

NHS Greater Glasgow and Clyde Equality Impact Assessment Tool

Equality Impact Assessment is a legal requirement as set out in the Equality Act (2010) and the Equality Act 2010 (Specific Duties)(Scotland) regulations 2012 and may be used as evidence for cases referred for further investigation for compliance issues. Evidence returned should also align to Specific Outcomes as stated in your local Equality Outcomes Report. Please note that prior to starting an EQIA all Lead Reviewers are required to attend a Lead Reviewer training session or arrange to meet with a member of the Equality and Human Rights Team to discuss the process. Please contact Equality@ggc.scot.nhs.uk for further details or call 0141 2014560.

Name of Policy/Service Review/Service Development/Service Redesign/New Service:

Stronger Start

Is this a: Current Service Service Development Service Redesign New Service New Policy Policy Review

Description of the service & rationale for selection for EQIA: (Please state if this is part of a Board-wide service or is locally driven).

What does the service or policy do/aim to achieve? Please give as much information as you can, remembering that this document will be published in the public domain and should promote transparency.

The Stronger Start Pilot will test an innovative way of working by providing money advice and advocacy support to women engaged with the Blossom Maternity Service across Clyde who are identified as high risk (as per the Blossom Referral Criteria). The Stronger Start Pilot will engage with women from Renfrewshire, Inverclyde and West Dunbartonshire, with co-location of Stronger Start Staff at the Maternity Unit at the Royal Alexandra Hospital (RAH). The Stronger Start Pilot is based on previous learning from the Maternity Matters Model, which has been successfully running in Glasgow City since 2018.

Blossom is a Maternity led service that supports pregnant women in a person centred way who have several vulnerabilities, complex needs and who fall within the protected characteristics. As a result, the Stronger Start Pilot will provide person centred supported delivered in a way that suits each individual client's needs. There was previously no model or pathway to provide an embedded money advice and advocacy service within the Blossom Maternity Service across Clyde, therefore the Stronger Start Pilot will fill this gap in provision and through robust evaluation test if this approach will be effective in Clyde.

Renfrewshire Citizens Advice Bureau (RCAB) are the service provider who have secured funding from the National Lottery Improving Lives Fund to deliver the one year Stronger Start Pilot. The Stronger Start Steering Group is responsible for the development, implementation, monitoring and evaluation of the pilot, with the following keys partners being members of this group:

- NHS GG&C Maternity
- NHS GG&C Public Health Directorate – Health Improvement
- Renfrewshire HSCP – Health Improvement

- Inverclyde HSCP – Health Improvement
- West Dunbartonshire HSCP – Health Improvement
- Renfrewshire Council – including the Fairer Renfrewshire Lead and the Promise Lead
- Renfrewshire Citizens Advice Bureau (RCAB)
- Improvement Service
- Working 4 U

Why was this service or policy selected for EQIA? Where does it link to organisational priorities? (If no link, please provide evidence of proportionality, relevance, potential legal risk etc.). Consider any locally identified Specific Outcomes noted in your Equality Outcomes Report.

The Stronger Start Pilot aligns with NHS GGC Equalities: A fairer NHSGGC 2020-2024.

The Pilot also aligns with Renfrewshire HSCPs Equality Outcome Action Plan 2020-2024. This is part of the Equalities Mainstreaming Report which is a legal requirement of the HSCP to report on and complete. The Equalities Outcome Action Plan 2020-2024, includes details of activity in relation to the following 5 equalities outcomes:

1. Our services are accessible and responsive to the needs of those with protected characteristics to maintain and improve their quality of life.
2. Our workforce are better informed and have confidence to make equality and human rights central to the way we work.
3. Our work with partners helps us to develop and deliver services to ensure that everyone whose health is affected as a result of inequality have their needs identified and addressed as part of person-centred care.
4. People who use our services are empowered to contribute and participate fully in their community and have a positive experience of health and social care services.
5. People experiencing transitions and life changes are supported to access information without barriers and in ways which suit their needs

Who is the lead reviewer and when did they attend Lead reviewer Training? (Please note the lead reviewer must be someone in a position to authorise any actions identified as a result of the EQIA)

Name: Abigail Rodden

Date of Lead Reviewer Training:

Please list the staff involved in carrying out this EQIA

(Where non-NHS staff are involved e.g. third sector reps or patients, please record their organisation or reason for inclusion):

Stronger Start Steering Group:

