

Impact Assessment Screening Tool

This screening tool has been developed to ensure that equalities, human rights, economic and social factors are being considered ahead of the implementation of any new or revised policies, plans, projects, practices or strategies. Please note for the purpose of this document these will be grouped together and simply referred to as 'activity'.

General Information			
Name of activity	Maternity Service Provision in Wigtownshire Locality		
Lead person and job title	Laura Boyce, Head of Midwifery		
Contact Information (<i>telephone and/or email</i>)	laura.boyce@nhs.scot	Date of this assessment	31/10/23
Names and roles of those involved in the impact assessment process <i>List the names of everyone involved in inputting into the impact assessment process, whether this is in the initial gathering of information to complete the impact assessment or those who are present during the group session. <u>Must not be completed by any less than two people.</u></i>	Laura Boyce, Head of Midwifery Justine Parkinson, Performance and Improvement Manager David Rowland, Director of Strategic Planning and Transformation Viv Gratton, Deputy Head of Strategic Planning Liz Forsyth, Strategy Support Manager Rod Edgar, Communication and Engagement Manager		
Describe the activity in no more than 200 words	<p>NHS Dumfries and Galloway are carrying out a local service review of Maternity Services in the Wigtownshire locality. To ensure independent transparency, the engagement period was chaired by two independent co-chairs and included an independent midwifery expert. Furthermore, equity of access and reasonableness in terms of service provision is key to this review.</p> <p>Following the engagement period and subsequent options appraisal exercise, two options are being consulted on and will require separate EQIAs. This EQIA is for option 2:</p> <p><i>Community Maternity Hub with on call intrapartum access via a Community Midwifery Unit (CMU) at the Galloway Community Hospital. This model will provide low risk women only, with an on-call midwife led birthing option at GCH in the Wigtownshire locality.</i></p> <p>This impact assessment will focus on the engagement and consultation activity for the review. It aims to identify and record any potential impact on protected characteristic groups. Where negative impacts are identified action will be taken to minimise or mitigate these.</p>		

<p>How will people be affected by this activity?</p>	<p>People and communities across Dumfries and Galloway will be affected by the outcome of the review as it will impact on how and where midwifery care and support is delivered (including people accessing this service now and in the future).</p> <p>The findings will influence:</p> <ul style="list-style-type: none"> • how people’s current and future needs will be met • what the vision for services are for the future • sustainable workforce requirements
<p>Who has been involved in the development of this activity and in what capacity?</p> <p><i>How have you ensured that those affected have had the opportunity to input in the development of the policy or service change? This will support us to understand the impacts on different groups. This should include any stakeholders e.g. patients, staff, carers, equality group reps, staff side reps. Someone may also be involved representing a number of roles, for example, as a manager and as a representative of disabled staff.</i></p>	<p>People and communities across Dumfries and Galloway (including people accessing and delivering care and support) have been involved through the range of engagement activities to date.</p> <p>The feedback from those activities provided valuable insight into what is important to people and gauged people’s understanding of their priorities across maternity services. This contributed to the options developed which were considered by an expert working group with independent representation.</p> <p>The experience and knowledge stakeholders have shared throughout the process, has and will continue, to influence the phases of the engagement and consultation period.</p>
<p>Please include any evidence or relevant information that has influenced the overall decision being considered within this impact assessment</p> <p><i>This could include demographic profiles; audits; research; published evidence; health needs assessment; work based on national guidance or legislative requirements, consultation and engagement findings etc. Has any local or national research been conducted that you are able to draw upon which supports why the policy or service change is necessary and/or into the impact that it may have on different groups of people? Has any equality monitoring been carried out, either in terms of who is using the relevant service, or in terms of who has been engaged and consulted with from particular protected characteristic groups.</i></p>	<p>During the equality monitoring process the review team are contributing to the aims of the Equality Act 2010 including Fairer Scotland Duty and Human Rights Act 1998 by ensuring information is accessible to all, including protected characteristic groups.</p> <p>A wide range of stakeholders (listed in the Statement of Consultation) including those delivering and those accessing maternity care and support are involved in the review. These stakeholders are invited to continue to be involved throughout the various phases of the review.</p> <p>Data gathered during the engagement will be used to identify gaps and ensure the consultation process includes any people or groups that have previously been missed or not engaged with despite invitations to do so.</p> <p>A data information pack has been formed with a collection of the best information available from a wide range of sources, this includes statistics and quotations relating to aspects of maternity services.</p> <p>Targeted engagement through local support groups, 3rd sector, action groups and organisations, aims to ensure under-represented groups and communities of interest have their voices</p>

