

Equality Impact Assessment Document (EQIA)

Please complete electronically and answer all questions unless instructed otherwise.

Section A

Q1: Name of EQIA being completed i.e. name of policy, function etc.

Clackmannanshire & Stirling Health and Social Care Partnership draft Participation & Engagement Strategy

Q1 a; Function **Guidance** **Policy** **Project** **Protocol** **Service** **Other, please detail**

Q2: What is the scope of this SIA

Service Specific Discipline Specific Other (Please Detail)

Clackmannanshire & Stirling Health and Social Care Partnership
Adult & older adult services.

Q3: Is this a new development? (see Q1)

Yes No

Q4: If no to Q3 what is it replacing?

Q5: Team responsible for carrying out the Standard Impact Assessment? (please list)

Lesley Fulford, Programme Manager, Clackmannanshire & Stirling Health and Social Care Partnership
Chris Sutton, Service Manager, Strategy, Clackmannanshire & Stirling Councils
Divya Prakash, Organisational Development Advisor, Clackmannanshire & Stirling Health and Social Care Partnership
Elizabeth Rowlett, Engagement Officer, Clackmannanshire Third Sector Interface
Polly Roger, Engagement Officer, Stirling Voluntary Enterprise

Q6: Main person completing EQIA's contact details

Name:

Telephone Number:

Department:

Email:

Q7: Describe the main aims, objective and intended outcomes

The scope of the health and social care partnership is adults and older adults.

The **participation and engagement vision** is that those who use health and social care services, carers, the public will be engaged and involved with representatives from the key stakeholders in improving local service delivery.

Principles

Together we will ensure participation of all stakeholders by:

- Ensuring participation and engagement is accessible; identifying and overcoming any barriers to involvement.
- Ensuring participation and engagement is driven by local needs. We will also ensure area-wide coordination of common key messages and participation and engagement activities across the Forth Valley area.
- Developing the knowledge, skills and confidence of all participants.
- Working towards a language that is shared across agencies and professions.
- Learning from experience, sharing information and feeding back the results of all engagement and participation activities to the wider community.
- Providing people with feedback, demonstrating how their views have been considered and any telling them about any changes that have been made following their input.
- Utilising a wide range of formats to communicate, consult and engage in a timely manner.
- Using a stakeholder approach to participation and engagement for the Partnership in its widest sense (e.g. service users, unpaid carers, third sector, independent sector, staff and providers).
- Proactively seeking input to shape direction and facilitate coproduction particularly in relation to (to different extents regarding legal frameworks):
 - What enables: timely, wide channels, what enables delivery against commitments
 - Clarity of expectations
- Ensuring clarity of purpose and scope in all communications and face-to-face interactions (e.g. for information, for engagement).
- Emphasising individual responsibility to actively engage with the information provided and the opportunities for getting involved.
- Ensuring robust accountability and governance of the Participation and Engagement strategy for delivery against the agreed key principles.
- Where service change is proposed that will have an impact on staff members of either Council or NHS Forth Valley, early engagement will take place with relevant parties.

Objectives

This is the first Participation & Engagement Strategy for the Clackmannanshire and Stirling Integration Joint Board and it builds on existing good practice. These objectives will be used to measure the delivery of the Strategy:

- Ensure that those who use services and their unpaid carers are at the heart of service design , planning and delivery;
- Ensure that diverse perspectives are represented;
- Ensure that feedback and information gathered is used to support creativity, innovation and service change;
- Encourage participation by groups that can be difficult to reach, where there may be barriers to engagement;
- Ensure that the necessary resources are available to support participation and engagement, specifically with groups that can be difficult to reach;
- Use the data equalities and demographic data published in the Strategic Needs Assessment to inform engagement activities and approaches.

Q8:

(i) Who is intended to benefit from the function/service development/other (Q1) – is it staff, service users or both?

Staff Service Users Other Please identify ___ Providers, third sector, independent sector

(ii) Have they been involved in the development of the function/service development/other?

Yes

No

(iii) If yes, who was involved and how were they involved? If no, is there a reason for this action?

Comments:

A wide range of stakeholders have been involved in the development of the draft Participation & Engagement Strategy through membership of the Participation and Engagement work stream. The development of the Strategy has been informed by the Strategic Needs Assessment.

The Strategy has been developed in partnership, involving a range of groups and partners across the Clackmannanshire and Stirling area. The steps undertaken to develop this strategy include:

- Establishment of a Participation and Engagement work stream and working group, involving representatives from a range of groups and partners across the Clackmannanshire and Stirling area (Appendix II lists the members of the work stream)
- Development and agreement on high level principles for Participation and Engagement for the Partnership
- A comprehensive review of existing literature and strategies in relation to Participation and Engagement in the Public Sector and amongst communities
- A facilitated workshop with members of the Participation and Engagement work stream, capturing their views in relation to the content of this strategy, i.e.
 - Drivers that influence participation and engagement
 - Our vision and principles that are important to adopt in relation to participation and engagement
 - Our overarching objectives and a summary of next steps and the support available in the implementation of this strategy.

(iv) Please include any evidence or relevant information that has influenced the decisions contained in this SIA; (this could include demographic profiles; audits; research; published evidence; health needs assessment; work based on national guidance or legislative requirements etc)

Comments:

Please also see the Public Bodies (Joint Working)(Scotland) Act (2014) and supporting orders which sets out the legislative requirements for the partnership in relation to the Participation and Engagement Strategy.