Abigail Rodden – Health Improvement Lead, Renfrewshire HSCP
 Marc Conroy – Health Improvement Lead, NHS GG&C Public Health Directorate
 Nicola Matheson – Renfrewshire CAB
 Amy McPherson – Renfrewshire CAB
 Nicola Fry - NHS GG&C Maternity Services
 Lisa Watson – Lead Midwife, NHS GG&C Maternity Services
 Martin Fotheringham – CEO, Renfrewshire CAB
 Claire McFadden – Health Improvement Senior, Renfrewshire HSCP
 Lesley Nish – Health Improvement Manager, Renfrewshire HSCP
 Nikki Boyle – Health Improvement Lead, Inverclyde HSCP
 Lauren McLaughlin - Health Improvement Lead, West Dunbartonshire HSCP
 Joanna Quinn – Working 4 U
 Maurice Gilligan – The Promise Manager, Renfrewshire Council
 Sam McCrae – Renfrewshire Council

		<i>Example</i>	Service Evidence Provided	Possible negative impact and Additional Mitigating Action Required
1.	<p>What equalities information is routinely collected from people currently using the service or affected by the policy? If this is a new service proposal what data do you have on proposed service user groups. Please note any barriers to collecting this data in your submitted evidence and an explanation for any</p>	<p><i>A sexual health service collects service user data covering all 9 protected characteristics to enable them to monitor patterns of use.</i></p>	<p>As the Stronger Start Pilot is a new service, we do not have legacy equalities data in relation to who will access/use the service.</p> <p>The Stronger Start Pilot will collect service user data covering the following 6 protected characteristics: Age, Disability, Marital status, Pregnancy, Race & Sex. This information will enable us to monitor patterns of use.</p> <p>The Stronger Start Pilot will be delivered by RCAB, who don't routinely collect data on gender</p>	<p>No negative impact regarding data that will be collected, and no foreseen negative impact regarding data that will not be collected.</p> <p>Explore opportunity to gather data on Religion, Sexual Orientation and Gender Reassignment.</p>

	protected characteristic data omitted.		reassignment, religion & belief, or sexual orientation as data related to these protected characteristics are not required by this project's funder (The National Lottery Community Fund).	
	<i>Example</i>	Service Evidence Provided	Possible negative impact and Additional Mitigating Action Required	
2.	<p>Please provide details of how data captured has been/will be used to inform policy content or service design.</p> <p>Your evidence should show which of the 3 parts of the General Duty have been considered (tick relevant boxes).</p> <p>1) Remove discrimination, harassment and victimisation <input checked="" type="checkbox"/></p> <p>2) Promote equality of opportunity <input checked="" type="checkbox"/></p> <p>3) Foster good relations between protected characteristics. <input type="checkbox"/></p>	<p><i>A physical activity programme for people with long term conditions reviewed service user data and found very low uptake by BME (Black and Minority Ethnic) people. Engagement activity found promotional material for the interventions was not representative. As a result an adapted range of materials were introduced with ongoing monitoring of uptake. (Due regard promoting equality of opportunity)</i></p>	<p>The Stronger Start Pilot proposes to capture equalities related data in relation to Age, Disability, Marital status, Pregnancy, Race & Sex. This data will be reviewed by the Stronger Start Steering Group on a quarterly basis and will be used to inform service design and delivery to ensure continued inclusion across all protected characteristics. This data will also be used to inform future service design</p> <p>The Stronger Start Pilot delivery model will align with evidence that suggests that when addressing multiple needs, there is a need for a person centred and holistic approach. The pilot will also focus on understanding structural barriers as well as supporting the following six priority family types identified as being at highest risk of child poverty:</p> <ul style="list-style-type: none"> • lone parent families • minority ethnic families • families with a disabled adult or child • families with a younger mother (under 25) 	<p>Data is recorded on RCAB's information recording system in line with GDPR requirements.</p> <p>Data is recorded under legitimate interest; special category data is recorded by consent. Clients have the option to withhold consent and advice will be offered on a limited basis.</p> <p>Equalities related data will be reviewed by the Stronger Start Steering Group on a quarterly basis and will be used to inform service design and delivery to ensure continued inclusion across all protected characteristics</p>