heard.

The local review will also include consideration of national policies and publications of relevance that may contextualize factors contributing to the delivery of a safe and sustainable service. Namely, Best Start, Review of Maternity services at the Shrewsbury and Telford Hospital NHS Trust and Neonatal and Maternity Services.

Impact Assessment Screening Questions

Please complete the table below and outline within the comments any evidence, relevant information or involvement that has influenced the decision on impact (this may also include demographic profiles, audits, research, health needs assessment, work based on national guidance, findings from engagement and consultation). Prompts are available on [page 4](#) to support discussion around potential impacts.

When assessing the impact on each protected characteristic, you should consider the following aims of the Public Sector Equality Duty:

- Does the proposed activity impact on the elimination of discrimination?
- Does the proposed activity contribute towards advancing equality of opportunity by removing or minimising disadvantages, meeting the needs of particular groups and encouraging participation in a particular activity?
- Does the proposed activity foster good relations between different groups?

Protected Characteristics/Impact Areas	What will the positive impacts be?	What will the negative impacts be?	What evidence gathering, research or involvement has been carried out?
Age	<p>People of all ages were included in the engagement to ensure their voices were heard and their experience help shape the future of maternity services in the Wigtownshire area.</p> <p>Although this review relates to people of child bearing age, everyone was invited to engage and to be given the opportunity to participate in the development.</p>		<p>The review team and associated documents state that people of all ages could be affected by the outcome of this review, whether as Carers, staff or people accessing maternity services now or in the future.</p>

<p>Disability</p>	<p>All the venues for consultation events will be accessible for people with physical disabilities. All documents will be accessible and available in Easy Read Format</p> <p>Communication materials will be accessible for all stakeholders including where English is not their first language or where a person requires Easy Read and/or large print. Video and animations will include BSL and subtitles where possible.</p> <p>Accessibility checked prior to booking – loop systems advertised and availability of BSL translation services advertised on adverts.</p> <p>Options for engaging on a 1-2-1 basis or with the assistance of a support worker will be made available to ensure people can get involved.</p>	<p>People whose partners are unable to get to Dumfries due to disability may experience negative impacts.</p> <p>Pregnant mothers travelling to DGRI</p> <p>Assistance for Deaf/BSL users</p>	<p>Signposting to support groups.</p> <p>Additional knowledge/ awareness for all staff in the service around the experiences and needs of disabled people using maternity services.</p>
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Sex	<p>The terms woman/women have been used throughout this document as this is the way that the majority of those who are pregnant and having a baby will identify. For the purpose of this document, this term includes girls. It also includes people whose gender identity does not correspond with their birth sex or who may have a non-binary identity. All healthcare services should be respectful and responsive to individual needs, and all individuals should be asked how they wish to be addressed throughout their care.</p>		
Gender reassignment and Transgender	<p>Care has been taken to ensure that trans (including non-binary) people are not excluded by language around gender in the context of any aspect of resources such as videos and animations.</p>	<p>Provision of Gender neutral toilets is unlikely to be possible at all in-person events. This may impact participation by trans and non-binary people.</p> <p>Getting treatment or support may cause distress as the antenatal clinic may be perceived as female orientated. The Gender Recognition Act should be acknowledged.</p>	<p>Care has been taken to ensure that trans (including non-binary) people are not excluded by language around gender in the context of pregnancy and parenthood</p> <p>All staff are trained in equality and diversity to minimise any potential negative impacts. Specific additional knowledge/awareness for all staff around the experiences and needs of trans and non binary people.</p>