Please see the draft Strategic Needs Assessment for details of the population, including: age, gender, ethnic origin, religion, sexual orientation, population projections, physical disability, learning disability, mental health and wellbeing.

Q9: When looking at the impact on the equality groups, you must consider the following points in accordance with General Duty of the Equality Act 2010 see below:

In summary, those subject to the Equality Duty must have due regard to the need to:

- eliminate unlawful discrimination, harassment and victimisation;
- advance equality of opportunity between different groups; and
- foster good relations between different groups

Has your assessment been able to demonstrate the following: Positive Impact, Negative / Adverse Impact or Neutral Impact?

What impact has your review had on the following 'protected characteristics':	Positive	Adverse/ Negative	Neutral	Comments Provide any evidence that supports your conclusion/answer for evaluating the impact as being
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				positive, negative or neutral (do not leave this area blank)
Age	x			<p>The participation and engagement strategy has been developed based on the principles and standards set out in the community engagement standards and the participation standard.</p> <p>Our approach is based on 13 principles, outlined at Q7. We will have a positive impact on age as we will ensure participation and engagement is accessible, learn from experience, provide feedback, utilise a wide range of formats to communicate.</p>
Disability (incl. physical/ sensory problems, learning difficulties, communication needs; cognitive impairment)	x			<p>Our approach is based on 13 principles, outlined at Q7. We will have a positive impact on disability as we will ensure participation and engagement is accessible, learn from experience, provide feedback, utilise a wide range of formats to communicate.</p>
Gender Reassignment			x	<p>Our approach is based on 13 principles, outlined at Q7. Assessed as neutral impact</p>
Marriage and Civil partnership			x	<p>Our approach is based on 13 principles, outlined at Q7. Assessed as neutral impact</p>
Pregnancy and Maternity			x	<p>Our approach is based on 13 principles, outlined at Q7. Assessed as neutral impact</p>
Race/Ethnicity	x			<p>Our approach is based on 13 principles, outlined at Q7. We will have a positive impact on race/ethnicity as we will ensure participation and engagement is accessible, learn from experience, provide feedback, utilise a wide range of formats to communicate and engage with specific groups in the communities.</p>
Religion/Faith	x			<p>Our approach is based on 13 principles, outlined at Q7. We will have a positive impact on religion/faith as we will ensure participation and engagement is accessible and engage with specific groups in the communities</p>
Sex/Gender	x			<p>Our approach is based on 13 principles, outlined at Q7. We will have a positive impact on sex/gender as we will ensure participation and engagement is accessible and engage with specific groups in the communities</p>
Sexual orientation	x			<p>Our approach is based on 13 principles, outlined at Q7. We will have a positive</p>

				impact on sexual orientation as we will ensure participation and engagement is accessible and engage with specific groups in the communities
Staff (This could include details of staff training completed or required in relation to service delivery)	x			Our approach is based on 13 principles, outlined at Q7. An implementation plan will be developed over the coming year. We anticipate that this will have a positive impact on staff as we will ensure participation and engagement is accessible, work towards a common language and understanding, learn from experience, provide feedback, utilise a wide range of formats to communicate.

Cross cutting issues: Included are some areas for consideration. Please delete or add fields as appropriate. Further areas to consider in Appendix B				
Unpaid Carers	x			Our approach is based on 13 principles, outlined at Q7. We will have a positive impact on unpaid carers as we will ensure participation and engagement is accessible, work towards a common language, learn from experience, provide feedback, utilise a wide range of formats to communicate.
Homeless	x			Our approach is based on 13 principles, outlined at Q7. We will have a positive impact on homeless people as we will ensure participation and engagement: is accessible and engage with specific groups who may be affected by homelessness
Language	x			Our approach is based on 13 principles, outlined at Q7. We will ensure participation and engagement is accessible and utilise a wide range of formats to communicate.
Literacy	x			Our approach is based on 13 principles, outlined at Q7. We will ensure participation and engagement is accessible and utilise a wide range of formats to communicate.
Low income/poverty	x			Our approach is based on 13 principles, outlined at Q7. We will ensure participation and engagement is accessible and utilise a wide range of formats to communicate.
Rural Areas	x			Our approach is based on 13 principles, outlined at Q7. We will ensure participation and engagement is accessible.

**Q10: If actions are required to address changes, please attach your action plan to this document.
Action plan attached?**

Yes

No

Q11: Is a detailed EQIA required?

Yes

No

Please state your reason for choices made in Question 11.

N.B. If the screening process has shown potential for a high negative impact you will be required to complete a detailed impact assessment.

Date EQIA Completed

DD / MM / YYYY

Date of next EQIA Review

DD / MM / YYYY

Signature

Print Name

Department or Service

Please keep a completed copy of this template for your own records and attach to any appropriate tools as a record of SIA or EQIA completed. Send copy to leigh.fagn@nhs.net

B: Standard/Detailed Impact Assessment Action Plan

Name of document being EQIA'd:

Date	Issue	Action Required	Lead (Name, title, and contact details)	Timescale	Resource Implications	Comments
DD / MM / YYYY	Action Plan	As identified in the strategy an action plan will be required to drive implementation.		March 2017		
DD / MM / YYYY						
DD / MM / YYYY						
DD / MM / YYYY						
DD / MM / YYYY						
DD / MM / YYYY						

Further Notes:

Signed:

Date: