



Equality Impact Assessment (Stage 1)

This is a legal document as set out in the Equality Act (2010) and the Equality Act 2010 (Specific Duties) (Scotland) regulations 2012 and may be used as evidence for cases referred for further investigation for compliance issues.

Completing this form helps you to decide whether or not to complete to a full (Stage 2) EQIA.

Consideration of the impacts using evidence and public/patient feedback is necessary.

Question 1: Title of Policy, Strategy, Redesign or Plan

Badgernet Maternity Electronic Patient Record

Question 2a: Lead Assessor's details

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Question 2b: Is there a specific group dedicated to this work? If yes, what is the title of this group?

No

Question 3: Detail the main aim(s) of the Policy, Strategy, Redesign or Plan. Please describe the specific objectives and desired outcomes for this work.

Aim	Badgernet maternity is a full electronic patient record. The electronic patient record is accompanied by a patient accessed app and website entitled Badger Notes. Badger notes allows the patient to see extracts of their pregnancy notes and allows access to other information and resources related to pregnancy.
	Badger was implemented in NHS Fife in 2017; this is a retrospective assessment and will cover the current content on badgernet and the accessibility of Badger Notes. This is a procured system and the content is set by the company/developer Clevermed. NHS Fife have the ability to manage some settings and content and to request content change and additions/amends however some of it is out with our control.

Badgernet system is used solely by health professionals. It is used to record all maternity related contacts with the pregnant person.
On discovering a pregnancy, the pregnant person can self refer to our service through a single point of access website which alerts our clerical staff who open an electronic patient record on badger. Alternatively they can choose to refer through a telephone service.
The Badger Notes app is accessible on both apple and android phones in addition to the desktop website.
A history taking appointment (booking) is one of the first contacts a pregnant person has with maternity services. The templates set out in badgernet provide the opportunity for protected characteristics to be identified and for the pregnant person to share their preferences and requests more on this is detailed in Question 4.
The history taking appointment forms the basis of a pregnancy summary which is the main page of the electronic record. From here the health professional accessing the record can see a summary of the pregnant person's history and pregnancy to date. Several key information points highlighted in this report will be visible from here. Should there be any points highlighted which require a higher level of alert, staff can generate an alert which will appear in a banner at the bottom of the patients record.

Question 4: Identifying the Impacts in brief

Consider any potential Impacts whether positive and/or negative including **social and economic impacts** and human rights. Please note, in brief, what these may be, if any. **Please do not leave any sections blank.**

Relevant Protected Characteristics	Impacts negative and positive Social / Economic Human Rights	
Age - think: children and young people, adults, older age etc.	BADGER NET (clinician facing) This system will be used to record maternity records and therefore will only be recording information of service users of child bearing age. BADGER NOTES (patient facing) I am unable to identify any barriers to access under this category	
Disability – think: mental health, physical disability, learning disability, deaf, hard of hearing, sight loss etc.	BADGER NET (clinician facing) The history taking template includes questions regarding disabilities, communication and mobility and creates alerts on the system to notify staff of these. Staff have the opportunity	
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BA I a ba dis Th is dis tha be	ccommodate their disability allowing care and are planning to be personalised. ADGER NOTES (patient facing) am unable to identify any means to mitigate arrier to patients with sight loss or learning isabilities accessing the Badger Notes app. he app displays mainly text. Therefore there a potential for negative impacts on groups with isabilities, however, any and all information nat would be accessed through badgernet can e provided to the patients during face-to-face consultations.
Note: Race = "a category of humankind that shares certain distinctive physical traits" e.g. Black, Asian, White, Arab Ethnicity = "large groups of people classed according to common racial, national, tribal, religious, linguistic or cultural origin/background" Think: White Gypsy Travellers, Black African, Asian Pakistani, White Romanian, Black Scottish, mixed or multiple ethnic groups. It a fait div BA	ADGER NET (clinician facing) he history taking template includes questions egarding family origins and ethnic groups. here are 76 different options that can be elected to record the services users primary inguage include a free text 'other' option for ny language not included. There is the pportunity to record that an interpreter is equired. tecording of ethnic group is in line with ISD cotland's data dictionary list of ethnicity lassification. D scotland Information Services Division also asks these questions of the biological ather should the pregnant person wish to ivulge this information. ADGER NOTES (patient facing) rom March 2023 unauthenticated pages tithin Badger Notes will be available in Polish, unjabi, Bengali, Spanish, Portuguese, comanian, Lithuanian, Somali and Welsh mough a 'language picker'. ome of the local leaflets currently available tithin badger notes are available in other anguages. ages with personal information or information ecorded as part of clinical care will not be anslated by the 'language picker' within adger Notes. We recognise that there are lso many languages not covered by the