	<p>4) Not applicable <input type="checkbox"/></p>		<ul style="list-style-type: none"> • families with a child under one, and larger families (three or more children). <p>Any woman who engages with the Blossom Maternity Service and are identified as 'high risk' (as per Blossom Referral Criteria) will be eligible to be referred on to the Stronger Start Pilot. These women often fall within the 9 protected characteristics and include women who are:</p> <ul style="list-style-type: none"> • Currently involved with social work where there are child protection concerns • Previous children in kinship or Local Authority Care (Maternal or Paternal) • Current problematic alcohol and/or drug use (Maternal or Paternal) • Care experienced • Woman in treatment for problematic drug use • Current alcohol use and/or recreational drug use (cocaine/illicit benzodiazepines) • Current, significant gender based violence • Women who DNA from maternity services and who are disengaged from mainstream, supportive and children's services • Asylum seekers with additional risk factors - Trafficking, sexual assault, Trauma, Significant • Significant, Current Mental Health Issues • Significant Learning Disability that could impact on parenting/safeguarding • Young parents <16 • Women with impaired capacity • Street Homeless/hard to reach • Women living with HIV 	<p>Explore opportunity to gather data on Religion, Sexual Orientation and Gender Reassignment</p>
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			As a result, the Stronger Start Pilot will be providing an inclusive money advice and advocacy service for women across Clyde.	
		<i>Example</i>	Service Evidence Provided	Possible negative impact and Additional Mitigating Action Required
3.	<p>How have you applied learning from research evidence about the experience of equality groups to the service or Policy?</p> <p>Your evidence should show which of the 3 parts of the General Duty have been considered (tick relevant boxes).</p> <p>1) Remove discrimination, harassment and victimisation <input checked="" type="checkbox"/></p> <p>2) Promote equality of opportunity <input checked="" type="checkbox"/></p> <p>3) Foster good relations between protected characteristics <input checked="" type="checkbox"/></p> <p>4) Not applicable <input type="checkbox"/></p>	<p><i>Looked after and accommodated care services reviewed a range of research evidence to help promote a more inclusive care environment. Research suggested that young LGBT+ people had a disproportionately difficult time through exposure to bullying and harassment. As a result staff were trained in LGBT+ issues and were more confident in asking related questions to young people. (Due regard to removing discrimination, harassment and victimisation and fostering good relations).</i></p>	<p>RCABs policies and procedures prevent discrimination, harassment, or victimisation of individuals (clients) based on their protected characteristics. The evaluation of Maternity Matters, which the Stronger Start Pilot is modelled upon, demonstrated that women of 27 different nationalities accessed the service and 30% of women required the use of translation services. As a result, in setting up the Stronger Start Pilot, we have secured the use of NHS GG&C translation services to ensure the promotion of equality of opportunity.</p> <p>In relation to equalities, evidence indicates that women with multiple vulnerabilities, including protected characteristic, are less likely to access high street money advice services, have low levels of literacy and numeracy, and lack confidence and resilience in relation to financial capability. Evidence suggests that maternity services are successful sites for embedded money advice and advocacy provision. Positive evidence has been found in terms of their impact of delivering financial gain and improving financial capability.</p> <p>The Improvement Service has agreed to support the evaluation of the Stronger Start Pilot by analysing all data gathered as part of the pilot, and conducting interviews with women (who give consent) who engage with the pilot. This evaluation and learning</p>	<p>No negative impact has been identified.</p>

			<p>will be used to shape and inform future service delivery across Clyde.</p> <p>The Stronger Start team will be working with vulnerable pregnant women, many of whom will have mental health issues. Staff will receive training in relation to mental health issues, trauma-informed practice and the Promise.</p> <p>All Stronger Start Staff must complete the mandatory NHS GG&C Equality and Human Rights Learn Pro module. The e-learning module introduces staff to equality legislation (Equality Act 2010 & Human Rights Act 1998) and contextualises within a health and social care setting using a range of video clips and practical exercises.</p> <p>All Stronger Start Staff must complete the mandatory Citizens Advice Scotland Equality, Diversity, and Inclusion training.</p> <p>The Renfrewshire HSCP Health Improvement team are leading on the development of an Equalities Planner for staff that will include information on training, activities and awareness dates that are related to the 9 protected Characteristics. This will be accessible to Stronger Start Staff.</p>	
		<i>Example</i>	Service Evidence Provided	Possible negative impact and Additional Mitigating Action Required
4.	Can you give details of how you have engaged with equality groups with regard to the service review or policy development? What did this engagement tell you	<i>A money advice service spoke to lone parents (predominantly women) to better understand barriers to accessing the service. Feedback</i>	RCAB receives regular feedback from service users regarding services provided. This feedback is used to improve barriers to accessing the service. The Stronger Start pilot will include feedback from service users and is working in partnership with the Improvement Service to deliver pre and post external	It is important that we capture and understand the experiences of equalities groups who access the Stronger Start Pilot. It is also important that staff's views

