# Impact Assessment Toolkit Form

Update as at March 2018



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## Section 1 : General Information

	Guidance
Name of project: Development of Dumfries and Galloway IJB Plan for Palliative Care	The word project is used throughout this document for ease but it could also be a policy, strategy, plan, project or budget option (saving or income generation).
2. Is this project: ✓ new □ reviewed	
<ol> <li>Lead Service(s) involved in the delivery of this project: Strategic Planning and Commissioning on behalf of the Integration Joint Board and Macmillan Cancer Support</li> </ol>	
<ol> <li>Who else is involved in the implementation of this project: Cross sector and interdisciplinary services and partners. NHS Dumfries and Galloway, Dumfries and Galloway Council, Third and Independent Sector organisations.</li> </ol>	e.g. other Services or partner agencies
5. Lead person: Vicky Freeman, Head of Strategic Planning Liz Forsyth, Palliative Care Project Lead	The lead person should be someone who has a good knowledge of the project to be assessed and has been trained in the toolkit.
6. Names and organisations of those involved in the process:  DG Voice	The tool should be completed by no fewer than two people. It is good practice to involve stakeholders and in particular the relevant Equality and Diversity
Older People's Consultative Group and Day Centre Network Dumfries and Galloway Carers Centre User and Carer Involvement	Group(s) must be involved.
Dumfries Prison Service Learning Disability Team (NHS)	
Macmillan Improvement Project: Public Engagement Group	
7. Date of Impact Assessment (IA): 19 November 2019	

8. Do all participants understand the Guidance?  ✓ Yes	The lead person should check all attending have read and understood the purpose or process of IA

### **Section 2 : Aims of the project**

# 9 What are the main aims of the project? Please list **Aims**

- people have local access to timely palliative care and support
- people's experience of palliative care and support is improved
- people, their families and Carers (including Young Carers) are able to have timely conversations with all those involved
- needs and preferences are met
- a better, shared understanding of what palliative care and support is and how it can impact positively on quality of life
- health and social care professionals are supported to identify people with palliative care and support needs at an early stage
- we are able to sustain provision of high quality palliative care and support in the region

#### Why?

- to make sure we meet the palliative care needs of the population of Dumfries and Galloway and make most effective use of our resources.
- to meet the outcomes of the Scottish Government Strategic Framework for Action on Palliative and End of Life Care 2016-2021 and other key local and national documents

Ambitions/outcomes contributing to organisational objectives/priorities Everyone in Dumfries and Galloway who needs palliative care and support will have access to it.

People who need palliative care and support are

identified at an early stage

#### Guidance

This should describe the project and what you are trying to do. Think about:

- Why is it needed?
- What outcomes does the organisation hope to achieve by it?

In particular will the policy contribute to the organisations' Objectives/Priorities, the Single Outcome Agreement and/or Health and Social Care Integration?

<ul> <li>enabled to express their wishes and preference</li> <li>able to access high quality, effective support</li> <li>enabled to live and die well</li> <li>The above ambitions also support the Scottish Go and Wellbeing Outcomes; 1, 2, 3, 4, 8 and 9.</li> </ul>		
10 Will the project assist in meeting the aims of legiture of the Yes □ No  Give details (a) The Equality Act 2010 (b) Human Rights Act 1998	ve details (a) The Equality Act 2010 ✓	
<ul><li>(c) Climate Change Scotland Act 2009</li><li>(d) Environmental Assessment</li><li>(Scotland) Act 2005</li></ul>		

## **Section 3 : Evidence**

	Guidance
11 What evidence has or will be used to identify any potential positive or negative impacts?	Evidence could be based on a specific geographical area or a community of interest and could include consultations, surveys, focus groups, interviews, pilot
Insert details in the boxes below (a) to (e):	projects, user feedback (inc. complaints made), officer knowledge and experience, equalities monitoring data, academic publications, consultants' reports, etc. Also identify where there are gaps in the evidence and set out how these will be filled.
(a) Involvement in development of the plan A wide range of stakeholders (listed in the Statement of Consultation) including those delivering and those receiving palliative care and support have been involved in developing the plan.	Who has been involved in the development so far of your project?
(b) Research Local and national strategies and frameworks have been researched during the development of the plan. Research using local and national sources such as the National Records of Scotland has helped to ensure the demographic and financial information is as up to date as possible.	Have you conducted any research or what research are you using?
(c) Officer/Practitioner knowledge and experience The Head of Strategic Planning, Strategy Development Group, Palliative Care Steering Group and Editing group have a wealth of knowledge and experience of strategy development.	What expertise or individual information are the group using to inform their judgements?
The Project Lead has undertaken Consultation Institute training to ensure the consultation process is inclusive, supportive, well planned, effective, fit for purpose and well communicated. This has ensured that the process and the plan have been developed using appropriate methods and skills.	
(d) Monitoring data National and local data has been collated via Health Intelligence and presented within the draft strategy to inform the group.	What data is available locally or nationally to inform the group?

#### (e) Feedback

Feedback (positive and negative) in the form of notes of meetings and focus groups, email responses and comments made during informal meetings with teams and one-to-one meetings with individuals, was presented in a report at the end of the consultation period.

What feedback is available to inform the IA? e.g. both positive and negative users experiences of the project – surveys, Board or Elected Members enquiries and comments etc

### **Section 4: Impact Areas**

This section covers the Protected Characteristics, Human Rights, health, climate change and sustainable development.

#### 12 **AGE**

This refers to children and adults of a particular age or age range.

Remember different age groups have different concerns e.g.

- violence is more likely to happen to you if you are a young man but the fear of crime can be debilitating if you are an older or lone woman.
- can all age groups access your service even on a dark winter night?
- children (people under 18) have a right to advice and information but this may need to be in a different format from the same information directed at adults
- when considering age/ children remember that some children are more vulnerable or have particular issues that may need additional consideration, for example children in poverty or Looked After Children (LAC).

Useful website: <u>UN Convention on the Rights of the Child</u> <u>Age UK</u>

Indicate if the impact is positive or negative or if there is no impact	Positive Impact	No Impact	Negative Impact	Comments
<ul> <li>Eliminate discrimination, harassment, victimisation or any other prohibited conduct Advance equality of opportunity by having due regard to:         <ul> <li>removing or minimising disadvantage</li> <li>meeting the needs of particular groups that are different from the needs of others</li> <li>encouraging participation in public life</li> <li>Foster good relations – tackle prejudice, promote understanding</li> </ul> </li> </ul>	✓	<b>√</b>		Recognition that there are increasing numbers of older people who are in receipt of care but also many who provide unpaid care. The Dumfries and Galloway Carers Centre highlighted that Carers can be any age and include Young Carers and Young Adult Carers. Where permission is given, Carers should be referred to the centre so that they can get support in their role.  Anticipatory Care Planning (ACP) is being encouraged and supported for people of all ages that have life limiting conditions.  Dementia should be recognised more widely as an illness requiring palliative care and support.

	Neither the plan nor the Equality Impact Assessment includes palliative care provided for children. Children's Hospice Across Scotland (CHAS) are funded directly by the Scotlish Government to lead on palliative care for children who are Young Cores or are
	The plan does include children who are Young Carers or are experiencing bereavement following palliative illness of a family
	member or loved one.

#### 13 **DISABILITY**

A person has a disability if they have a physical or mental impairment (including learning disabilities) which has a substantial and long-term adverse effect on that person's ability to carry out normal day-to-day activities.

- How does this project affect disabled people in Dumfries and Galloway?
- Is there any reason to believe that disabled people are being, or could be, adversely affected by this project?
- Are there any impairment groups who are particularly adversely affected by the project?
- Could your project adversely affect individuals as a result of something arising from their disability?
- Does your project ensure that the rights of people with learning disabilities to dignity, equality and non-discrimination are respected and upheld?

Useful websites and publications: <u>Disability Rights</u> <u>Equality and Human Rights Commission</u> <u>DGVoice</u>

Keys to Life Report- Improving Quality of Life for People with Learning Disabilities

Indicate if the impact is positive or negative or if there is no impact	Positive Impact	No Impact	Negative Impact	Comments
Eliminate discrimination, harassment, victimisation or any other prohibited conduct Advance equality of opportunity by having due regard to:  • removing or minimising disadvantage  • meeting the needs of particular groups that are different from the needs of others  • encouraging participation in public life Foster good relations – tackle prejudice, promote understanding		<b>√</b>		Engagement with clinicians gave insight into issues for people with long-term conditions including palliative care needs – Heart Failure Specialist Nurses, Renal Team, MS Nurses, Respiratory Ward – recognition that it is not cancer specific  Learning Disability Team (LDT) highlighted that people with LD are more likely to have poorer health and may find it harder to communicate or understand what is wrong when they are unwell. LDT support will be sought to help produce an Easy Read version of the Plan for Palliative Care. Visibility Scotland will support their members by providing a 'reader' compatible version.  It is important that people have access to information in the most accessible format and can get it from the most appropriate service for them.  Various events such as Visibility / Alzheimer's Carers

	meetings have ensured people with disabilities and their Carers have opportunities to engage and input into the Plan.
	Opportunities to engage through 1-2-1 meetings and phone conversations were available for those who would otherwise be unable to do so.

#### 14 SEX (GENDER)

This covers biological sex - whether you are a man, a woman or non-binary. Non-binary is used for people who don't feel male or female; they may feel like both, or something in between, or they may not relate to gender at all. Some prefer to use the pronoun "they" rather than he or she.

e.g. does the function or project take account of different roles and responsibilities? does it assume, perhaps wrongly, that men for example, have no caring responsibilities? is the function or project flexible enough to provide a service that everyone can access?

Useful websites: Scottish Women's Convention Fawcett Society Engender Equality and Human Rights A Voice for Men

Indicate if the impact is positive or negative or if there is no impact	Positive Impact	No Impact	Negative Impact	Comments
Eliminate discrimination, harassment, victimisation or any other prohibited conduct		<b>√</b>		No specific issues were raised around this characteristic.
Advance equality of opportunity by having due regard to:  • removing or minimising disadvantage	✓			It is recognised that gender identity could be a potential issue in relation to accessing care and support. The plan is written in gender neutral terms.
<ul> <li>meeting the needs of particular groups that are different from the needs of others</li> <li>encouraging participation in public life</li> <li>Foster good relations – tackle prejudice, promote understanding</li> </ul>	✓			According to census data, more Carers identify as female than male, however, no assumptions are made in the plan in relation to different roles and responsibilities based on gender.

#### 15 **GENDER REASSIGNMENT (TRANSGENDER IDENTITY)**

This covers both:

- **Gender reassignment**, which is the process of transitioning from one gender to another. Individuals in this category are often termed transsexual. Gender reassignment does not need to involve any medical supervision or surgical procedures; it could simply involve a permanent change of the social gender role in which the person lives their life, (for example through a permanent change of name and the way they dress).
- Other transgender identities such as polygender, androgyne, intersex, cross-dressing and transvestite people. The terms transgender and trans are both widely used by equality organisations to refer to a diverse range of people who find their gender identity does not fully correspond with the sex they were "assigned" at birth. Although the term transgender does refer in part to transsexual people (see above), not all transgender people will undergo the process of gender reassignment, but may face similar barriers to access.
- e.g. does your project, function or service include people of different gender identities? Will your facilities impede transgender individuals in any way?

