

# **Equality Impact: Screening and Assessment Form**

Section 1: Policy details - policy is shorthand for any activity of the organisation and could include strategies, criteria, provisions, functions, practices and activities including the delivery of our service.		
a. Name of policy or practice (list also any linked policies or decisions)	<ul> <li>Equalities Reports</li> <li>Mainstreaming 2017</li> <li>Equality Outcomes Progress Report 2013 - 17</li> <li>Statement of Equality Outcomes 2017 – 21(main focus of this equality impact assessment)</li> </ul>	
b. Name of department	HR Directorate	
c. Name of Lead	Ann Tobin, Equalities Manager	
d. Equality Impact Assessment Team [names, job roles]	Ann Tobin	
e. Date of assessment	1 March 2017	
f. Who are the main target groups / who will be affected by the policy?	Equality groups –across all the protected characteristics including age, disability, gender reassignment, marriage and civil partnership, pregnancy and maternity, race, religion / belief, sex, sexual orientation,	

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# g. What are the intended outcomes / purpose of the policy?

The Equality Outcome Progress Report illustrates the work we have done during the last four years, the actions that have been taken and the impact made against the outcomes that we had set.

The mainstreaming report illustrates the work that has been taken forward during the last two years to embed equality and diversity in all that we do.

Equality Outcomes have been developed and agreed for the period 2017 - 21 and these are detailed in the Statement of Equality Outcomes. There are seven outcomes which demonstrate how we will focus our work around equality and diversity during the next four years as follows.

# 1.Ultimate outcome

To improve access and referral to the most appropriate care that is person centred, safe and effective

Intermediate outcome

Through raised awareness of the Service there is improved access for under-represented groups.

#### 2. Ultimate outcome

To deliver the best service for patients

Intermediate outcome

The experience of patients will improve through staff who are supported to deliver person centred care.

## 3. Ultimate outcome

To engage with our all our partners and communities to deliver improved healthcare

Intermediate outcome

The SAS is fair and equitable in the way it delivers its services and

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involves and consults people.

#### 4. Ultimate outcome

Men and women employed by SAS are better supported on mental health and wellbeing as a result of the use of workplace policies Intermediate outcome.

There is a cultural change towards a greater understanding of mental health and wellbeing in the workplace.

#### 5. Ultimate outcome

To ensure SAS always acts in accordance with its values Intermediate outcome

The Service is fair and equitable in the way it develops its policies and strategies to ensure staff are treated fairly and consistently, with dignity and respect and in an environment where dignity is valued.

#### 6. Ultimate outcome

The diversity profile of SAS workforce reflects the communities we serve Intermediate outcome

The Service supports and encourages staff and volunteers to provide equality information and increases the diversity profile of the workforce across all equality groups.

## 7. Ultimate outcome

The needs of lesbian, gay, bisexual and transgender staff and service users are consistently met.

Intermediate outcome

SAS is more responsive to the needs of lesbian, gay, bisexual and transgender staff and service users.

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h. Is the policy relevant to the General Duty to	Yes this work is relevant to all three elements of the public castor equality
eliminate discrimination? advance equality of	duty.
opportunity? foster good relations?	
If yes to any of the three needs complete all	
sections of the form (2-7)	
If no to all of the three needs provide brief detail as	
to why this is the case and complete only section 7	
If don't know: complete sections 2 and 3 to help	
assess relevance	

Section 2: Evidence, consultation and involvement			
Please list the available evidence used to assess the impact of this policy, including the sources listed below. Please			
also identify any gaps in evidence and what will be done to address this.			
		nt with community, including individuals or groups or staff as	relevant. Please outline details
of any involvement / consu	Iltation, inc	cluding dates carried out and protected characteristics	
Details of consultations -	Date	Key findings	Protected characteristics
where, who was involved			
Equality & Diversity		<ul> <li>Accessing the service in general and Patient</li> </ul>	Age
Steering Group		Transport Service specifically for disabled patients	Disability
HR team		<ul> <li>Limited awareness of the service within some</li> </ul>	Gender reassignment
National Partnership		communities and there is uncertainty regarding use	Gender / sex
Forum		and access.	Marriage / civil partnership *
Senior Management		<ul> <li>Patient Transport Service not being used by black</li> </ul>	Pregnancy / maternity
Team		and minority ethnic groups, British Sign Language	Race
Executive Team		users and disabled.	Religion / belief
Staff Governance		<ul> <li>2020 Vision for Health and Social Care to live</li> </ul>	Sexual orientation
Committee		longer healthier lives at home, or in a homely	Cross cutting - e.g. health

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Staff through the intranet Members of the public via the website Equalities groups including Stonewall Scotland, LGBT Youth Scotland, Positive Action in Housing, Scottish Disability Equality Forum, Renfrewshire Access	setting, with focus on prevention, anticipation and supported self management.  - Mental health is an issue for our workforce and remains the most common reason for absence and understanding mental health issues requires development and support for staff  - The workforce is not very diverse  - Self disclosure rates are low particularly for sexual orientation and religion and belief and there are	inequalities - people with poor mental health, low incomes, involved in the criminal justice system, those with poor literacy, are homeless or those who live in rural areas.  Other?
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in Housing, Scottish		Other?
Disability Equality Forum,	orientation and religion and belief and there are	
Renfrewshire Access	gaps across protected characteristics	
Panel, Ahlul Bayt Society	<ul> <li>The percentage of staff who have provided all</li> </ul>	
Edinburgh, Scottish	equalities information is still relatively low.	
Youth Parliament	- There is evidence to suggest that attitudes towards	
	lesbian, gay, bisexual and transgender people from	
	a service and workforce perspective is poor.	

	Available evidence
b. Research and relevant information	<ul> <li>Equality Impact Assessments</li> <li>Health outcomes information and prevalence of long term conditions / health inequalities in different population groups / deprived areas, e.g. Audit Scotland Report - Health Inequalities in Scotland</li> <li>Patient Focus Public Involvement data and feedback</li> <li>Community engagement through divisions, community resilience and national service development work</li> <li>The ageing population is leading to an increase in the</li> </ul>
	<ul> <li>The ageing population is leading to an increase in the number of people with dementia (5% of people over 65</li> </ul>

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	and 20% of those over 80 years of age)  Research shows lesbian and bisexual women have higher levels of self harm compared to the general population and that there is a higher risk of gay men harming themselves  The Healthcare Quality Strategy for NHS Scotland Is Scotland Fairer? Report EHRC  Population data and census reports  Health & Social Care Delivery Plan  Health Scotland report on Mental Health improvement and practice  Stonewall Scotland research reports  Equality Network reports  Scottish Transgender Alliance research  Sickness absence details  Findings from special board equality leads consultation with Trades Unions and groups representing staff.  Staff surveys  Training feedback  Equality monitoring data
c. Knowledge of policy lead	The equalities reports need to be in place to ensure the Service is able to meet the requirements of the Equality Act 2010 (Specific Duties) (Scotland) Regulations 2012 and to publish these by 30 April 2017.
d. Equality monitoring information including service and	Workforce Equality Monitoring Report 2015 16
employee information	Limited service user information.
e. Feedback from service users, partner or other organisations	A variety of groups have been consulted on the contents of the
as relevant	equality outcomes including staff. Key areas related to the

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	accessibility of the service for disabled people in general including access to Patient Transport Service. Awareness of the services provided by Scottish Ambulance Service and understanding when and how to use the Service.
f. Other	
g. Are there any gaps in evidence? Please indicate how these	Not at the present time.
will be addressed	
Gaps identified	
Measure to address these; give brief details.	
Further research?	
Consultation?	
Other	
Note: specific actions relating to these measures can be listed a	at section 5

Protected characteristics	i. Eliminating	ii. Advancing equality of	iii. Fostering good relations
	discrimination	opportunity	
Age			
Positive impacts	People of all ages are encouraged and supported to become involved with the wor Service.		involved with the work of the
	Our work with Gypsy Travellers in Fife has impact older members of the community as they are supported to access NHS services.		