<p>about user experience and how was this information used? The Patient Experience and Public Involvement team (PEPI) support NHSGGC to listen and understand what matters to people and can offer support.</p> <p>Your evidence should show which of the 3 parts of the General Duty have been considered (tick relevant boxes).</p> <p>1) Remove discrimination, harassment and victimisation <input checked="" type="checkbox"/></p> <p>2) Promote equality of opportunity <input checked="" type="checkbox"/></p> <p>3) Foster good relations between protected characteristics <input checked="" type="checkbox"/></p> <p>4) Not applicable <input type="checkbox"/></p>	<p><i>included concerns about waiting times at the drop in service, made more difficult due to child care issues. As a result the service introduced a home visit and telephone service which significantly increased uptake.</i></p> <p><i>(Due regard to promoting equality of opportunity)</i></p> <p><i>* The Child Poverty (Scotland) Act 2017 requires organisations to take actions to reduce poverty for children in households at risk of low incomes.</i></p>	<p>interviews with women (who give consent to take part). The Improvement Service has also agreed to analyse data captured from the pilot which can be used to shape future service delivery across NHS GG&C.</p> <p>RCAB has previously identified a number of common barriers to engagement including waiting times, location, and accessibility. The Stronger Start Pilot has been designed to provide high-intensity support to vulnerable clients in accessible locations with appointment delivery offered via email, telephone online and face-to-face depending on the client's needs.</p>	<p>and experiences are captured and used to shape service delivery.</p> <p>It is important that the service also understands why equalities groups may not access the service – either by specifically targeting groups to provide insight or using other evidence sources.</p>
	<p><i>Example</i></p>	<p>Service Evidence Provided</p>	<p>Possible negative impact and Additional Mitigating Action Required</p>

<p>5.</p>	<p>Is your service physically accessible to everyone? If this is a policy that impacts on movement of service users through areas are there potential barriers that need to be addressed?</p> <p>Your evidence should show which of the 3 parts of the General Duty have been considered (tick relevant boxes).</p> <p>1) Remove discrimination, harassment and victimisation <input checked="" type="checkbox"/></p> <p>2) Promote equality of opportunity <input checked="" type="checkbox"/></p> <p>3) Foster good relations between protected characteristics. <input checked="" type="checkbox"/></p> <p>4) Not applicable <input type="checkbox"/></p>	<p><i>An access audit of an outpatient physiotherapy department found that users were required to negotiate 2 sets of heavy manual pull doors to access the service. A request was placed to have the doors retained by magnets that could deactivate in the event of a fire. (Due regard to remove discrimination, harassment and victimisation).</i></p>	<p>There has previously been no model to provide any embedded money advice and advocacy within the Blossom Maternity Service for High Risk women across Clyde. Maternity Matters has been providing this model of provision in Glasgow City since 2018, therefore the Stronger Start Pilot will fill this gap in provision and provide equality of access to money advice and advocacy across the NHS GG&C Blossom Maternity Service.</p> <p>The Stronger Start Pilot will be delivered in a person centred way with engagement methods being driven by the needs of the client. Engagement can be carried out face to face, via telephone, email, or online platform.</p> <p>Stronger Start Staff will have a sound understanding of the NHSGGC Interpreting, Communication Support and Translation Policy, and will therefore be aware how to access support and when support is required. For example, an interpreter/communication support must be provided when:</p> <ul style="list-style-type: none"> • The patient's first or preferred spoken language is not English, or they speak some English but require an interpreter to explain detailed clinical information or understand complex explanations relating to the appointment or their treatment. • The patient is profoundly Deaf and therefore their first language is British Sign Language (BSL). • The patient has a hearing impairment or hearing loss, is a lip reader or uses an electronic note taker. • The patient is Deafblind (dual sensory impaired) and uses manual/tactile sign. 	<p>All venues will be fully accessible and welcoming.</p> <p>Consideration of financial costs impacting on engagement is important (e.g. travel costs to attend venues or credit for phones). Close working links have been established with the Support and Information Service across NHS GG&C to help overcome some these financial considerations. This relationship will be sustained throughout the life of the pilot with clear communication pathways established.</p> <p>Offering choice in terms of engagement is essential.</p>
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			<ul style="list-style-type: none"> • The patient is Deafblind (dual sensory impaired) and requires a guide/communicator. • The patient requests interpreting support. <p>In terms of face to face delivery, Stronger Start Staff will be co-located at the RAH three days week. Staff will be located in the inpatients department of the maternity hospital which is located on the ground floor, with electronic door access, accessible toilets, ramps, blue badge parking, and signage. Public transport is available nearby including bus routes. Stronger Start Staff will also have scope to travel to appropriate and accessible venues across Renfrewshire, Inverclyde and West Dunbartonshire to meet with women face to face if this is required.</p>	
		<i>Example</i>	Service Evidence Provided	Possible negative impact and Additional Mitigating Action Required
6.	<p>How will the service change or policy development ensure it does not discriminate in the way it communicates with service users and staff?</p> <p>Your evidence should show which of the 3 parts of the General Duty have been considered (tick relevant boxes).</p> <p>1) Remove discrimination, harassment and victimisation <input checked="" type="checkbox"/> .</p>	<p><i>Following a service review, an information video to explain new procedures was hosted on the organisation's YouTube site. This was accompanied by a BSL signer to explain service changes to Deaf service users.</i></p> <p><i>Written materials were offered in other languages and formats.</i></p> <p><i>(Due regard to remove discrimination, harassment and</i></p>	<p>The Stronger Start Pilot will use a variety of communication methods such as face to face engagement, telephone, text, email and online platforms. The engagement method will be driven by the needs of the client.</p> <p>The Stronger Start team will adhere to Citizens Advice principles of non-discrimination and non-judgement at all times through the pilot.</p> <p>Stronger Start Staff will have a sound understanding of the NHSGGC Interpreting, Communication Support and Translation Policy, and will therefore be aware how to access support and when support is required. For example, an interpreter/communication support must be provided when:</p>	<p>Links established with the NHS GG&C Interpreter Service</p> <p>Explore staff training opportunities regarding the interpreting service</p>