Useful websites: Equality and Human Rights Transgender Equality and Rights Equality Network LGBT Youth

Indicate if the impact is positive or negative or if there is no impact	Positive Impact	No Impact	Negative Impact	Comments
Eliminate discrimination, harassment, victimisation or any other prohibited conduct Advance equality of opportunity by having due regard to:  • removing or minimising disadvantage  • meeting the needs of particular groups that are different from the needs of others  • encouraging participation in public life Foster good relations – tackle prejudice, promote understanding	✓	•		No specific issues were raised around this characteristic – this does not mean we should be complacent. Project linked with LGBT+ – survey and invitation to engage circulated.  Encouraging people to complete Anticipatory Care Plans (ACP) and Power of Attorney (POA) will ensure care and support providers understand and recognise the person's needs and concerns, including their gender identity.  Recognition that presenting with 'gender specific' conditions such as prostate issues may cause distress for transgender women as the clinic may be perceived as male orientated.

#### 16 MARRIAGE AND CIVIL PARTNERSHIP

The rights and responsibilities that come with marriage and civil partnership are almost identical although civil partnerships in Scotland are currently only available to same-sex couples.

Under the Equality Act 2010 it is unlawful discrimination for people who are married or in a civil partnership to be treated less favourably in employment than people who are not married or in a civil partnership.

Equality legislation also protects people in relation to sexual orientation, which means that you cannot be treated less fairly as a same-sex couple than a mixed-sex couple would be treated.

#### Useful websites:

Registration – Getting Married or Registering a Civil Partnership in Scotland Marriage and Civil Partnership in Scotland

Indicate if the impact is positive or negative or if there is no impact	Positive Impact	No Impact	Negative Impact	Comments
Eliminate discrimination, harassment, victimisation or any other prohibited conduct Advance equality of opportunity by having due regard to:  • removing or minimising disadvantage  • meeting the needs of particular groups that are different from the needs of others  • encouraging participation in public life Foster good relations – tackle prejudice, promote understanding	✓	•		No specific issues were raised around this characteristic. The plan is respectful of individual people and relationships and care and support should be delivered with no favour or discrimination on the basis of marital status.  The plan highlights that people should complete ACP's and POA to support more choice and control in relation to their needs and wishes, regardless of their marital/partnership status.  The plan focuses on a person centred approach which
				discourages assumptions about relationship status.

#### 17 PREGNANCY AND MATERNITY

Pregnancy is the condition of being pregnant/expecting a baby. Maternity refers to the period after the birth. Protection against maternity discrimination covers 26 weeks after giving birth, and this includes treating a woman unfavourably because she is breastfeeding.

e.g. Do you provide facilities for breastfeeding mothers?

Useful websites:

Maternity Pay and Leave
Maternity Leave and Pay – ACAS

Indicate if the impact is positive or negative or if there is no impact	Positive Impact	No Impact	Negative Impact	Comments
Eliminate discrimination, harassment, victimisation or any other prohibited conduct Advance equality of opportunity by having due regard to:  • removing or minimising disadvantage  • meeting the needs of particular groups that are different from the needs of others  • encouraging participation in public life Foster good relations – tackle prejudice, promote understanding		✓ ✓		No specific issues have been raised in relation to Pregnancy or Maternity.  The Breastfeeding etc (Scotland) Act 2005 made it an offence to prevent or stop a person feeding milk to their child (under 2) in a public place. This includes hospitals and other locations where someone could be accessing palliative care and support.

#### 18 **RACE**

This refers to a group of people defined by their ethnic or national origins, race, colour, and nationality (including citizenship). All minority race and ethnic groups are covered including, for example, gypsies and travellers, Jews, English as well as visible minority groups like African, Caribbean and Asian.

Consider the impact your function or project has on someone from a minority ethnic group. Remember the impact may differ depending on the gender, disability, faith, sexual orientation or age of the person as different cultures have different views on what is acceptable.

e.g. What about language and information? Is it in the right format?