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	65 and over.
	The review of the patient needs assessment process for Patient Transport Service has a greater impact for those who use this service, a high proportion of which are over the age of 65.
	The patient needs assessment for booking Patient Transport Service will be reviewed and enhanced.
Negative impacts	
Opportunities to enhance equality	When we publish our equalities reports this is an opportunity to raise the profile of the work we are doing. Our future engagement with community groups will help to improve understanding of the work SAS does and the way patents / members of the public can access our services and be more involved in the work we do.
Disability	
Positive impacts	Engaging with disabled groups and those representing them helps to increase understanding of the needs of disabled people.
	Disabled people are supported to become involved in the work of the Service.
	Through engagement with disabled groups health awareness information is provided, e.g. cardiac arrest, stroke etc which help improves understanding as well preventative care.
	Care pathways e.g. for falls patients are in place which have impact particularly for those aged 65 and over and those who have disabilities / long term condition.
	It is anticipated that the communication needs of patients will be detailed routinely on the Key Information Summary completed by GP and used by SAS staff.
	An accessible communications policy will be in place to cover interpretation, translation and patient information.

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	Call taking training for booking transport will include more detailed information regarding disability awareness.
	New methods of booking transport will be developed to support access for those patients who are deaf.
	The patient needs assessment for booking Patient Transport Service will be reviewed and enhanced.
	The 'See me' programme will be implemented.
	Mental health first aid course will be implemented. We will engage with staff to identify actions to encourage a more diverse mix of applicants for vacant posts
	Health and wellbeing is promoted across the Service through the healthy working lives programme.
	Recruitment advertising is targeted to encourage more applications from diverse groups.
Negative impacts	
Opportunities to enhance equality	When we publish our equalities reports this is an opportunity to raise the profile of the work we are doing. Our future engagement with community groups will help to improve understanding of the work SAS does and the way patents / members of the public can access our services and be more involved in the work we do
Gender reassignment	
Positive impacts	The 'Nobystanders' campaign will be promoted.
Negative impacts	There is potential for negative impact as there is limited activity planned specifically under gender reassignment.

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Opportunities to enhance equality	When we publish our equalities reports this is an opportunity to raise the profile of the work we are doing. Our future engagement with community groups will help to improve understanding of the work SAS does and the way patents / members of the public can access our services and be more involved in the work we do
Gender / sex	
Positive impacts	Information will be gathered on key conditions to identify differences experienced by men and women.
	The 'See me' programme will be implemented.
	Mental health first aid course will be implemented.
	HR policies will be promoted to support access and uptake for staff, e.g. flexible working
	More men and women will be employed on permanent shift patterns.
	Gender occupational analysis will be undertaken to identify actions to be taken to improve gender equality.
	Access to career development particularly for part time staff will be monitored.
Negative impacts	
Opportunities to enhance equality	When we publish our equalities reports this is an opportunity to raise the profile of the work we are doing. Our future engagement with community groups will help to improve understanding of the work SAS does and the way patents / members of the public can access our services and be more involved in the work we do.  Highlighting this work for staff will raise awareness and give equalities work in general more prominence.
Marriage / civil partnership	
Positive impacts	The 'Nobystanders' campaign will be promoted
Negative impacts	There is potential for negative impact as there is no activity planned under marriage and civil

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	partnership
Opportunities to enhance equality	
Pregnancy / maternity	
Positive impacts	
Negative impacts	There is potential for negative impact as there is limited activity planned under pregnancy and maternity
Opportunities to enhance equality	
Race	
Positive impacts	Language line service will be regularly evaluated and issues investigated to ensure a competent service is provided for anyone whose first language is not English.
	Our work with Gypsy Travellers in Fife has impact older members of the community as they are supported to access NHS services.
	An accessible communications policy will be in place to cover interpretation, translation and patient information.
	A cab based language tool will be developed.
	A plan to improve self disclosure of equality monitoring information will be put in place
	The breadth of engagement will be extended across black and minority ethnic groups. We will engage with staff to identify actions to encourage a more diverse mix of applicants for vacant posts.
	Recruitment advertising is targeted to encourage more applications from diverse groups.
Negative impacts	

