

## Equality Impact Assessment Tool

This Tool has been developed to ensure that equalities, human rights, economic, social factors and the Armed Forces Covenant Duty are being considered ahead of the implementation of any new or revised policies, provisions, criteria, functions, practices and activities, including the delivery of services. Please note for the purpose of this document these will be grouped together and simply referred to as '**activity**'.

General Information			
Name of activity	Dumfries and Galloway Carers Strategy 2025 - 2028 and Delivery Plan		
Lead person and job title	Viv Gration Deputy Head of Strategic Planning and Commissioning		
Contact Information (telephone and/or email)	Viv.Gration@nhs.scot Elizabeth.forsyth@nhs.scot	Date of this assessment	Started 04/11/24 Updated 02/12/24 19/12/24
Names and roles of those involved in the impact assessment process	Clark Adams, Carer Facilitator Larel Currie, Commissioning Officer Liz Forsyth, Strategy Support Manager, Strategic Planning and Commissioning Lynsey Fitzpatrick, Equality and Diversity Lead, NHS Dumfries and Galloway Viv Gration, Deputy Head of Strategic Planning and Commissioning		
Describe the activity in no more than 200 words	<p>Development of the Dumfries and Galloway Carers Strategy 2025 - 2028 and Delivery Plan</p> <p>The Strategy sets out how we aim to achieve National Health and Wellbeing Outcome 6. 'People who provide unpaid care are supported to look after their own health and wellbeing, including to reduce any negative impact of their caring role on their own health and wellbeing'.</p> <p>Engagement gathered the views of stakeholders on their experiences as Carers in Dumfries and Galloway and what they saw as their priorities in line with the National Carers Strategy.</p> <p>The Carers Strategy and Delivery Plan aims to meet the needs of Carers and those they support.</p> <p>Success will be measured by ongoing feedback received from Carers, Carers Support Organisations and through the next Carers Survey.</p>		
How will <b>people</b> be affected by this activity?	Proposed changes will impact on how Carers' needs will be met including what actions be prioritised in the associated Delivery Plan.		
Who has been <b>involved</b> in the development of this activity and in what capacity?	<p>Carers - People that provide unpaid care in Dumfries and Galloway, have been involved throughout the engagement process.</p> <p>This has included people in protected characteristic groups such as people with disabilities, people from the LGBT+ community and younger and older people.</p>		

	<p>Carers support organisations and groups – this includes the Carers programme Board and Carers Interest Network.</p> <p>Stakeholder feedback from the above groups has directly influenced the plan’s development and content.</p>
<p>Please include any evidence or relevant information that has influenced the overall decision being considered within this impact assessment</p>	<p>The Equality Act 2010 including Fairer Scotland Duty and Human Rights Act 1998 were considered throughout the consultation and engagement periods.</p> <p>All information is accessible to everyone including protected characteristic groups (different formats including Easy Read and translation services available).</p> <p>A range of stakeholders (listed in the Consultation and Engagement Plan) includes Carers and those providing support to Carers. They have been involved throughout the development of this plan.</p> <p>Equality monitoring questionnaires have been used throughout the process.</p> <p>To mitigate against the risk that people may not have their voices heard; proactive efforts were made to engage with people in all protected characteristic groups. This includes liaising with the equality leads for both the council and NHS and reaching out to disability groups and other third sector partners such as youth workers.</p> <p>There was a lack of engagement from/with Young Carers. While the Carers Strategy 2025 – 2028 and Delivery Plan is for Carers of all ages, Feedback from Carers and Young Carers Support Organisations has influenced the decision to develop a separate Young Carers Strategy.</p>

**Impact Assessment Questions**

Please complete the table below and outline within the comments sections:

1. 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 6** to support discussion around potential impacts.
2. Mitigating measures that will be taken to ensure that no impact is negative.

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	Are there any positive impacts?  Yes/No	Are there any negative impacts?  Yes/No	Rationale for decision and further comments  <b>Use prompts from page 6 onwards</b> to expand on what the potential <b>positive and negative</b> impacts might be.  Use space to include any specific evidence or data relating to the protected characteristic/ impact group that has been noted or gathered. You may find further information on the Equality and Diversity Folders on Beacon	What measures will be put into place to mitigate any negative impacts?  Please note any measures that will be put in place to mitigate negative impacts
<p>Age</p> <ul style="list-style-type: none"> <li>• Early years, children and young people, including care experienced young people.</li> <li>• Working aged people</li> <li>• Older People</li> </ul>	Yes	No	<p>Increasing numbers of young and older people are providing unpaid care. They may need support as well as providing. It is important their voices are heard and they are involved in developing plans that affect them.</p> <p>The knowledge and experience of Carers/Young Carers and Young Adult Carers is valued and will continue to help shape the future of support for Carers in Dumfries and Galloway.</p> <p>This will help partners to meet Carers needs and the needs of the people they support.</p>	<p>People of all ages have been involved in developing the Carers Strategy and Delivery Plan and associated Delivery Plan.</p> <p>We aim to mitigate any unforeseen issues in relation to people feeling excluded by ensuring that anyone living in Dumfries and Galloway has the same rights to Carers support regardless of their age.</p> <p>This is important as Carers can be any age - 60% of Carers who completed the Carer Survey were between 18 – 74 years old, a further 25% were over 65 and 15% were under 18.</p> <p>The Strategy acknowledges and seeks to address potential negative impacts of caring. This includes developing actions</p>

				<p>that will support Carers mental and physical health and their social and financial wellbeing through earlier identification and awareness raising as well as accessible information and support.</p> <p>Very few Young Carers participated in engagement activities, despite mitigating actions such as targeting young people through Youth Workers and the Child and Adolescent Mental Health Service.</p> <p>To mitigate against the risk of Young Carers not feeling represented, a separate Young Carers Strategy will be developed with Young Carers, through Dumfries and Galloway Council.</p>
<p><b>Disability</b> (This includes physical disability, learning disability, sensory impairment, long term medical conditions and mental health conditions)</p>	<p>Yes</p>	<p>No</p>	<p>People with disabilities can be more reliant on unpaid Carers so it was paramount their input was included.</p> <p>Efforts have been made to ensure resources are accessible including where a person requires Easy Read and/or large print or audio versions of documents.</p> <p>Translation information is included at the start of the Carers Strategy through Patient Services.</p> <p>The Staff Disability Network and other disability groups have had the opportunity</p>	<p>Issues around access to web-based resources; have been mitigated against by ensuring all online materials have 'alt text' making it easier for eReaders to read. This includes description on any images used where appropriate.</p> <p>Issues in respect of resources for visually impaired (and people who do not read English but understand spoken words); have been mitigated where possible by ensuring appropriate resources are available on request.</p>

			to contribute to the development of the Strategy.	Audio and visual resources (video with voiceover) are planned and will be published alongside the Carers Strategy and Delivery plans. There have been no requests received for an alternative format to date.
Sex/Gender	Yes	No	<p>All resources use gender neutral terms to encourage engagement and reduce exclusion.</p> <p>The Carers Strategy and Delivery Plan and supporting resources are written in gender neutral, plain English to help ensure people recognise it as being relevant to them regardless of gender or other protected characteristics.</p> <p>More women than men are Carers (70/30) so there are more images relating to women, to ensure the document reflects this.</p>	<p>No issues have been highlighted in respect of this issue.</p> <p>Gender identity can be seen as a potential issue in relation to people accessing care and support.</p> <p>All resources around the development of the Carers Strategy and Delivery Plan have used gender neutral terms and imagery where appropriate to mitigate against exclusion and encourage inclusion and participation.</p>
Gender reassignment and Transgender	Yes	No	Care has been taken to ensure that trans (including non-binary) people are not excluded by language or images around gender in the context of any aspect of resources such as videos and animations.	<p>No issues in relation to barriers to transgender men and women accessing Carers support have been raised.</p> <p>We aim to mitigate any unforeseen issues in relation to people feeling excluded by ensuring that anyone living in Dumfries and Galloway has the same rights to Carers support regardless of their gender identity</p>

<p>Marriage and Civil Partnership</p>	<p>No</p>	<p>No</p>	<p>The Carers Strategy and Delivery Plan promote inclusive, person-centred approaches, discouraging assumptions about all protected characteristics including relationship status and encouraging inclusion.</p> <p>The Partnership promotes respect for individual people and relationships and ensure that care and support is delivered with no favour or discrimination based on marital status.</p>	<p>No issues have been highlighted in respect of this issue.</p> <p>We aim to mitigate any unforeseen issues in relation to people feeling excluded by ensuring that anyone living in Dumfries and Galloway has the same rights to Carers support regardless of their relationship or marital status.</p>
<p>Pregnancy and Maternity</p>	<p>No</p>	<p>No</p>	<p>People who are pregnant or who have young children may find being a Carer more challenging due to health or caring responsibilities.</p> <p>Images showing pregnancy are used in resources where appropriate to acknowledge that being pregnant does not exclude someone from being a Carer or being cared for.</p>	<p>No issues have been highlighted in respect of this issue.</p> <p>We aim to mitigate any unforeseen issues in relation to people feeling excluded by ensuring that anyone living in Dumfries and Galloway has the same rights to Carers support regardless of their pregnancy or maternity status.</p> <p>The Breastfeeding etc (Scotland) Act 2005 makes it an offence to prevent or stop a person feeding milk to their child (under 2) in a public place. This includes locations where someone could be accessing Carer support.</p>

<p><b>Race</b> (includes Gypsy/Travellers and those whose first language is not English)</p>	<p>Yes</p>	<p>No</p>	<p>The Carers Strategy and Delivery Plan is for everyone in Dumfries and Galloway including people from minority ethnic communities.</p> <p>A range of images that show representation from different ethnicities aims to ensure all Carers regardless of race are represented in the plan.</p>	<p>No issues have been highlighted in respect of this issue.</p> <p>Resources make it clear that translation services into multiple languages and different formats are available on request.</p> <p>We aim to mitigate any unforeseen issues in relation to people feeling excluded by ensuring that anyone living in Dumfries and Galloway has the same rights to Carers support regardless of their race.</p>
<p>Religion or belief</p>	<p>Yes</p>	<p>No</p>	<p>Being a Carer may impact on people's ability to stay connected to their faith group, culture and in some cases people who speak their language.</p> <p>The Strategy aims to ensure that it supports people to continue caring should they wish to do so – regardless of their religion or belief.</p>	<p>No issues have been highlighted in respect of this issue.</p> <p>The plan aims to ensure that Carers are able to stay connected to their faith by ensuring people can access information about what support is available to them to enable this to happen.</p> <p>We aim to mitigate any unforeseen issues in relation to people feeling excluded by ensuring that anyone living in Dumfries and Galloway has the same rights to Carers support regardless of their religion or belief.</p>
<p>Sexual orientation</p>	<p>Yes</p>	<p>No</p>	<p>It is recognised that Carers' support should be person centred, regardless of their sexual orientation.</p>	<p>No issues have been highlighted in respect of this issue.</p>

			<p>Language and images around communities of interest and communities of experience have been considered and included in the Carers Strategy. This aim to ensure Carers of any sexual orientation feel represented within the document.</p> <p>Survey results showed that there was a good level of representation in respect of sexual orientation that matched the population demographics.</p>	<p>Equality questions were included at the end of the Carers survey. This helped us to identify gaps and ensure that people from all protected characteristic groups were included.</p> <p>We aim to mitigate any unforeseen issues in relation to people feeling excluded by ensuring that anyone living in Dumfries and Galloway has the same rights to Carers support regardless of their pregnancy or maternity status.</p>
Human Rights	Yes	No	<p>The vision of the Carers Strategy and Delivery Plan states that 'Carers are valued, their rights are upheld and respected, and their own health and wellbeing acknowledged and supported'. This aims to positively impact on their Human Rights as well as their rights as a Carer.</p>	<p>No issues have been highlighted in respect of this issue.</p>
Carers	Yes	No	<p>Resources acknowledge unpaid Carers of all genders and ages, to make it clear that they are included, and their experience is valued.</p>	<p>Potential constraints on Carers time/ability to access care and support is being mitigated against by exploring ways to make information more accessible and available in different formats and through alternative sources.</p>



<p>Staff:</p> <ul style="list-style-type: none"> <li>• Full time</li> <li>• Part time</li> <li>• Shift workers</li> <li>• Staff with protected characteristics</li> <li>• Staff vulnerable to falling into poverty</li> </ul>	Yes	No	<p>Provider and referrer feedback has influenced the development of the Carers Strategy.</p> <p>Staff can be Carers too and to protect their anonymity, the Carer Survey only asked people to provide their contact details if they wanted us keep them informed of progress. This information was secure and not shared with anyone else.</p>	<p>The current Culture Change work across NHS Dumfries and Galloway may mitigate some negative impacts of their caring role on staff who are also Carers.</p> <p>Actions that come out of the Carer Positive Exemplary Award aim to mitigate potential negative outcomes of being an unpaid Carer for staff.</p>
<p>Poverty 'at risk' groups</p> <ul style="list-style-type: none"> <li>• Unemployed people</li> <li>• People on benefits</li> <li>• Pensioners</li> <li>• Care Experienced people.</li> <li>• Those living in the most deprived communities.</li> <li>• Remote rurality</li> </ul>	Yes	No	<p>The Carers Strategy and Delivery Plan aims to reduce financial pressure on individuals and families (including Carers and those in 'at risk' groups) by increasing awareness and availability of support including respite care.</p>	<p>No issues have been highlighted in respect of this issue.</p> <p>By raising awareness through programmes like Think Carer and EPiC, the Carers Strategy and Delivery Plan aims to increase positive outcomes for Carers and mitigate against some of the negative impacts of Caring including lack of identification and recognition.</p>
<p>People with low literacy/numeracy, poorer skills and/or attainment</p>	Yes	No	<p>All Carers (including those with low literacy/numeracy, poorer skills and/or attainment) are included in the Strategy.</p>	<p>No issues have been highlighted in respect of this issue.</p> <p>The strategy states that translation services and different formats are available on request. This aims to mitigate against any potential issues with literacy or other factors and provides the contents of the Strategy in a format that suits their needs.</p>

Those involved in the criminal justice system and their families	No	No	The Carers Strategy and Delivery Plan is for all Carers across Dumfries and Galloway and seeks to ensure that care and support is delivered without favour or discrimination based on their involvement in the criminal justice system.	All Carers (including those involved in the criminal justice system and their families) have the right to support in their caring role. Having information and advice in different formats aim to make it to as accessible as possible including to those who are in the criminal justice system.
Homelessness	No	No	The Carers Strategy and Delivery Plan is for all Carers across Dumfries and Galloway and seeks to ensure that care and support is delivered without favour or discrimination based on a person's accommodation status.	No issues have been highlighted in respect of this issue.
People who are displaced incl. refugees & asylum seekers	Yes	No	Translation into other languages is available on request (including those displaced by the conflict in Ukraine). This has sought to ensure people can access the information in their own language.	No issues have been highlighted in respect of this issue.  We aim to mitigate any unforeseen issues in relation to people feeling excluded by ensuring that anyone living in Dumfries and Galloway has the same rights to Carers support regardless of their residency status.
Economic & Social Sustainability	Yes	No	The Carers Strategy and Delivery Plan and associated Delivery Plan aim through their actions to reduce financial pressure on individuals and families by increasing awareness and availability of support including respite care.	Being a Carer can impact on a person's ability to work and also can increase outgoings for a variety of reasons.  The Strategy sets out Carers Rights including their right to continue to work should they wish to do so. The plan aims to

				mitigate against potential negative impacts by identifying respite opportunities, benefits information and other support that will enable them to maintain or improve their economic and social sustainability.
Environmental	No	No		No issues have been highlighted in respect of this issue.
Armed Forces Personnel and Veterans	No	No	<p>The Carers Strategy and Delivery Plan is aimed at all Carers across Dumfries and Galloway and seeks to ensure that care and support is delivered without favour or discrimination based on employment history or status.</p> <p>A recent report by the Scottish Veterans Commissioner mentions the potential establishment of a National Managed Clinical Network focussed on Veterans' health. This may influence how the Carers of veterans access care and support for them. At time of writing this does not exist.</p>	<p>No issues have been highlighted in respect of this issue.</p> <p>We aim to mitigate any unforeseen issues in relation to people feeling excluded by ensuring that anyone living in Dumfries and Galloway has the same rights to Carers support.</p>

Does this activity require consideration of the <a href="#">Fairer Scotland Duty</a> ? If yes, please outline the steps taken to meet the needs of the duty.	Undertaking the EQIA on this strategy demonstrates that due regard has been given to considering ways in which carers can be supported to lessen potential socio-economic disadvantage they might experience. Whilst the strategy and associated delivery plan will not be able to eradicate all potential socio-economic disadvantage it will aim to mitigate impacts through putting in place various elements of support.	
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, where relevant:	Easy Read	Available on all relevant documents
	British Sign Language	Available on request
	Alternative Languages	Available on request

	Large Print	All public facing documents are produced in Arial 12pt minimum and Easy Read will be produced in minimum Arial 14pt
	Other (please specify)	Animation to be produced at time of publication

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Summary Sheet	
Name of Activity	Dumfries and Galloway Carers Strategy 2025 - 2028 and Delivery Plan
Date of Impact Assessment	2/12/24
Key Lead Contact	Viv Gration

Please summarise any identified negative impacts and associated mitigations/actions:		
Negative Impact	Mitigation/Action	Responsibility/ Timescale
No negative impacts identified		

Monitoring	
How will you monitor the ongoing impact of the activity on all population groups?	Monitoring of impact will be undertaken through feedback from partners and Carers through the Carers Survey and regular governance group meetings.

Next Steps in the Impact Assessment Process
<p>When complete, the lead person should send a copy of the full Impact Assessment Tool to the Equality and Diversity Lead by emailing it to <a href="mailto:dg.cbsteam@nhs.scot">dg.cbsteam@nhs.scot</a>.</p> <p>The impact assessment will then be published on the NHS Dumfries and Galloway public website at <a href="http://www.nhsdg.co.uk">www.nhsdg.co.uk</a>.</p> <p>Please take 5 minutes to share your experience of completing this Impact Assessment by completing <a href="#">this short survey</a></p> <p><b>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.</b></p>

## Prompts for Impact Assessment

This section is for reference only. It provides some prompts around what to consider when completing the Impact Assessment Tool. **This is not an exhaustive list and is provided simply as initial pointers to stimulate thinking and discussion which should be noted within the template above.**

Equality Issues: All groups	Points to consider
	<ul style="list-style-type: none"><li>• Consider the following equality impacts:<ul style="list-style-type: none"><li>○ <b>Access:</b> consider whether different groups have the same ability to make use of your information or service</li><li>○ <b>Experience:</b> Think about what different people might think and feel during your programme, or as a result of your policy.</li><li>○ <b>Outcomes:</b> Consider how people from different groups may be at a disadvantage in the results achieved by your project or policy.</li><li>○ <b>Participation:</b> Think about the ways in which people are able or encouraged to take part, or the ways in which they are given the opportunity to make their own choices.</li></ul></li><li>• Don't make assumptions.</li><li>• Make yourself aware of the data and research that shows how protected characteristics impact on health and healthcare, and in particular, your own service.</li><li>• 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?</li><li>• Consider how to collect demographic information on each of the groups for profiling of access to/outcomes of services and initiatives.</li><li>• 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.</li><li>• Consider intersectionality: the impacts on people with several protected characteristics that could result in them being particularly impacted.</li><li>• Have you <b>engaged with the people affected</b> by any changes to services?</li><li>• Thinking about the information, language and imagery you are using.</li></ul> <p>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?</p> <ul style="list-style-type: none"><li>• Alternative formats include Easy Read, British Sign Language and languages other than English.</li><li>• Consider <b>access</b> 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.</li><li>• Are there particular groups who do not use or under use your service, or who are less satisfied with it?</li><li>• 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.</li><li>• 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</li><li>• Remember that everyone on the group has protected characteristics and experiences that they can bring to the assessment.</li></ul>
Age	Points to consider
	<ul style="list-style-type: none"><li>• This refers to children and adults of a particular age or age range.</li></ul>

- 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?
- For Scotland to support our children and young people to grow up feeling loved, safe and respected so that they release their full potential, [the Promise](#) outlines the need for a redesign of the 'care system' including a fundamental shift in how decisions are made, and money is spend in supporting Scotland's children and families. Have you considered how the activity may impact on care-experienced young people?
- If your activity impacts on children and/or young people, you are also required to complete a [Children's Rights Impact Assessment](#)

Disability	Points to consider
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- 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
- 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”? Many people have disabilities that are not visible or that they don't feel comfortable to disclose
  - 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?

Sex/Gender	Points to consider
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- 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.

- 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?

#### Gender Reassignment Points to consider

- 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, and cross-dressing 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.
- Have you used non-gender-specific language that is inclusive of Trans people, including non-binary people?
- Where relevant, are there opportunities for people to indicate the pronouns they use rather than relying on assumptions?
- Do you consider the confidentiality of Trans people?
- Do you consider needs of Trans 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

- The rights and responsibilities that come with marriage and civil partnership are almost identical. Under the Equality Act 2010 it is unlawful discrimination for people who are married or in a civil partnership to be treated less favourably 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.
- 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

- 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.



- 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

- 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, Gypsy/Traveller communities, Jewish communities, English people as well as visible minority groups like African, Caribbean and Asian.
- 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 and Faith Points to consider

- 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.
- 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?
- Are 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?

#### Sexual Orientation Points to consider

- 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, bisexual, pansexual or asexual.
- 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?

Carers	Points to consider
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- Will the policy or service change impact on staff who are carers?
- Does the policy or service change include provision for staff who are carers to access support?
- How will you inform and involve patients' carers?
- Have you involved patients' carers in the development of the service or policy?

Human Rights	Points to consider
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- This is about protecting and promoting individuals' rights and freedoms in relation the Human Rights Act 1998
- 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

Poverty 'at risk' groups	Points to consider
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- Will the activity reduce financial pressures for individuals and families?

- 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 the activity provide services that meet the needs of people experiencing poverty?

**People with low literacy/numeracy, poorer skills and/or attainment      Points to consider**

- Will information and services related to the activity be easy to access?

**Those Involved in the criminal justice system      Points to consider**

- Does the activity require a distinct approach to ensure it's inclusive of individuals that are involved in the criminal justice system and their families?

**Homelessness      Points to consider**

- Homelessness can be caused by a range of factors and challenges in people's lives such as poverty, relationship breakdown, job loss, death or the result of experiencing gender-based violence. Systemic issues like poverty, rising housing costs, welfare cuts and availability of health and social care support have a crucial role to play in whether or not a household reaches crisis point and it's vital that public services pick up issues early and act before crisis point is reached.
- Will the activity have an impact by preventing factors that may lead to household crisis resulting in homelessness?
- Does the activity consider people that do not reside in a settled home?
- Will the activity have an impact on housing options?

**People who are displaced (inc. refugees and asylum seekers)      Points to consider**

- Does the activity consider the specific needs and vulnerabilities of displaced people? This may include but is not limited to lack of secure housing or accommodation, limited livelihood or education opportunities, lack of official documents needed to access basic services or assistance, exposure to further hazards, family separation, discrimination, heightened risk of gender-based violence and trafficking, psychological impacts and weak or absent support networks.

**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)?

**Environment      Points to consider**

- This is about enhancing the built environment, preserving local heritage, reducing the need to travel by improving or adding to local facilities, promotion of public transport, living conditions

such as housing and green spaces, biodiversity, the amount of emissions, fuel consumption, fuel use and renewable energy technologies.

- It is important to consider environmental impacts of changes we make. Please see this tool [Environmental Sustainability and Climate Impact Assessment](#), which can support a more detailed environmental assessment or give points for consideration
- 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 [Carbon Reduction Commitment Energy Efficiency Scheme](#) organisations must maintain accurate records and data with regard to its Emissions. If your policy may lead to a change in levels of emissions, has account been taken of the need to accurately record this data?
- Will your policy affect infrastructure – housing, land and buildings?
- Does the activity promote active travel and physical activity?

#### Armed Forces Personnel and Veterans

#### Points to consider

- This is about ensuring that due regard is paid to the principals of the Armed Forces Covenant Duty. Due regard must be paid to:
  - The unique obligations of, and sacrifices made by, the armed forces.
  - Removing disadvantage arising for armed forces personnel, or veterans
  - The principle that it may be justified to make ‘special provisions’ for armed forces personnel or veterans in the planning, delivery and provision of services
  - How will the activity impact on members of the armed forces. veterans and their families?
- Is there an opportunity to reduce disadvantage for armed forces personnel, veterans and their families? For example, in relation to accessing healthcare, delays receiving treatment due to relocation and understanding the health and care needs of armed forces personnel.