Useful websites: Equality and Human Rights BEMIS – Scotland's Ethnic & Cultural Minority Communities CEMVO

Indicate if the impact is positive or negative or if there is no impact	Positive Impact	No Impact	Negative Impact	Comments
Eliminate discrimination, harassment, victimisation or any other prohibited conduct Advance equality of opportunity by having due regard to:  • removing or minimising disadvantage  • meeting the needs of particular groups that are different from the needs of others  • encouraging participation in public life  Foster good relations – tackle prejudice, promote understanding	✓	✓		No specific issues were raised around this characteristic.  Meetings with the Multicultural Association members and gypsy traveller community in Dumfries highlighted that cultural beliefs and requirements of faith may impact on a person or their Carer's access to services.  It is acknowledged that care and support should be person centred and respectful of people's ethnicity and cultural needs. Research suggests that in some cultures people are more likely to want care and support from family and friends rather than 'professional' care providers.  The plan will not be automatically published in different languages; it can be made available in alternative formats on request using the most appropriate translation services.

#### 19 **RELIGION OR BELIEF**

Religion is the worship or faith in a God or Gods but belief is wider and includes religious, spiritual and philosophical beliefs. It also includes lack of belief or no belief in religion (e.g. Atheism). Generally, a belief should affect your life choices or the way you live for it to be included in the definition.

e.g. Does the function or project take into account different festivals, holidays, religious days and traditions? Will the different faith beliefs impact on, for example, women from that group and exclude or prevent them from using the service?

Useful website: Interfaith Scotland National Secular Society

Indicate if the impact is positive or negative or if there is no impact	Positive Impact	No Impact	Negative Impact	Comments
Eliminate discrimination, harassment, victimisation or any other prohibited conduct Advance equality of opportunity by having due regard to:		<b>√</b>		Spiritual and religious care is recognised as an important factor for some people and should be available to those receiving or delivering palliative care and support.
<ul> <li>removing or minimising disadvantage</li> <li>meeting the needs of particular groups that are different from the needs of others</li> <li>encouraging participation in public life</li> </ul>	✓			No specific concerns were raised in relation to cultural and religious practices. The plan aims to ensure that care and support is respectful of people's beliefs.
Foster good relations – tackle prejudice, promote understanding	✓			Hospitals and residential care homes in Dumfries and Galloway try to accommodate cultural, religious, spiritual beliefs wherever possible and are respectful of those needs for both the person in receipt of care and their Carers.

#### 20 **SEXUAL ORIENTATION**

Whether a person's sexual attraction is towards their own sex, the opposite sex or to both sexes. This includes people who are heterosexual, lesbian, gay or bisexual.

e.g. What are the issues for this group in terms of your function or project? Are the needs of this group being met?

Useful website: <u>LGBT Youth</u> <u>Stonewall Scotland</u> <u>Equality Network</u>

Indicate if the impact is positive or negative or if there is no impact	Positive Impact	No Impact	Negative Impact	Comments
Eliminate discrimination, harassment, victimisation or any other prohibited conduct Advance equality of opportunity by having due regard to:		✓		No specific issues were raised around this characteristic. It was recognised that care and support needs should be person centred, regardless of their sexual orientation.
<ul> <li>removing or minimising disadvantage</li> <li>meeting the needs of particular groups that are different from the needs of others</li> <li>encouraging participation in public life</li> </ul>		✓		Recognising the need for training and awareness raising in relation to palliative care delivery, including equality and diversity.
Foster good relations – tackle prejudice, promote understanding	✓			Respecting privacy and encouraging people to be open about their needs, particularly in respect of POA and ACP will improve understanding and experience for people receiving and delivering palliative care and support, including unpaid Carers.

#### 21 HUMAN RIGHTS

This is about protecting and promoting individuals' rights and freedoms in relation the Human Rights Act 1998. The UN Convention on the Rights of the Child has a much broader approach that may be of interest and reference although the focus of the Impact Assessment is the UK legislation, linked below.

