categories Living arrangements	297,603		Living in a couple: In a registered same-sex civil partnership or cohabiting (same-sex)	1,866	0.63																			
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	According to Office for National Statistics (ONS) data released in 2019 (see the table below), the proportion of the UK population aged 16 years and over identifying as heterosexual or straight has decreased from 94.4% in 2012 to 93.2% in 2017. The same data estimated in 2017 1.1 million people aged 16 years and over identifying as LGB out of a UK population aged 16 years and over of 52.8 million.																												
	<table><tr><th>Sexual orientation</th><th>2015</th><th>2016</th><th>2017</th></tr><tr><td>Heterosexual or straight</td><td>93.7</td><td>93.4</td><td>93.2</td></tr><tr><td>Gay or lesbian</td><td>1.1</td><td>1.2</td><td>1.3</td></tr><tr><td>Bisexual</td><td>0.6</td><td>0.8</td><td>0.7</td></tr><tr><td>Lesbian, gay or bisexual (LGB)</td><td>1.8</td><td>2.0</td><td>2.0</td></tr><tr><td>Other</td><td>0.4</td><td>0.5</td><td>0.6</td></tr><tr><td>Do not know or refuse</td><td>4.1</td><td>4.1</td><td>4.1</td></tr></table>	Sexual orientation	2015	2016	2017	Heterosexual or straight	93.7	93.4	93.2	Gay or lesbian	1.1	1.2	1.3	Bisexual	0.6	0.8	0.7	Lesbian, gay or bisexual (LGB)	1.8	2.0	2.0	Other	0.4	0.5	0.6	Do not know or refuse	4.1	4.1	4.1
	Sexual orientation	2015	2016	2017																									
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Bisexual	0.6	0.8	0.7																										
Lesbian, gay or bisexual (LGB)	1.8	2.0	2.0																										
Other	0.4	0.5	0.6																										
Do not know or refuse	4.1	4.1	4.1																										
Source: Office for National Statistics - Annual Population Survey; 2019 (Totals may not add up to 100 due to rounding up)																													
The data also identified that males (2.3%) were more likely to identify as LGB than females (2018) in 2017.																													

	At this point in time, it is too early in the development of myDCR to assess the impact on this protected characteristic and will be re-visited.
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Sex (consider both men and women):	Unclear			
Please provide details:	The profile of Dorset Council area is as follows:			
	Population	Total	Percentage	England and Wales
	All persons	376,480	-	59,115,810
	All males	184,100	48.9%	49.4%
	All females	192,380	51.1%	50.6%
	Dorset has a slightly higher female population with 105 females for every 100 males in Dorset.			
At this point in time, it is too early in the development of myDCR to assess the impact on this protected characteristic and will be re-visited.				

Marriage or civil partnership:	<i>Unclear</i>										
Please provide details:	The profile of Dorset Council area is as follows: <table> <tr> <th>Marriage/Civil Partnership</th><th>%</th></tr> <tr> <td>All Residents, 16 years + (Count)</td><td>305,307</td></tr> <tr> <td>Married</td><td>54.2</td></tr> <tr> <td>Same Sex Civil Partnership</td><td>0.2</td></tr> <tr> <td>Source: Census 2011, Office for National Statistics</td><td></td></tr> </table> At this point in time, it is too early in the development of myDCR to assess the impact and will be re-visited.	Marriage/Civil Partnership	%	All Residents, 16 years + (Count)	305,307	Married	54.2	Same Sex Civil Partnership	0.2	Source: Census 2011, Office for National Statistics	
Marriage/Civil Partnership	%										
All Residents, 16 years + (Count)	305,307										
Married	54.2										
Same Sex Civil Partnership	0.2										
Source: Census 2011, Office for National Statistics											

Carers:	Positive		
Please provide details:	The profile of Dorset Council area is as follows:		
		Number	%
	All categories: Provision of unpaid care	365,153	
	Provides no unpaid care	321,819	
	Provides Unpaid Care	43,334	11.9
	Provides 1 to 19 hours unpaid care a week	29,429	8.1

	Provides 20 to 49 hours unpaid care a week	4,770	1.3
	Provides 50 or more hours unpaid care a week	9,135	2.5
	Source: Census 2011, Office for National Statistics		
	We anticipate that the introduction of myDCR and the introduction of the circle of care will provide carers with access (by agreement) to health and care information of the cared for person.		

Rural isolation:	Unclear					
Please provide details:	Population of Dorset Council area:					
	46% of the Dorset Council population live in rural areas (as defined by the Office for National Statistics). Most of these areas are within 30 minutes driving distance of an urban area so may not be considered isolated. Public Transport across the rural area is however very patchy and for those people without easy access to private transport such as young people, low income households and older people this aspect of deprivation may be significant. The table below shows the number of households in Dorset that fall within the top 20% of areas most deprived nationally for access to services that either have no car or have one car or less per household.					
	Rural Isolation	Total Number of households	sum of households that fall within the top 20% of areas most deprived nationally for access to services that have no car or van	% of households that fall within the top 20% of areas most deprived nationally for access to services that have no car or van	Sum of households that fall within the top 20% of areas most deprived nationally for access to services that have 1 car or less in household	% of households that fall within the top 20% of areas most deprived nationally for access to services that have 1 car or less in household
		158,738	6,874	4.3	36,962	23.3
	Source: Census 2011, Office for National Statistics					
	Across Dorset both local authorities (Dorset Council and Bournemouth, Christchurch and Poole Council) investment has been and is being made to improve access to digital services for all Dorset residents. Improved access will allow Dorset residents to have access to existing health and care services as well as new and developing services. In addition, increased WIFI access via local community groups and local locations such as libraries, village halls and GP surgeries support those residents without their own digital equipment or broadband access.					
	At this point in time, it is too early in the development of the citizen portal to assess the impact and will be re-visited.					