<p>Marriage and Civil Partnership</p>	<p>The focus of the consultation activities using inclusive, person centred approach discourages assumptions about relationship status.</p> <p>Consultation activity promotes respect for individual people and relationships and seeks to ensure that care and support is delivered with no favour or discrimination on the basis of marital status.</p> <p>The outcome of the review will respect individual people and relationships and promote that care and support should be delivered with no favour or discrimination on the basis of marital status.</p> <p>All options should enable choice and control in relation to people's needs and rights (regardless of their marital/partnership status).</p>		<p>All staff are trained in equality and diversity to minimise any potential negative impacts,</p>
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Pregnancy and Maternity	<p>All resources ensure the rights of pregnant people are acknowledged and respected.</p> <p>People who are pregnant or who have young children have the opportunity to be fully involved in the consultation in whatever format suits them best.</p>		<p>The Breastfeeding (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 health or social care and support.</p>
Race	<p>Opportunities to engage through consultation will be shared with people from gypsy traveller, black, Asian and minority ethnic communities across Dumfries and Galloway including the Black Asian and Minority Ethnic Staff network.</p> <p>Consultation resources will have a link to translation services to enable translation on request.</p>	<p>It is recognised that cultural beliefs, language barriers and requirements of faith may impact on a person or their Carer's access to support from health and social care services including maternity services.</p>	<p>External approved interpreters should be used to ensure the quality of the translation for both the person receiving and delivering maternity or other health and social care services.</p>

Religion or belief	The consultation activities take into account cultural beliefs, language barriers and requirements of faith that may impact on a person or their Carer's access to health and social care.	Avoiding clashes with prayer timings and religious festivals may not always be possible. Where events are found to clash, alternatives will be arranged with the affected group.	Use research which identifies specific faith related experience and needs that would be useful to incorporate and ensure knowledge and awareness amongst the team.
Sexual orientation	<p>It is recognised that a person's care and support needs should be person centred, regardless of a person's sexual orientation.</p> <p>Language and images around communities of interest and communities of experience are considered and included in engagement resources.</p>		Seek any evidence on same sex couples and experiences of services such as Maternity.
Human Rights	Ensuring a Rights Based approach is embedded in the Model of Care supports the PANEL principles of Participation, Accountability, Non-discrimination Empowerment and Legality.		Anyone living in Dumfries and Galloway has the right to share their experience and opinions about maternity services care and support in whatever format is most appropriate for them. This includes people in prison or under the Mental Health Act.
Health & Wellbeing & Health Inequalities	To avoid disadvantage for people that do not or cannot use digital technology for whatever reason,		The impact of poverty on people's ability to access services has been considered.

	<p>alternatives to virtual meetings will always be made available.</p> <p>Improving communication and providing information in accessible formats will support choice and control, regardless of a person's health status, financial circumstances or location in our region.</p>		<p>To minimise disadvantage such as lack of access to transport to events, no Wi-Fi or technology the team are offering alternative options for engaging such as online sessions or postal survey with prepaid envelope. Phone sessions are also available on request.</p>
Economic & Social Sustainability	<p>Providing opportunities across the region (during the day and early evening) seeks to reduce the cost associated with attending and improve the level of engagement.</p>	<p>Virtual events require broad band subscription and relevant technology to engage some people may not have this.</p>	<p>Telephone or postal opportunities as well as some 1-2-1 meetings aim to mitigate this risk.</p>
Staff	<p>Staff are being directly engaged with across the region and further opportunities out with these sessions are available on line or in person to ensure staff have their voices heard.</p>		<p>Other opportunities for staff to engage will be available to ensure those who do not want to voice their concerns publicly or who want to do so Out with a work environment have the opportunity to do so.</p>

Where any potentially negative impacts are identified on page 2 of this document, **the mitigating/follow up actions must be fully documented in the following section.**

<p>How will you mitigate any negative impacts?</p> <p><i>You must outline whether any negative impacts can be justified and what mitigating actions will be put in place to ensure that discrimination does not occur and that any negative impacts are minimised. There may be a requirement to carry out further research or consultation if you are unsure.</i></p>	<p>Assure accessibility and check facilities at the venues before booking. Offer alternatives where no suitable alternative is available.</p> <p>Engage with faith leaders to try to avoid prayer timings and religious festivals where possible.</p> <p>Telephone or postal opportunities as well as some 1-2-1 meetings aim to mitigate any negative outcomes in relation to lack of digital access.</p> <p>Best practice guidelines will be adhered to in respect of all communication and engagement supported and overseen by the communication team and Consultation and Engagement Working Group and Equality Team.</p>	
<p>Does the activity have the possibility to support or detract from our efforts to promote the inclusion of people from under-represented groups?</p>	<p>This activity supports efforts to include under-represented groups.</p> <p>Equality monitoring questions on the survey and records of consultation will provide details of engagement with protected characteristic groups. This will be used as evidence to identify gaps in stakeholders and may lead to further targeted engagement if required.</p>	
<p>Does this activity require consideration of the Fairer Scotland Duty? If yes, please outline the steps taken to meet the needs of the duty.</p> <p><i>This places a legal duty on public bodies to actively consider how they can reduce inequalities of outcomes because of socio-economic disadvantage, such as low income, area deprivation and material deprivation, and to produce a written assessment of the results. This duty only applies to strategic decisions or activity. More information can be found here.</i></p>	<p>This activity aims to fulfil IJB’s legal obligations under the Duty, by reducing inequalities of outcome in strategic decision making by involving people who are impacted in the design of new models of care and support.</p> <p>A written record of the decision-making process will be maintained and available at the end of the process to evidence their compliance with the Duty.</p>	
<p>Please indicate how are you ensuring the information about the activity and around the proposed changes is accessible in terms of communication in the following formats:</p>	<p>Easy Read</p>	<p>Available on all relevant documents</p>
	<p>British Sign Language</p>	<p>Available on request</p>
	<p>Alternative Languages</p>	<p>Available on request</p>
	<p>Large Print</p>	<p>All public facing documents will be produced in Arial 12pt</p>

		minimum and Easy Read will be produced in minimum Arial 14pt
	Other (please specify)	Supporting animations and videos will have BSL and subtitles
<p>How will you monitor the ongoing impact of the activity on protected characteristic groups?</p> <p><i>Is there an opportunity to carry out equality monitoring on your activity? Is there a review date for the activity once implemented?</i></p>	<p>Feedback will be sought from people in protected characteristic groups individually and through groups that represent them. This will provide information on whether people feel they have had the opportunity to get involved.</p> <p>If completed, the equality monitoring questions in the survey will monitor level of engagement from all groups.</p>	
<p>Please outline next steps</p> <p><i>Please outline what the next stage in the impact process will be – this may include, further research and evidence gathering required, involvement with stakeholders, or finalising the process.</i></p>	<p>The process is an iterative one and we will continue to update this form as the review develops. Adding to areas where gaps have been identified or detailing how we have tackled issues and responded to different people's needs.</p>	

When complete, the lead person should send a copy of the Impact Assessment Screening Tool to the Equality and Diversity Lead by emailing it to – dq.odl@nhs.scot. The impact assessment will then be published on the NHS Dumfries and Galloway public website at www.nhsdg.co.uk

Please note that this is a legal document stating that you have fully considered the impact on the protected characteristics and is open to scrutiny by service users/external partners/Equality and Human Rights Commission.

Prompts for Impact Assessment

This section is for reference only. It provides some prompts around what to consider within both the screening tool and the full impact assessment document. **This is not an exhaustive list, and is provided simply as initial pointers to stimulate thinking and discussion and should be noted within the template.**

Equality Issues: All groups	Points to consider
	<ul style="list-style-type: none">• Don't make assumptions• Make yourself aware of the data and research that shows how protected characteristics impact on health and healthcare, and in particular, your own service.• People within each protected characteristic group are not all the same – people may be disadvantaged in more than one way. There are sometimes issues within groups that may make some people more vulnerable.• Have you considered local and national statistics and evidence available on the demographic breakdown of those who use your service, and which protected characteristic groups are more likely to be affected by any changes?• Have you engaged with the people affected by any changes to services?• Consider how to collect demographic information on each of the groups for profiling of access to/outcomes of services and initiatives.• Thinking about the information, language and imagery you are using..<ul style="list-style-type: none">Is it translatable?Is it understandable in different formats?What alternative arrangements could be put in place to make it accessible?How do people know how to access those alternatives?• Alternative formats include, Easy Read, British Sign Language and languages other than English.• Consider access to services – is the way in which services are accessed changing? Has this been communicated in different formats to ensure understanding? This can be about physical access as well as how we communicate with people about our services, this can be about letters, IT used to access appointments and even the wearing of masks• Are there particular groups who do not use or under use your service, or who are less satisfied with it?• Don't just think about your piece of work in isolation - will this change make a difference at another point in the pathway? Impacts may be positive or negative• How does this piece of work impact on people's ability to share any needs they have and for the organisation to then make any timely adjustments for that person• Remember that everyone on the group has protected characteristics and experiences that they can bring to the assessment.
Age (Children & Young People):	Points to consider
	<ul style="list-style-type: none">• What does local and national data tell you about different age groups? Is demographic information available on who is engaging with your service?• Are there any discriminatory practices in terms of any age groups that may or may not be justified? E.g. is the service designed with a specific age group in mind?• Younger people may have less access to transport, older people may be more likely to have

underlying medical health conditions, age often connects with other characteristics but beware of making assumptions about the capacity of older or younger people

- Is information given in an appropriate format in relation to the age of your service users?

Disability	Points to consider
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Have you considered reasonable steps that can be taken to accommodate the needs of disabled people such as:

- Getting in and out of spaces, availability of information verbal and written, access to toilets, induction loop systems, provision of an interpreter.
- Employment opportunities for people with disabilities – does your piece of work positively support this?
- Are you sure that the output from the activity is “accessible to all”?
- Have you looked at what constitutes as a disability under the Equality Act 2010? This includes physical conditions, mental health, and sensory impairment.
- Do you routinely record the communication needs of patients with a physical or mental health condition, learning disability or sensory impairment for referring to when sending out appointments etc?
- Do you currently monitor whether or not service users have a mental health condition, physical or learning disability, or sensory impairment so that you know how well your service is being used by people with a disability? (this also applies to staff if assessing a piece of work that affects them)
- Have you considered the timing of your service/appointments/meeting to meet the different needs of people who may rely on particular modes of transport?
- Have you considered the accessibility of any technology being used?

Gender Reassignment:	Points to consider
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- Have you used non gender-specific language that is inclusive of Trans people?
- Do you consider needs of transgender people accessing clinics, admission process etc?
- Are any of your services only available to a single sex? How have the needs of Trans people been considered within these?

Marriage and Civil Partnership:	Points to consider
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- Have you considered that those in civil partnerships should be given the same rights and benefits as those who are married?

Pregnancy and Maternity:	Points to consider
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- Are you aware that the new law makes it clear that it’s against the law for people to get less favourable treatment because they are breastfeeding when receiving services? (this also applies to staff if assessing a piece of work that affects them)
- Are you aware that it is illegal to refuse to employ someone because they are pregnant, on maternity leave, because of an illness related to pregnancy and or to dismiss someone when they reveal this?

Race and Ethnicity:	Points to consider
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- We are required to provide an interpreter for people whose first language is not English, how will this happen in relation to this piece of work?

- Have you ensured that core information is available in languages other than English?
- Do you routinely record the language that a person speaks so that you can send letters in the correct language or to phone them instead if they can't read?
- Have you thought about your assessment materials and methods and made sure that they are relevant to people from different cultures?
- Have you considered general data available on health needs of equality groups i.e. Type 2 diabetes is up to 6 times more common in South Asian people and up to three times more common in African and African-Caribbean people?

Religion, Faith and Cultural:	Points to consider
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| Religion, Faith and Cultural: | Points to consider |
| | <ul style="list-style-type: none"> • Do you currently record patients' religion in order to assist you in identifying users and non-users of your service from various religious backgrounds and any specific needs which they may have? • Is there inclusive prayer/reflective spaces available for those from all religions and beliefs for staff and service users? • How do you consider necessary dietary requirements? • Have you considered the gender of staff when caring for females? • Does the service allow for requests from staff to have time off for religious festivals and functions? |

Sex/Gender (Male/Female):	Points to consider
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| Sex/Gender (Male/Female): | Points to consider |
| | <ul style="list-style-type: none"> • Does the data you are basing this piece of work on clearly show whether or not there any differences between the needs of women and men? ▪ Do you gather data about how women and men use the service/s? If there is a difference in how a service is accessed how do you act on that? |

Sexual Orientation:	Points to consider
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| Sexual Orientation: | Points to consider |
| | <ul style="list-style-type: none"> • Does your service recognise and respect individual's sexual orientation? • Does your service recognise same sex relationships in respect to next of kin etc? • Recording forms / use terminology such as partner / civil partner? • Does your service make it easy for someone to discuss their sexual orientation if it is relevant? • Have you considered access to services and understanding of need, this may include ensuring that you have prominent LGB and T resources in waiting rooms, surgeries, confidential spaces, staff rooms and community spaces. |

Human Rights:	Points to consider
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| Human Rights: | Points to consider |
| | <ul style="list-style-type: none"> • Does the activity affect people's human rights? |

Right to Life – protects your life, by law. The state is required to investigate suspicious deaths and deaths in custody

Freedom from torture and inhuman or degrading treatment - you should never be tortured or treated in an inhuman or degrading way, no matter what the situation

Freedom from slavery and forced labour - you should not be treated like a slave or subjected to forced labour

Right to liberty and security - 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

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 your private and family life, home and correspondence – you have the right to live your life privately and enjoy family relationships without interference from government

Freedom of thought, belief and religion - you can believe what you like and practise your religion or beliefs

Freedom of expression – your right to hold your own opinions and to express them freely

Freedom of assembly and association – your right to protest by holding meetings and demonstrations with other people

Right to marry and start a family - you have the right to marry and raise a family

Protection from discrimination in respect of these rights and freedoms - everyone's rights are equal. You should not be treated unfairly – because, for example, of your gender, race, sexuality, religion or age

Right to peaceful enjoyment of your property – property can include things such as land, houses, objects you own, shares, licenses, leases, patents, money, pensions and certain types of welfare benefits

Right to Education – protects your right to an effective education. Parents also have a right to ensure that their religious and philosophical beliefs are respected during their children's education

Right to participate in free elections – support your right to free expression by holding free elections at reasonable intervals

Abolition of the death penalty - no one shall be condemned to such penalty or executed

Health, Wellbeing and Health Inequalities:

Points to consider

- 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 potential. It covers all aspects of poverty including income and fuel poverty, lack of confidence and self-esteem
- Will this activity give people and families experiencing poverty the opportunity to ensure that their voice is heard?
- Will the activity support those experiencing poverty to move from dependence to independence?
- Will information and services related to the activity be easy to access?
- Will the activity provide services that meet the needs of people experiencing poverty?
- Think about how the activity will impact on increasing opportunities for:
 - Participation in physical activity
 - Accessing healthy food choices
 - Promoting positive mental health and wellbeing

Economic and Social Sustainability:

Points to consider

- This is about e.g. pay, employment opportunities, assisting businesses to develop and 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.

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