Rapid Impact Checklist: Summary Sheet

Positive Impacts (Note the groups affected)

All groups

There are key priority actions that will involve working with population groups and communities, such as the focus on developing a model for engagement ensuring all voices are heard and the focus on NHS Grampian's Health Inequalities Action Plan, relating to a number of protected characteristics and specific population groups, as well as a broader approach to health inequalities. There will also be work undertaken to better understand our population health data and demographics, which should increase our ability to identify where we need to work closer with specific population groups. In addition, there will be a focus on increasing the inclusiveness of colleagues, particularly those with neurodiversity, and work with the Staff Equalities and Grampian Empowered Multicultural Staff Networks to break down barriers to attraction, recruitment and retention.

Age

- Focus on health and wellbeing of children and young people, including early years.
- Focus on improving pathways of care, supporting people of all ages, though particular reference to ageing population.
- Specific action to redesign the frailty pathway.

Disability

- Focus on access to mental health services and testing public health approach to mental wellbeing.
- Focus on Making Every Opportunity Count and Waiting Well – both led by the needs of the individual person.
- Focus on increasing inclusiveness of colleagues, particularly those with neurodiversity.

Negative Impacts (Note the groups affected)

None identified

 There will also be a shorter 'summary version' of the Plan, focussing on key messages in an easier to digest format, available in alternate versions and/or hard copy as required.

Gender

 Focus on Women's Health Plan and Baird Family Hospital.

Pregnancy/maternity

 Focus on Best Start Programme, Moray Maternity Plan & Baird Family Hospital

Race

 Focus on being an anti-racist organisation, with a dedicated plan.

Additional Information and Evidence Required

N/A

Recommendations

Overall, in the Three Year Delivery Plan, the objectives and priorities outlined are very high level in nature, as to be expected in a strategic document such as this. The expectation would be that EQIA is undertaken in more detail on individual actions and areas of work as appropriate.

From the outcome of the RIC, have negative impacts been identified for race or other equality groups? Has a full EQIA process been recommended? If not, why not?

Signature(s) of Level One

Impact Assessor(s)

Jenna Young & Roda Bird

Date: 24/07/23

Equality Impact Assessment (EQIA) Checklist



Completing this form will help decide whether the policy or proposal will require a Standard EQIA or Full/Integrated EQIA. *Policy also refers to service, function, new proposed policy, new service, service redesign, review function and programmes.

Title	NHS Grampian Three Year Delivery Plan 2023-2026
Directorate, service or department	Coordinated via Planning, Innovation & Programmes (PIP) Directorate

Main contact of the policy*

Name	Adam Coldwells	Tel No	01224 558675
Job Title	Director of Strategy/ Deputy Chief Executive	Email	adam.coldwells@nhs.scot

Policy

Aim	This is NHS Grampian's overarching Delivery Plan and sets out how the Board, working in partnership with the three Health and Social Care Partnerships (HSCPs), our colleagues, citizens, communities and partners (including the third sector), will make progress against the vision and strategic priorities as set out in our 'Plan for the Future 2022-28', along with responding to key priorities set out by the Scottish Government.
Purpose	This Three Year Delivery Plan (2023-26) sets out how we will continue to make progress and its development has been informed and shaped by both those accessing and delivering services. Over the next three years, we aim to deliver on three specific objectives, underpinned by a number of priority actions.
Intended/desired outcomes	We believe the priorities set out are ambitious but deliverable by March 2026 and will make the biggest impact in relation to recovery, responding to enduring pressures and delivering the significant changes required to achieve the ambitions set out in our strategy - 'Plan for the Future 2022-28'. This Plan responds to the 10 priorities for recovery set out in the Scottish Government Commissioning Guidance dated 27 February 2023 and is aligned to national strategy, specifically the NHS Recovery Plan 2021-26.

Part 1. Which groups of the population do you think will be affected by the proposal?

We believe it will have an impact on all people within Grampian. A key enabler to delivering the ambitions for a sustainable health and care system as set out in the Plan for the Future is taking steps to build a different relationship with our colleagues and citizens (as described under the pillar of 'People'). Over the next three years, we aim to demonstrate progress in relation to a range of priorities relating to progressing a more sustainable workforce, our culture, increased colleague wellbeing at work, designing and embedding a different approach to engagement, and improving outcomes for children in Grampian.