	interpreter at all appointments. They will have the opportunity to ask questions with an interpreter at each appointment and no information would be added to the app that they would not have had discussed at the appointment.
Sex –	BADGER NET (clinician facing)
think: male and/or female, intersex, Gender-Based Violence	The history taking template includes questions about historical and current domestic violence. There are multiple questions to obtain and record a full history and links to a DASH assessment.
	Badgenet also has a function called 'partner present mode'. This function hides all sensitive information from the user interface to ensure that it is no inadvertently seen by a third party during a consultation.
	BADGER NOTES (patient facing)
	Access to Badger Notes is given only to the pregnant person and access to the app or website is password protected
Sexual Orientation -	BADGER NET (clinician facing)
think: lesbian, gay, bisexual, pansexual, asexual, etc.	The history taking template includes a question asking the pregnant person their sexual orientation
	It also asks of the biological father their identified gender and pronouns should the pregnant person wish to divulge this information.
	The history taking template contains questions which consider the situation and circumstances of couples and single parents who have conceived by alternative means. The history taking template allows the recording of relevant health information of biological parents of the unborn child and information on non-biological parents involved in the pregnancy. The pregnant person has control over which information is divulged.
	BADGER NOTES (patient facing)

	I am unable to identify any barriers to access under this category		
Religion and Belief -	BADGER NET (clinician facing)		
Note: Religion refers to any religion, including a lack of religion. Belief refers to any religious or philosophical belief including a lack of belief.	The history taking template includes a question asking the pregnant person their religion and cultural needs		
Think: Christian, Muslim, Buddhist, Atheist, etc.	BADGER NOTES (patient facing)		
	I am unable to identify any barriers to access under this category		
Gender Reassignment –	BADGER NET (clinician facing)		
Note: transitioning pre and post transition regardless of Gender Recognition Certificate	The history taking template includes a question asking which gender the pregnant person identifies as. This is then displayed in the pregnancy summary page for staff		
Think: transgender, gender fluidity, nonbinary, agender, etc.	awareness.		
	The history taking template includes a question asking the pregnant person if they have changed gender from which they were assigned at birth, what their current gender and preferred pronouns are.		
	It also asks these questions of the biological father should the pregnant person wish to divulge this information.		
	BADGER NOTES (patient facing)		
	I am unable to identify any barriers to access under this category		
Pregnancy and Maternity –	This piece of work focuses entirely on		
Note: Pregnancy is the condition of being pregnant or expecting a baby. Maternity refers to the period after birth.	pregnancy and maternity and so impacts on this group will be covered throughout this document		
Think: workforce maternity leave, public breast feeding, etc.			
Marriage and Civil Partnership –	BADGER NET (clinician facing)		
Note: Marriage is the union between a man and a woman or between a same-sex couple. Same-sex couples can also have	The history taking template includes questions regarding partnership status and support status accommodating all situations and		
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their relationships legally recognised as a civil partnership.	circumstances. BADGER NOTES (patient facing)
Think: workforce, inpatients visiting rights, etc.	I am unable to identify any barriers to access under this category

Question 6: Please include in brief any evidence or relevant information, local or national that has influenced the decisions being made. This could include demographic profiles, audits, publications, and health needs assessments.

"The Best Start; A Five-Year Forward Plan for Maternity and Neonatal Care in Scotland" is a Scottish Government policy for maternity care published in 2017. Recommendations 71 & 71 within this report indicate that electronic women's maternity record should be used. Point 7.5.2 of the report indicates that this should be Badgernet.

Question 7: Have you consulted with staff, public, service users, children and young people and others to help assess for Impacts?

