

1. Rapid Impact Checklist

Shetland HSCP

An Equality and Diversity Impact Assessment Tool: Shetland IJB Strategic Commissioning Plan 2022-25

<p>Which groups of the population do you think will be affected by this proposal? Other groups:</p> <ul style="list-style-type: none"> • Minority ethnic people (incl. Gypsy/travellers, refugees & asylum seekers) • Women and men • People with mental health problems • People in religious/faith groups • Older people, children and young people • People of low income • Homeless people • Disabled people • People involved in criminal justice system • Staff • Lesbian, gay, bisexual and transgender 	<p>All groups will be affected as everyone in the population is a potential recipient of health and care services, and may also be impacted as a friend/relative/carer of service users. While Children’s Services are not delegated to the IJB, the HSCP services take a person-centred, whole family approach, and children or young people are likely to be impacted by way of their family or carers.</p> <p>Health and Social Care staff will also be impacted as the Strategic Commissioning Plan aims to develop and improve services, which often means change in ways of working and job roles – development of the plan included consultation and engagement with teams involved in delivery of service, to ensure developments supported their views around service delivery and used their lived experience as staff to inform recommendations.</p> <p>EQIA’s will need to be done for any specific changes in service provision on a case by case basis to ensure best outcomes.</p>
<p>N.B The word proposal is used below as shorthand for any policy, procedure, strategy or proposal that might be assessed</p>	<p>What positive and negative impacts do you think there may be? Which groups will be affected by these impacts?</p>
<p>What impact will the proposal have on lifestyles? For example, will the changes affect:</p>	<p>The Strategic Commissioning Plan priorities include:</p>

<ul style="list-style-type: none"> • Diet and nutrition • Exercise and physical activity • Substance use: tobacco, alcohol and drugs? • Risk taking behaviour? • Education and learning or skills? 	<ul style="list-style-type: none"> • To prevent poor health and wellbeing and intervene at an early stage to prevent worsening outcomes. <p>Which often means supporting lifestyle change to prevent poor health, improve outcomes or to prevent worsening of disease. The HSCP workforce will support people to engage in change that is meaningful to them, in a person-centred way. This will have positive mental, physical and social health outcomes.</p> <p>The Plan also sets out aims to develop health literacy and support people to make informed choices about their care, while supporting workforce to communicate with people effectively – this will have a positive impact on individuals in other areas of their lives.</p> <p>These changes can mean greater expectations on the population engaging with their own health and care, this change can be difficult however training for staff in a Realistic Medicine and Good Conversations approach should support people through this change.</p>
<p>Will the proposal have any impact on the social environment? Things that might be affected include:</p> <ul style="list-style-type: none"> • Social status • Employment (paid or unpaid) • Social/Family support • Stress • Income 	<p>The Plan aims to improve health and reduce health inequalities – this means living in good health for longer, and being able to engage in meaningful activity for the individual. For some people this will mean remaining in or returning to work.</p> <p>Maximising independence throughout disability or change can help maintain a person’s social status.</p> <p>Increasing supported choice and independence, and improving integration of services should make contact with health and care services more straightforward and less stressful for individuals and families.</p>

	<p>Support for unpaid carers, and appropriate, accessible health and care support can help people remain economically active and support improved or maintained income – narrowing the inequalities experienced by certain groups within our society.</p> <p>EQIA's will need to be done for any changes in service provision on a case by case basis to ensure best outcomes.</p>
<p>Will the proposal have any impact on the following?</p> <ul style="list-style-type: none"> • Discrimination? • Equality of opportunity? • Relations between groups? • Fairer Scotland Duty? 	<p>Yes – positive impact. Explicit prioritisation of tackling health inequalities, improving health literacy, and an asset based, person-centred approach should positively impact discrimination and equality of opportunity.</p> <p>Supporting a community ethos and engaging with service providers and communities, and decreasing inequalities should help to support relations between groups.</p> <p>There are close links between poverty and health inequalities – part of the work to tackle health inequalities is around improving accessibility and effectiveness of services so people are not unfairly impacted by their health or care needs.</p> <p>Changes to services to achieve “Best Value” will mean providing services differently which could cause negative relationships between groups whose provision is changing, or between service providers and service users – robust communication, and meaningful engagement and co-design to provide solutions that work for everyone will be needed to mitigate this risk.</p> <p>EQIA's will need to be done for any changes on a case by case basis to ensure best outcomes.</p>
<p>Will the proposal have an impact on the physical environment?</p>	

<p>For example, will there be impacts on:</p> <ul style="list-style-type: none"> • Living conditions? • Pollution or climate change? • Accidental injuries or public safety? • Transmission of infectious disease? 	<p>Explicit aims around housing and community assets should support improved living conditions.</p> <p>A place-based, community focussed approach and “Shifting the Balance of Care” should support pollution and climate change goals, by decreasing unnecessary travel.</p> <p>A population health and Public Health approach aims to improve health and decrease ill health at a population level – this will include joined up approaches to infectious diseases and public safety.</p>
<p>Will the proposal affect access to and experience of services? For example,</p> <ul style="list-style-type: none"> • Health care • Transport • Social services • Housing services • Education 	<p>Health care and Social Services – directly through planned improvements.</p> <p>Housing – directly through collaborative work on the Housing Contribution Statement (though this is noted as to be updated) and improved intelligence around need.</p> <p>Transport and Education – indirectly improve access by improving health and social outcomes for people.</p> <p>The Plan advocates a whole system approach to improving health outcomes, which includes a role for health, care and public health in other aspects of our Shetland system, including housing, transport and education</p>

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