The right to life – protects your life, by law. The state is required to investigate suspicious deaths and deaths in custody;
The prohibition of torture and inhuman treatment – you should never be tortured or treated in an inhuman or degrading way, no matter what the situation
The right to liberty and freedom – you have the right to be free and the state can only imprison you with very good reason – for example, if you are convicted of a crime
Protection against slavery and forced labour – you should not be treated like a slave or subjected to forced labour;
The right to a fair trial and no punishment without law - you are innocent until proven guilty. If accused of a crime, you have the right to hear the evidence against you, in a court of law
Respect for privacy and family life – protects against unnecessary surveillance or intrusion into your life
Freedom of thought, religion and belief – you can believe what you like and practise your religion or beliefs
Free speech and peaceful protest – you have a right to speak freely and join with others peacefully, to express your views
The right to marry - you have the right to marry and raise a family
<b>No discrimination</b> – everyone's rights are equal. You should not be treated unfairly – because, for example, of your gender, race, sexuality, religion or age
Protection of property, the right to an education and the right to free elections – protects against state interference with your possessions; means that no child can be denied an education and that elections must be free and fair

Please refer to the Guidance for more information.

Useful Websites and documents: Scottish Human Rights Commission Equality and Human Rights Commission

A Guide to the Human Rights Act for Public Authorities

UN Convention on the Rights of the Child

How does your project affect people's human rights?

Indicate if the impact is positive or negative or if there is no impact	Positive Impact	No Impact	Negative Impact	Comments
Eliminate discrimination, harassment, victimisation or any other prohibited conduct Advance the aims of the Human Rights Act		<b>✓</b>		People in prison have access to the same care and support as people who are not.
<ul> <li>Prevent breaches of human rights</li> <li>Respect people's rights</li> <li>Foster good relations – tackle prejudice, promote understanding</li> </ul>		✓		Appropriate risk assessments are carried out to protect all people receiving and providing care and support including Palliative Care. This is for everyone, including those detained in prison or under the Mental Health Act.

#### 22 HEALTH & WELLBEING and HEALTH INEQUALITIES

This is about physical and mental health and wellbeing and includes e.g. feelings of safety and security, leisure activity, participation, creativity, affection and developing/achieving your potential. It also covers all aspects of poverty including income and fuel poverty, lack of confidence and self-esteem. The Fairer Scotland Duty places a requirement on public bodies to actively consider how they can reduce inequalities of outcome in any major decision they make.

Think about the determinants of health and the different causes of health inequalities:

- fundamental causes like macro-economic position, societal values about fairness and equity
- wider environmental influences like availability of jobs; physical environment e.g. pollution, housing, food production, learning, availability services, democratic engagement
- **individual experiences** like mental health and wellbeing, family income, home and heating, diet and nutrition, exercise and physical activity, substance use, learning, readiness for school, ability to navigate services, connectedness, community involvement and personal resilience
- socio-economic disadvantage like low income, low wealth, material deprivation and area deprivation

Think about the different causes and types of poverty:

- Will this project give people and families experiencing poverty the opportunity to make sure that their **voice is heard**?
- Will the project support people experiencing poverty to move from dependence to independence?
- Will the information and services be easy to access?
- Will the project provide services that meet the needs of people experiencing poverty?

Think about how this project will impact on increasing opportunities for:

- Participation in physical activity
- Accessing healthy food choices
- Promoting positive mental health and wellbeing

Useful websites and publications: <u>Health Services</u> <u>Health Inequalities in Scotland Joseph Rowntree Foundation</u> <u>Dumfries and Galloway Council Tackling Poverty Fairer Scotland Duty</u>

How does your project impact on health and wellbeing and health inequalities?

Indicate if the impact is positive or negative or if there is no impact	Positive Impact	No Impact	Negative Impact	Comments
Eliminate inequalities and increase access to opportunities for improving health and wellbeing	<b>√</b>			Feedback from the engagement activities indicate that access to care and support in communities as well as using technology for appointments would support equity and minimise health inequalities for people living rurally.
Advance opportunities for increasing health and wellbeing across the whole population  Foster good practice for population wide health and wellbeing	✓			Improving communication and providing information in accessible formats will support choice and control, regardless of a person's health status or financial circumstances.
		✓		The Specialist Palliative Care team provides support and advice to a wide range of people delivering palliative care; ensuring people have access to high quality palliative care across Dumfries and Galloway.