Health inequalities in society have been both directly and indirectly made worse by the impact of the pandemic and will be felt for years to come. Even before the pandemic, health gains were stalling with the amount of time and life years spent in good health decreasing for many. It is widely recognised that doing more of the same is not an option. Over the next three years, NHS Grampian will work as part of a North East Alliance, whereby organisations have come together to agree key areas for collaboration leading to improved population health. Creating a population health system will frame population health so that it is everyone's business and together we can take action to prevent harm, improve health and support communities to thrive now and into the future.

Within the Delivery Plan, there are some key priority actions that will involve working with population groups and communities, such as the focus on developing a model for engagement ensuring all voices are heard and the focus on NHS Grampian's Health Inequalities Action Plan, relating to a number of protected characteristics and specific population groups, as well as a broader approach to health inequalities. There will also be work undertaken to better understand our population health data and demographics, which should increase our ability to identify where we need to work closer with specific population groups. In addition, there will be a focus on increasing the inclusiveness of colleagues, particularly those with neurodiversity, and work with the Staff Equalities and Grampian Empowered Multicultural Staff Networks to break down barriers to attraction, recruitment and retention.

Overall, in the Three Year Delivery Plan, the objectives and priorities outlined are very high level in nature, as to be expected in a strategic document such as this. The expectation would be that EQIA is undertaken in more detail on individual actions and areas of work as appropriate.

DOCUMENT 4
Part 2. Identifying the impacts (in brief) on groups with protected characteristics, including economic impact and human rights.

Protected Characteristic	Docitive or Negative Impost
	Positive or Negative Impact Social and Economic, Human Rights Additional Information
Age (early years, children, young people, middle years,	Positive impact as there are specific mentions about a number of life stages:
older people)	 A focus on health and wellbeing of children and young people, including early years.
	A focus on improving pathways of care, supporting people of all ages, though particular reference to responding to an ageing population. Specific action to redesign the frailty pathway.
Disability (physical	 Specific action to redesign the frailty pathway. Positive as broad work focusing on inequalities will include
impairment, learning disability, neurological, sensory loss, mental health,	disability. Pathway redesigns and digital developments need to take into account the needs of people with disabilities and therefore should undertake their own impact assessment. There
long term conditions)	 are a few specifics mentioned in the Plan: A focus on access to mental health services and testing
	 public health approach to mental wellbeing. A focus on Making Every Opportunity Count and Waiting Well – both of which will be led by the needs of the
	individual person.
	 A focus on increasing the inclusiveness of colleagues, particularly those with neurodiversity.
	The Three Year Delivery Plan will also have a shorter 'summary version', which is designed to focus on the key messages in an easier to digest format. This will be available in alternate versions and/or hard copy as required to ensure it is accessible to all.
Gender (male, female)	Positive impact for with women with a focus on developing a
,	Women's Health Plan (in response to national strategy
	acknowledging the specific inequalities in health that women can face) and continued work to build and open the Baird Family
	Hospital. No specific actions for men only, though will be part of other
	population groups and protected characteristics supported by actions in the Plan.
Gender Reassignment	No specific mention but would assume positive impact through
(people who have proposed,	broad work regarding inequalities and inclusivity.
started, in the process or completed a process to	
change his or her sex)	
Marriage or Civil	No specific mention but would assume positive impact through
Partnership (people who are married, unmarried or in civil partnership)	broad work regarding inequalities and inclusivity.
Pregnancy or Maternity	Positive impact with a focus on the Best Start Programme, Moray
(pregnant and/or on maternity leave, including	Maternity Plan & Baird Family Hospital.
breastfeeding)	

Race (minority ethnic people, racial groups, national origins, gypsies/travellers, refugees, asylum seekers, migrant workers)	Positive impact with a focus on being an anti-racist organisation, with a dedicated group and action plan.
Religion or Belief (different religions or beliefs, including non-belief)	No specific mention but would assume positive impact through broad work regarding inequalities and inclusivity.
Sexual Orientation (e.g. lesbian, gay, bisexual, heterosexual)	No specific mention but would assume positive impact through broad work regarding inequalities and inclusivity.

Part 3. Any adverse or potential adverse impact identified? ☐ Yes ☐ No

Briefly describe the adverse or potential impact and how it will be addressed or mitigated
As this Plan is very high level, all actions and programmes of work outlined in the Delivery Plan
will need to undertake their own impact assessment to ensure no adverse impact.

Part 4. Health Determinants/Health in All. Identify the positive and negative impacts and which groups will be affected?

What impact will the proposal have on	lifestyles?		
Diet and nutrition	Nothing specifically outlined in relation to this topic, but a focus on Making Every Opportunity Count and Waiting Well – both of which will be led by the needs of the individual person.		
Exercise and physical activity	Nothing specifically outlined in relation to this topic, but a focus on Making Every Opportunity Count and Waiting Well – both of which will be led by the needs of the individual person.		
 Substance use: tobacco, alcohol and drugs 	There will be a specific focus on this topic by the Public Health Directorate as part of Test-Bed approach to Population Health to ensure a positive impact.		
Risk taking behaviour	Nothing specifically outlined in relation to this topic, though individual actions and programmes of work outlined in the Delivery Plan may need to assess impact against this specific topic to ensure no adverse impact.		
Education and learning or skills	The Plan has specific actions relating to staff education and training, and also in our role as an educational institution.		
Will the proposal have any impact on the social environment?			
Social status	The Plan has a specific focus on our role as an		
- Coolai status	Anchor organisation, which includes continuing to widen access to health and care careers. More will be covered in the Fairer Duty Scotland assessment.		
Employment (paid or unpaid)	The Plan has a specific focus on our role as an Anchor organisation, which includes continuing to		

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		widen access to health and care careers. More will
	0 : 1/6 : 1	be covered in the Fairer Duty Scotland assessment.
•	Social/family support	Nothing specifically outlined in relation to this topic,
		but a focus on Making Every Opportunity Count and
		Waiting Well – both of which will be led by the needs
		of the individual person.
•	Stress	Nothing specifically outlined in relation to this topic,
		but a focus on supporting staff health and wellbeing
		would encompass work-related stress.
•	Income	The Plan has a specific focus on our role as an
		Anchor organisation, which includes continuing to
		widen access to health and care careers. More will
		be covered in the Fairer Duty Scotland assessment.
\A/; 4b	a proposal baya an impact on th	no physical anvironment?
	e proposal have an impact on th	
•	Living conditions	Nothing specifically outlined in relation to this topic,
		though individual actions and programmes of work
		outlined in the Delivery Plan may need to assess
		impact against this specific topic to ensure no
	NAZ - L. C. C. C. C. P. C.	adverse impact.
•	Working conditions	Nothing specifically outlined in relation to this topic,
		but a focus on supporting staff health and wellbeing
		would encompass working conditions within NHSG.
•	Pollution or climate change	A specific focus within the Plan is on Greening
		Health Systems and how we aim to become a leader
		in sustainability and reduce our impact on the
		environment.
1	Accidental injuries or public	Nothing specifically outlined in relation to this topic,
	safety	though individual actions and programmes of work
		outlined in the Delivery Plan may need to assess
		impact against this specific topic to ensure no
		adverse impact.
	Transmission of infectious	A specific focus on development of our Joint Health
	disease	Protection Plan.
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	e proposal affect access to expe	
•	Health care	One of the three main objectives of the Delivery Plan
		is to be improve timely access to healthcare
		services, so the actions outlined in the Plan aim to
		have a positive impact on this.
•	Transport	Nothing specifically outlined in relation to this topic,
		though individual actions and programmes of work
		outlined in the Delivery Plan may need to assess
		impact against this specific topic to ensure no
		adverse impact.
•	Social services	Nothing specifically outlined in relation to this topic,
		though individual actions and programmes of work
		outlined in the Delivery Plan may need to assess
		impact against this specific topic to ensure no
		adverse impact.
•	Housing services	Nothing specifically outlined in relation to this topic,
		though individual actions and programmes of work
		outlined in the Delivery Plan may need to assess

	impact against this specific topic to ensure no adverse impact
Education	The Plan has specific actions relating to staff education and training, and also in our role as an educational institution.

Part 5. Will it have any impact on the following?

		Describe or summarise how this policy will contribute to or achieve
Discrimination	⊠ Yes □ No	Positive impact: there is a specific action to increase the inclusiveness of colleagues and work with the Staff Equalities and Grampian Empowered Multicultural Staff Networks to break down barriers to attraction, recruitment and retention. There is also a focus on the health inequalities action plan.
Equality of opportunity	⊠ Yes □ No	Positive impact: as well as above mentioned action relating to discrimination which is equally applicable here, there is also a focus on the Health Inequalities Action Plan and widening access to health and care careers.
Good relations between groups	⊠ Yes □ No	Positive impact: as well as points mentioned in above two sections, there is also a specific focus on 'people powered health' — which is about recognising people's lived experience and opinions as a valuable asset in helping shape health. We aim to collaborate with communities and partners to bring people together, including healthcare professionals, the community and third sector to support people to live well. It is a redefined relationship, one which seeks to create a partnership of equals and places people more in control of their health and wellbeing.

If No, go to Part 8.

If Yes, go to Part 7. A policy that is a "strategic decision" must take into account how they can reduce inequalities of outcome caused by socio-economic disadvantage. Policy that has a potential to impact on health and widen health inequalities must have "due regard" for the Fairer Scotland Duty.

The Fairer Scotland Duty places a legal responsibility on public bodies to actively consider how they can reduce inequalities of outcome caused by socioeconomic disadvantage. The Duty applies at strategic level, which normally include decisions around setting priorities and targets, allocating resources and commissioning services. To assess if your policy is a strategic decision, please refer to: Fairer Scotland Duty: guidance for public bodies - gov.scot (www.gov.scot)

DOCUMENT 4 Part 7. Fairer Scotland Duty. What likely will this policy have on people experiencing different kinds of social disadvantage?

Socio-Economic Disadvantage	Positive impact/Negative Impact/No adverse impact has been identified
Low Income/Income Poverty – cannot afford to maintain regular payments such as bills, food, clothing	Positive impact identified as well as some areas for consideration for specific programmes – so completed as separate document
Low and/or no wealth – enough money to meet Basic living costs and pay bills but have no savings to deal with any unexpected spends and no provision for the future	Positive impact identified as well as some areas for consideration for specific programmes – so completed as separate document
Material Deprivation – being unable to access basic goods and services i.e. financial products like life insurance, repair/replace broken electrical goods, warm home, leisure/hobbies	Positive impact identified as well as some areas for consideration for specific programmes – so completed as separate document
Area Deprivation – where you live (rural areas), where you work (accessibility of transport)	Positive impact identified as well as some areas for consideration for specific programmes – so completed as separate document
Socio-economic Background – social class i.e. parent's education, employment and income	Positive impact identified as well as some areas for consideration for specific programmes – so completed as separate document

Part 8. Does the policy need to consider the impact on other areas?

Human Rights (Human Rights Assessment)	☐ Yes	⊠ No
Financial	☐ Yes	\boxtimes No
Environment	☐ Yes	\boxtimes No
Children's rights and welfare (Children's Rights Impact Assessment)	☐ Yes	\boxtimes No
Island or Rural Communities	☐ Yes	⊠ No

These should be part of impact assessment on specific actions and programmes as appropriate.

Part 9. Has your assessment been able to demonstrate the following and why?

policies etc being assessed should be halted until these issues can be addressed)

•
☑ Option 1. No major change (where no impact or potential for improvement is found, no action is required)
☐ Option 2. Adjust (where a potential or actual negative impact or potential for a more positive impact is found, make changes to mitigate risks or make improvements)
☐ Option 3. Continue (where a potential or actual negative impact or potential for a more positive impact is found but a decision not to make a change can be objectively justified, continue without making changes.)
☐ Option 4. Stop and remove (where a serious risk of negative impact is found, the plans,

Explain decision

Overall in the Three Year Delivery Plan, the objectives and priorities outlined are very high level in nature, as to be expected in a strategic document such as this. The expectation would be that EQIA is undertaken in more detail on individual actions and areas of work as appropriate.

To be completed by Team Lead of the policy/proposal		
Name	Adam Coldwells	
Job Title	Director of Strategy / Deputy Chief Executive	
Email	adam.coldwells@nhs.scot	
Telephone	01224 558675	
Date	24/07/2023	

Part 9. Has the policy document been checked by a Level 1 EQIA assessor?

	□ No
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Name	Jenna Young
Job Title	Planning Manager
Email	jenna.young3@nhs.scot
Date	24/07/2023

Return to Equality and Diversity at roda.bird@nhs.scot

- Completed form
- Copy of final draft/version of any documentation

To be completed by Equality and Diversity – for quality control purposes and recording

Name	Roda Bird
Job Title	Interim Equality and Diversity Manager
Email	roda.bird@nhs.scot
Date	24/07/2023