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Opportunities to enhance equality	When we publish our equalities reports this is an opportunity to raise the profile of the work we are doing. Our future engagement with community groups will help to improve understanding of
oquanty	the work SAS does and the way patents / members of the public can access our services and be
	more involved in the work we do.
Religion / belief	
Positive impacts	A plan to improve self disclosure of equality monitoring information will be put in place
	The 'Nobystanders' campaign will be promoted.
Negative impacts	There is potential for negative impact as there is limited activity planned under religion and belief.
Opportunities to enhance	When we publish our equalities reports this is an opportunity to raise the profile of the work we
equality	are doing. Our future engagement with community groups will help to improve understanding of
	the work SAS does and the way patents / members of the public can access our services and be
	more involved in the work we do.
Sexual orientation	
Positive impacts	The 'See me' programme will be implemented.
	Mental health first aid course will be implemented.
	A plan to improve self disclosure of equality monitoring information will be put in place.
	We will engage with staff to identify actions to encourage a more diverse mix of applicants for vacant posts.
	Recruitment advertising is targeted to encourage more applications from diverse groups.
	Specific lesbian, gay, bisexual, transgender, intersex e-learning tool will be implemented.
	The 'Nobystanders' campaign will be promoted.
Negative impacts	

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Opportunities to enhance equality	When we publish our equalities reports this is an opportunity to raise the profile of the work we are doing. Our future engagement with community groups will help to improve understanding of the work SAS does and the way patents / members of the public can access our services and be more involved in the work we do.
Cross cutting - e.g. health inequalities people with poor mental health, low incomes, involved in the criminal justice system, those with poor literacy, are homeless or those who live in rural areas.  Other	Work around our wellbeing strategy will be progressed.
Positive impacts	
Negative impacts	
Opportunities to enhance equality	
Note: specific actions relating	to these measures can be listed at section 5

Section 4: Addressing impacts Select which of the following apply to your police plan	cy and give a brief explanation - to be expanded in Section 5: Action
	Reasons
a. <b>No major change</b> - the EQIA shows that the policy is robust, there is no potential for discrimination or adverse impact and all opportunities to promote equality have been taken	It is considered that the equality reports are fit for purpose and meet the requirements of the Equality Act 2010 (Specific Duties) (Scotland) Regulations 2012.
b. <b>Adjust the policy</b> – the EQIA identifies potential problems or missed opportunities and	

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you are making adjustments or introducing new	
measures to the policy to remove barriers or	
promote equality or foster good relations	
c. Continue the development and	
implementation of the policy without	
adjustments – the EQIA identifies potential for	
adverse impact or missed opportunity to promote	
equality. Justifications for continuing without	
making changes must be clearly set out, these	
should be compelling and in line with the duty to	
have due regard. See option d. if you find unlawful	
discrimination. Before choosing this option you	
must contact the Equalities Manager to discuss	
the implications.	
d. Stop and remove the policy - there is actual	
or potential unlawful discrimination and these	
cannot be mitigated. The policy must be stopped	
and removed or changed. Before choosing this	
option you must contact the Equalities Manager to	
discuss the implications.	

Section 5: Action plan Please describe the action that will be taken following the assessment in order to reduce or remove any negative / adverse impacts, promote any positive impacts, or gather further information or evidence or further consultation					
Action	Output	Outcome	Lead responsible	Date	Protected characteristic / cross cutting issue*
Reports presented to Staff		For endorsement	Equalities Manager	January 2017	All protected characteristics

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Governance				
Reports presented	For approval	Equalities Manager	March 2017	All protected
to the Board				characteristics
4114 111 1	 P 1 20%			

<sup>\*</sup> list which characteristic is relevant - age, disability, gender reassignment, gender / sex, marriage and civil partnership, pregnancy and maternity, race, religion / belief, sexual orientation or cross cutting issue e.g. poor mental health, illiteracy etc

Section 6: Monitoring and review			
Please detail the arrangements for review and monitoring of the policy			
	Details		
a. How will the policy be monitored? Provide dates	Through Staff Governance Committee		
as appropriate			
b. What equalities monitoring will be put in place?	Workforce equality monitoring		
	Use of limited patient equality monitoring		
c. When will the policy be reviewed? Provide a	Mainstreaming report – 2019		
review date.	Equality outcomes progress report 2019		
	New equality outcomes will be developed and published for the period		
	2021 – 25 by April 2021.		

Section 7: Sign off			
Please provide signat	ures as appropriate		
Name of Lead	Title	Signature	Date
Ann Tobin	Equalities Manager		01.03.17
Completed form: copy	of completed form to be retained	by department and copy forwa	arded to Equalities Manager for
publication on Service	website		· · · · · · · · · · · · · · · · · · ·
Provide date this was s	ent		

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