#### 23 ECONOMIC AND SOCIAL SUSTAINABILITY

This is about e.g. pay, employment opportunities, assisting businesses to develop or grow, welfare to work schemes and disadvantaged groups, local self-help schemes, and valuing and supporting voluntary work. It also covers issues around aspects of poverty including individual and community resilience. The Fairer Scotland Duty places a requirement on public bodies to actively consider how they can reduce inequalities of outcome in any major decision they make.

How will your project impact on e.g. social status, employment (paid or unpaid), opportunities to expand on learning experiences, opportunities for volunteering, encourage investment in skills and training, assist people on low incomes or support other disadvantaged groups in any way, help people access advice on financial inclusion, availability or delivery of services for people living rurally, and increase access to facilities for arts, cultural and leisure pursuits.

How will the project work in rural areas where the existing infrastructure is typically less developed or where infrastructure does not exist (e.g. mains gas, fast broadband connections)?

Does your project encourage the payment of the Living Wage?

Useful websites and publications: Poverty Alliance Scottish Living Wage

Indicate if the impact is positive or negative or if there is no impact	Positive Impact	No Impact	Negative Impact	Comments
Eliminate disadvantage or inequality	✓			Access to care and support at home or closer to home minimises the socio-economic impact on Carers and those
Advance opportunities for individuals	✓			who are in receipt of care.
Foster good relations and sustainability of communities	✓			The need for the development of learning opportunities in relation to palliative care was highlighted during engagement activities. Opportunities for cross sector training are currently being explored to increase skills, employability, confidence and availability of services for people living rurally.
				Developing resilient, compassionate communities through a community development, asset based approach such as volunteering, support from neighbours, friends and third sector organisations encourages and develops sustainable solutions.

#### 24 ENVIRONMENTAL SUSTAINABILITY, CLIMATE CHANGE AND ENERGY MANAGEMENT

This is about enhancing the built environment, preserving local heritage, reducing the need to travel by improving or adding to local facilities, conditions for pedestrians and cyclists and promote public transport, living conditions such as housing and green spaces, biodiversity, the amount of emissions, fuel consumption, fuel use, renewable energy technologies,

If the effect or possible effect is minimal, no action is required under the requirements of Strategic Environmental Assessment (SEA) but there is a duty under the Environmental Assessment Scotland Act 2005 to notify the SEA authorities. There are templates available to help this process. This should be noted on the summary sheet.

If there is any likely positive or negative environmental effect, a full SEA may be required.

In order to comply with the Climate Change (Scotland) Act and <u>Carbon Reduction Commitment Energy Efficiency Scheme</u> organisations must maintain accurate records and data with regard to its Emissions. If your project may lead to a change in levels of emissions, has account been taken of the need to accurately record this data?

Will your project affect infrastructure, land or buildings?

Indicate if the Impact is High (H), Medium (M) or Low (L) or (✓) if No Impact	Positive Impact	No Impact	Negative Impact	Comments
Eliminate bad practice particularly in waste and carbon usage	✓			Providing the plan in an electronic format will reduce printing costs, environmental impact and waste.
Advance good practice, particularly the use of innovative technology	✓			Using technology such as Attend Anywhere is likely to reduce unnecessary journeys and improve access to services. This will be more environmentally sustainable
Foster a culture of personal responsibility				and reduce carbon emissions.

