

# 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**

Public Partner Volunteer involvement in the curriculum design for ScotCom medical degree.

**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?**

Public Partner Volunteer Planning Group

**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.**

<b>Aim</b>	<p>The aim of this project is to allow public participants of Fife communities to have an opportunity to become involved with the development of ScotCom, by helping to shape the knowledge and skills of the medical workforce of the future. By inviting a broad range of people to be involved, including those who may fall into protected characteristic groups to offer their views, the project can then ensure that the curriculum is diverse, representative of our communities, and accurate.</p> <p>Stage one of the plan will focus on curriculum design where we will engage with members of the public to learn about their experiences and views of healthcare in Fife. This will be done in 3 sections firstly project planning with P&amp;E and St Andrews University; secondly, engagement with</p>
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	<p>public partner volunteers through various methods and finally a report on success of engagement where this information will be used to shape and inform the learning outcomes of the ScotCom curriculum; providing the blueprint of the knowledge and skills practitioners require to meet the needs of the people and communities of Fife.</p> <p>Stage two will include further participation from public partner volunteers to become active participants in the education process with ScotCom students within the education hubs. The opportunities for people will include acting as a patient in a simulated environment where real life events can be mimicked in a safe teaching environment and to be part of Objective structured Clinical Examinations (OSCE's) where public volunteers can help to assess communication skills that medical students demonstrate.</p>
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**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
<p><b>Age -</b> <i>think: children and young people, adults, older age etc.</i></p>	<p><u>Children &amp; young people</u></p> <p>Children &amp; young people make up around 17% of the population of Fife so it is essential to ensure their views are heard during participation. Central fife in particular has a significant amount of the population living in poverty, which in turn sees a large gap between health and education needs for this age group. Seeking their views on the impact of their living circumstances and what is important to their health and wellbeing will help to shape the curriculum so that practitioners can effectively support this part of the population.</p> <p>The UNCRC (Incorporation) (Scotland) Act 2024, further protects the rights of children living in Scotland so that their views can be heard and that they have the right to live a healthy life, so by contacting schools and local groups we can invite children to participate in this event as a way to future proof the care they receive from medical services.</p> <p>Overall, this project will have a positive impact on children and young people by specifically seeking and incorporating their views into the</p>

	<p>planning process.</p> <p><u>Adults</u></p> <p>By offering participation to adults of varying ages it can positively identify the health concerns the public think about at different stages in life and what they expect from our medical health service. This will include areas of deprivation within Fife where there are significant health inequalities compared more affluent areas.</p> <p>This project will positively impact adults and older age people by ensuring their views are heard and incorporated into the planning process.</p>
<p><b>Disability –</b>  <i>think: mental health, physical disability, learning disability, deaf, hard of hearing, sight loss etc.</i></p>	<p>This engagement project will have a positive impact on those with disabilities as we endeavour to seek their opinions on what they need from health services and interactions with medical staff and students.</p> <p>The project group will focus on opportunities for venues that have suitable access and facilities which are clearly marked and signposted. This will also take into account having written communications in easy to read versions, large print, use of BSL interpreters and/or printing on appropriately coloured paper for those with learning disabilities and sight impairments.</p>
<p><b>Race and Ethnicity –</b>  <i>Note: Race = “a category of humankind that shares certain distinctive physical traits” e.g. Black, Asian, White, Arab</i>  <i>Ethnicity = “large groups of people classed according to common racial, national, tribal, religious, linguistic or cultural origin/background”</i>  <i>Think: White Gypsy Travellers, Black African, Asian Pakistani, White Romanian, Black Scottish, mixed or multiple ethnic groups.</i></p>	<p>The project has been formed to include all members of the public to have the opportunity to voice opinions if they choose, it is understood that some people who have English as a second language may not feel comfortable in written or oral formats in English, they may require an interpreter to assist or written questions to be in their first language, and so this will be offered and accommodated for.</p> <p>The project team will work together to find solutions and reassure communities (who may be reluctant at engaging and/or hesitant at engaging with health services) about the positive outcomes their input will make to the curriculum of ScotCom. This may include</p>

	<p>using interpreters as a method of translating which is easy and simple to use with an administrator writing down answers given.</p> <p>Additionally, Fife is an ever increasingly diverse area and so we will ensure that our engagement groups mirror that of the community. This means we will learn about the differing healthcare needs of different ethnic and racial groups, and incorporate this into the plan, resulting in positive impact.</p>
<p><b>Sex –</b> <i>think: male and/or female, intersex, Gender-Based Violence</i></p>	<p>The engagement process is to ensure that there is representation from all and that the language and communication used will be non specific to ensure inclusivity.</p> <p>The focus groups that people will be invited to participate in engagement sessions will have appropriately trained staff in attendance where disclosure of health needs impacted by gender can be signposted. Therefore mitigating any potential negative impact.</p>
<p><b>Sexual Orientation -</b> <i>think: lesbian, gay, bisexual, pansexual, asexual, etc.</i></p>	<p>Studies have shown that people with this protected characteristic group often have poorer health outcomes and can struggle to be open about their sexual orientation to their doctor from fear of judgement.</p> <p>This group plans to work with 'The Hive' in Kirkcaldy to participate in events with stage 1 of this project so that as many people as possible will be invited to participate in giving their views on recent healthcare interactions.</p> <p>We anticipate this project to result in improved care and patient experience, therefore meaning an overall positive impact.</p>
<p><b>Religion and Belief -</b> <i>Note: Religion refers to any religion, including a lack of religion. Belief refers to any religious or philosophical belief including a lack of belief.</i>  <i>Think: Christian, Muslim, Buddhist, Atheist,</i></p>	<p>The public partner volunteer planning group will have the opportunity for all faiths and belief groups to offer their thoughts on what they think should be included in the curriculum for Scotcom. This is important for primary care where some cultural practices and beliefs can</p>

<p><i>etc.</i></p>	<p>be integrated into student education so that they can offer a more person centred approach to healthcare. Overall resulting in a positive impact on this protected characteristic group.</p>
<p><b>Gender Reassignment –</b>  <i>Note: transitioning pre and post transition regardless of Gender Recognition Certificate</i>  <i>Think: transgender, gender fluidity, nonbinary, agender, etc.</i></p>	<p>This protected characteristic group is known to have an increased likelihood of poor patient experiences when engaging with health care services, including NHS. It is important we understand the barriers, and experiences of Trans and gender non-conforming people so we can make appropriate improvements.</p> <p>This project will need to further consider how they gather views from this group in order for them to feel safe and heard.</p>
<p><b>Pregnancy and Maternity –</b>  <i>Note: Pregnancy is the condition of being pregnant or expecting a baby. Maternity refers to the period after birth.</i>  <i>Think: workforce maternity leave, public breast feeding, etc.</i></p>	<p>The objectives of this project is to promote accessibility to all those invited in Fife to participate and that there will be suitable facilities and ways to engage to suit parents who otherwise may have other commitments that would stop them from being part of this. Overall, we anticipate a positive impact on this group.</p>
<p><b>Marriage and Civil Partnership –</b>  <i>Note: Marriage is the union between a man and a woman or between a same-sex couple. Same-sex couples can also have their relationships legally recognised as a civil partnership.</i>  <i>Think: workforce, inpatients visiting rights, etc.</i></p>	<p>The engagement process is to ensure that there is representation from all and that the language and communication used will be non specific to ensure inclusivity. Therefore this will have a positive impact across the public partner volunteer planning group.</p>

**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.**

Plan for Fife, Local Improvement Plan for 2017-2027.  
 Health & Social Care Partnership, Strategic Plan for Fife 2023-2026  
 Fife LGBT Community Needs Assessment Report 2016.  
 Gender Recognition Reform (Scotland) Bill 2022.  
 The UNCRC (Incorporation) (Scotland) Act 2024.

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

(Please tick)

Yes	<input checked="" type="checkbox"/>	No	<input type="checkbox"/>
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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 participation & engagement team from Fife HSCP, NHS staff from medical education & University of St Andrews medical school have worked together as a project team to look at how the consultation process will be inclusive and representative from all areas of Fife. This has been done through discussion in several meetings before the consultation takes place over a 6 week period in summer 2024.

Taking into consideration the mitigations from Question 4 a stakeholder list has been compiled and areas identified where protected characteristic groups can be contacted and asked for willing participation.

The data gathered will be anonymised to protect individuals' confidentiality in a public published report; the information will then be used to promote learning in medical student education to improve the communication and health outcomes for protected characteristic groups living in Fife.

**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.

n/a

**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

During the identification of protected characteristics there were solutions identified to mitigate and reduce risks involved for some groups. This includes ensuring communication is inclusive in language, easy to read and held in suitable venues (if not done digitally).

### **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.

n/a

### **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.

n/a

### **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.

n/a


**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](mailto:fife.participationandengagements@nhs.scot) to request community and public representation, and then contact Health Improvement Scotland to discuss further support for participation and engagement.

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