(Please tick)

Yes No X

If yes, **who** was involved and **how** were they involved?

If not, why did you not consult other staff, patients or service users? Do you have feedback, comments/complaints etc that you are using to learn from, what are these and what do they tell you?

Think: Who did you ask? When and how? Did you refer to feedback, comment or complaints etc?

The decision to procure this system was directorate wide decision which considered service needs as well as the needs of service users.

Patients are supported in the patient facing Badger Notes associated with the system and are provided with assistance to access the system where required. We are also happy to take onboard and feedback from services users regarding Badger Notes.

The developer (Cleveremed) can receive feedback on the app through the apple app store. As of 15/02/23 there are 10,380 reviews and ratings with an average rating of 4.5 out of 5.

As the badgernet midwife I also take on board feedback from staff using the system and make regular requests to the developer (Clevermed) on ways that we feel the system can be improved for our staff and service users.

Question 10: Which of the following 'Conclusion Options' applies to the results of this Stage 1 EQIA and why? Please detail how and in what way each of the following options applies to your Plan, Strategy, Project, Redesign etc.

Note: This question informs your decision whether a Stage 2 EQIA is necessary or not.

Conclusion Option 1: No further action required

Where no negative impacts or potential for improvement is identified, no further action is required.

No stage 2 EQIA required.

Conclusion Option 2: Adjustments Made

Potential or actual negative impacts and/or potential for a more positive impact has been identified, therefore appropriate adjustments have been made to mitigate risks and/or make further improvements.

No Stage 2 EQIA required

I have identified that there is a potential barrier to access of the patient facing Badger Notes app for patients who do not speak English. I have spoken with Isla Bumba, Equality and Human Rights Lead, who advises that she has a statement in the six most commonly languages that we can add to the welcome page of the app advising patients that we can information contained within the app translated into their desired language at their request.

We will also add this statement to our NHS Fife Maternity Website.

Conclusion Option 3: Requires Further Adjustments

Potential or actual negative impacts and/or potential for a more positive impact has been identified, but were not successfully made during the Stage 1 EQIA, therefore further adjustments must be made to mitigate risks and/or make further improvements.

Stage 2 EQIA is required to ensure further adjustments are made and appropriate workforce/public/stakeholder engagement has been undertaken.

Conclusion Option 4: Continue Without Adjustments

Continue with Plan, Project, Strategy, Redesign etc despite a potential or actual negative impact or potential for a more positive impact being identified, but the decision to not make adjustments can be objectively justified.

Stage 2 EQIA is required to fully explore the potential to make adjustments by appropriate workforce/public/stakeholder engagement, or to develop evidence for continuing with the plan without making said adjustments.

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Conclusion Option 5: Stop

Stop the Plan, Project, Strategy, Redesign etc due to a serious risk of negative impact being identified.

Stage 2 EQIA required to fully explore the serious negative impact and engage appropriately with workforce/public/stakeholders to source solutions to mitigate the serious impact, and where no mitigations found, stop the Plan, Project, Strategy, Redesign etc.

PLEASE NOTE: ALL LARGE SCALE DEVELOPMENTS, CHANGES, PLANS, POLICIES, BUILDINGS ETC MUST HAVE A STAGE 2 EQIA.

If you have identified that a full EQIA is required then you will need to ensure that you have in place, a working group/ steering group/ oversight group and a means to reasonably address the results of the Stage 1 EQIA and any potential adverse outcomes at your meetings.

For example you can conduct stage 2 and then embed actions into task logs, action plans of sub-groups and identify lead people to take these as actions.

It is a requirement for Stage 2 EQIA's to involve public engagement and participation.

You should make contact with the Participation and Engagement team at fife.participationandengagements@nhs.scot to request community and public representation, and then contact Health Improvement Scotland to discuss further support for participation and engagement.

To be completed by Lead Assessor				
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Signature	Isteele			
Date	14/03/2023			

To be completed by Equality and Human Rights Lead officer – for quality control purposes			
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Date	16/03/2023		

Return to Equality and Human Rights Team at <u>Fife.EqualityandHumanRights@nhs.scot</u>

		Team V2.0		August 2023
			Next review date-	August 2023
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