#### 25 **SUMMARY OF IMPACT**

Summarise your results from section 12 to 24 in the table below:

Impact Area	Positive Impact	No Impact	Negative Impact
Age	2	1	
Disability	4	1	
Sex	2	1	
Gender reassignment and Transgender	2	1	
Marriage and Civil Partnership	2	1	
Pregnancy and Maternity		2	
Race	2	2	
Religion or belief	2	1	
Sexual orientation	1	2	
Human Rights		2	
Health & Wellbeing & Health Inequalities	2	1	
Economic & Social Sustainability	3		
Environmental Sustainability, Climate Change and Energy Management	2		
	Total Positive Impacts = 24	Total No Impacts = 15	Total Negative Impacts = 0

Positive and No Impact(s) - the Project needs no further IA at this stage. Transfer the totals to the Summary Sheet for publication Negative Impact(s) - please complete section 26

- 26 If Negative Impact(s) have been identified choose the most appropriate option below (a, b or c). Once you have your identified your option, record your decision in the table below highlighting the Impact Area and action to be taken.
  - a. unjustifiable your project must be revised and rewritten to remove the negative impact. This is the concept of 'treat' in risk management
  - b. **can be justified** without further consultation. The justification is noted and recorded and the project is signed off. This is the concept of 'managed' in risk management
  - c. **may or may not be justifiable** the proposed justification for the risk is noted and the project is then consulted upon at the level that is appropriate. For instance, an employment project may require only internal consultation where as a service delivery project may require partner and external consultation.

Impact Area	Option (a), (b) or (c)	Explanation and action to be taken

Once completed transfer the actions to the Summary Sheet for publication

# Section 5 : Monitoring And Reviewing

		Guidance
27	How will the implementation of the project be monitored? Feedback from staff and people accessing services will be gathered via survey, focus groups, one-to-one meetings and anecdotally through conversations at events and meetings.	e.g. customer satisfaction questionnaires.
28	What (if any) environmental data is to be monitored and who is responsible for the collection of this data?  No collection of environmental data is currently planned.	
29	How will the results of the monitoring be used to develop the project? Information gathered during the consultation will be used to amend the strategy and develop action plans to help deliver actions associated with improving palliative, end of life and bereavement care services.	This information will be useful when you review the project
30	When and how is the project due to be reviewed? The plan will be reviewed through a clear governance structure. This includes a, Palliative Care Steering Group, Strategy Development Group and Macmillan Project Board who have overseen the project and development of the plan. A review process has been built into the project plan based on Consultation Institute and National guidelines using PDSA methodology.	Detail who is responsible. If there are a significant number of negative impacts, then an earlier date may be recommended

### **Section 6: Quality Assurance and Public Reporting of Results**

(Information required for the Summary Sheet)

The organisation is required to publish the findings and results of all IAs conducted.

Monitoring of IA returns will be carried out by expert advisors and may result in additional information being required or a revised assessment.

The lead person is responsible for collating the key comments and actions. All members of the group should receive a copy of the final impact assessment.

The impact assessment information should be reported as part of the approval process for the project.

The lead person is responsible for sending a copy of this completed Impact Assessment Toolkit form to the relevant service for the lead organisation where it will be quality assured and then part or all will be published on the public website.

For Dumfries and Galloway Council this is the Planning and Performance Unit - email it to ImpactAssessment@dumgal.gov.uk

For NHS Dumfries and Galloway email it to <a href="mailto:lynsey.fitzpatrick@nhs.net">lynsey.fitzpatrick@nhs.net</a>

### **Section 7: Improving the Impact Assessment Process**

Feedback (optional) - Please use the space below to detail any matters arising from the Assessment which will help us improve the process

Please score from 1 to 6 where 1 is low and 6 is high	Please tick (✓)					
	1	2	3	4	5	6
1 How well did this toolkit help you understand the IA process?					✓	
2 Did the toolkit assist you in improving your project?					✓	
3 Was the language and format easy to follow?					✓	

4 Any other comments

#### Please send this form to:

Planning and Performance Unit, Dumfries and Galloway Council, Council Offices, Dumfries DG1 2DD Drop Point: 320 or email: <a href="mailto:lmpactAssessment@dumgal.gov.uk">lmpactAssessment@dumgal.gov.uk</a>

Equality and Diversity Lead, NHS Dumfries and Galloway, High East, Crichton Hall, The Crichton, Dumfries DG1 4TG or email: <a href="mailto:lynsey.fitzpatrick@nhs.net">lynsey.fitzpatrick@nhs.net</a>