Single parent families:	<i>Unclear</i>		
Please provide details:	The profile of Dorset Council area is as follows:		
		Number	%
	All households	158,738	
	Lone parent household total	12,110	7.6
	Lone parent household: 1 dependent child	4,259	2.7
	Lone parent household: 2 or more dependent children	3,355	2.1
	Lone parent household: 2 or more dependent children	4,496	2.8
Source: Census 2011, Office for National Statistics			
At this point in time, it is too early in the development of myDCR to assess the impact and will be re-visited.			

Social & economic deprivation:	<i>Unclear</i>				
Please provide details:	The profile of Dorset Council area is as follows:				
	Category	Dorset Council area		England & Wales	
		Number	%	Number	%
	Household not deprived in any dimension	71,760	45.2	9,893,773	42.3
	Household deprived in 1 dimension	54,652	34.4	7,620,164	32.6
	Household deprived in 2 dimensions	26,796	16.9	4,512,853	19.3
	Household deprived in 3 dimensions	5,078	3.2	1,217,061	5.2
	Household deprived in 4 dimensions	452	0.3	122,193	0.5
	Source: Census 2011, ONS				
	Classification of household deprivation The dimensions of deprivation used to classify households are indicators based on the four selected household characteristics. A household is deprived in a dimension if they meet one or more of the following conditions: Employment: any member of a household not a full-time student is either unemployed or long-term sick, Education: no person in the household has at least level 2 education (see highest level of qualification), and no person aged 16-18 is a fulltime student, Health and disability: any person in the household has general health 'bad or very bad' or has a long-term health problem, and				

	Housing: Household's accommodation is either overcrowded, with an occupancy rating -1 or less, or is in a shared dwelling, or has no central heating. A household is classified as being deprived in none, or one to four of these dimensions in any combination. Deprivation has a significant impact on health and wellbeing. The Dorset Council areas of deprivation are largely located in the most urban areas – in particular, the former borough of Weymouth & Portland, but many of Dorset's rural communities could also be deprived in terms of barriers to housing and essential services. There are ten areas (out of a total of 219) in Dorset within the top 20% most deprived nationally for multiple deprivation down from 12 in 2010^[1], nine of these are in Weymouth & Portland and one is in the former West Dorset District area. The gap in life expectancy between the most deprived and least deprived areas in the former Dorset County Council area is 6.0 years for men and 5.2 years for women^[2] At this point in time it is too early in the development of myDCR to assess the impact and will be re-visited ^[1] State of Dorset, 2019; Dorset Council ^[2] Dorset Health Profile 2018, Public Health England
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Armed Forces communities	Unclear				
Please provide details:	The profile of Dorset Council area is as follows: <table border="1"> <tr> <td>Military</td><td>All usual residents living in a household where the Household Representative Person (HRP) is a member of the armed forces</td></tr> <tr> <td></td><td>4,491</td></tr> </table> Source: Census 2011, Office for National Statistics Please note the above figure is from the 2011 Census for usual residents living in households where the Household Representative Person is a member of the armed forces. Those living in households where a member of the armed forces is not the HRP are not included in these figures. There are 4 military bases in Dorset (Bovington, Lulworth, Blandford and Hamworthy). There is a need to establish additional information about the population of these military bases to gain a better understanding of the health and care services that are accessed or need to be accessed. Blandford has a large Gurkha community of both serviceman and their families.	Military	All usual residents living in a household where the Household Representative Person (HRP) is a member of the armed forces		4,491
Military	All usual residents living in a household where the Household Representative Person (HRP) is a member of the armed forces				
	4,491				

Part 5: Action Plan

Provide actions for **positive**, **negative** and **unclear** impacts.

If you have identified any **negative** or **unclear** impacts, describe what adjustments will be made to remove or reduce the impacts, or if this is not possible provide justification for continuing with the proposal.

Issue	Action to be taken	Person(s) responsible	Date to be completed by
Too early in the development of myDCR to assess the overall impact	Research, engagement to be undertaken during the development of myDCR to assess the overall impact of its introduction Nov 20 review – still too early in the development to assess the overall impact	Project Manager and Communications Manager	December 2021
myDCR in development and undergoing technical testing	Technical testing to be completed and moved to user testing prior to going live Nov 20 review – user testing to begin early in 2021	Test Manager, Project Manager	December 2021
Updating EqIA impacts on protected characteristics	On-going throughout development of myDCR Nov 20 review – still too early in the development to assess the overall impact	Project Manager, Privacy Manager	December 2021

EqlA Sign Off

Officer completing this EqlA:	Tracy Brinson	Date:	18/03/2020
Equality Lead:	Susan Ward-Rice	Date:	20/04/2020
Equality & Diversity Action Group Chair:	Dr David Bonner	Date:	21 April 2020

Reviews completed:

12 November 2020 (Tracy Brinson, Jodie Crowfoot, Tony McDougal, Georgina Hulbert, Kerry Griffin and Theresa Smith)

23 June 2021 (Andy Cowling, Jodie Crowfoot, Tony McDougal, Kerry Griffin, Theresa Smith)

Next Steps:

- Please send this draft EqlA to: [Diversity & inclusion Officer](#)
- The report author will be invited to an Equality & Diversity Action Group (these are held monthly - dates are available on the intranet)
- The Equality & Diversity Action Group will review the EqlA and you may be asked to make some alterations
- EqlAs are signed off and published
- The report author is responsible for ensuring any actions in the action plan are implemented.