	<p>2) Promote equality of opportunity <input checked="" type="checkbox"/></p> <p>3) Foster good relations between protected characteristics <input checked="" type="checkbox"/></p> <p>4) Not applicable <input type="checkbox"/></p> <p>The British Sign Language (Scotland) Act 2017 aims to raise awareness of British Sign Language and improve access to services for those using the language. Specific attention should be paid in your evidence to show how the service review or policy has taken note of this.</p>	<p><i>victimisation and promote equality of opportunity).</i></p>	<ul style="list-style-type: none"> • The patient’s first or preferred spoken language is not English, or they speak some English but require an interpreter to explain detailed clinical information or understand complex explanations relating to the appointment or their treatment. • The patient is profoundly Deaf and therefore their first language is British Sign Language (BSL). • The patient has a hearing impairment or hearing loss, is a lip reader or uses an electronic note taker. • The patient is Deafblind (dual sensory impaired) and uses manual/tactile sign. • The patient is Deafblind (dual sensory impaired) and requires a guide/communicator. • The patient requests interpreting support. <p>The Renfrewshire HSCP Health Improvement team are leading on the development of an Equalities Planner for staff that will include information on training, activities and awareness dates that are related to the 9 protected Characteristics. This will be accessible to Stronger Start Staff.</p>	
7	Protected Characteristic	Service Evidence Provided	Possible negative impact and Additional Mitigating Action Required	
(a)	<p>Age</p> <p>Could the service design or policy content have a disproportionate impact on people due to differences in age? (Consider any age cut-offs that exist in the service design or policy content. You will need to objectively justify in the evidence section any</p>	<p>The Stronger Start service will be available to all eligible women regardless of age.</p> <p>Client profile information will be collected regarding age, this information will be collected following GDPR principles under the category of legitimate interest. The age of the service users will not impact the service they receive.</p>	<p>Stronger Start Pilot data should be analysed to understand age profiles of those engaging (and not engaging with the service).</p>	

	<p>segregation on the grounds of age promoted by the policy or included in the service design).</p> <p>Your evidence should show which of the 3 parts of the General Duty have been considered (tick relevant boxes).</p> <p>1) Remove discrimination, harassment and victimisation <input checked="" type="checkbox"/></p> <p>2) Promote equality of opportunity <input checked="" type="checkbox"/></p> <p>3) Foster good relations between protected characteristics. <input type="checkbox"/></p> <p>4) Not applicable <input type="checkbox"/></p>	<p>The Renfrewshire HSCP Health Improvement team are leading on the development of an Equalities Planner for staff that will include information on training, activities and awareness dates that are related to the 9 protected Characteristics. This will be accessible to Stronger Start Staff.</p>	
(b)	<p>Disability</p> <p>Could the service design or policy content have a disproportionate impact on people due to the protected characteristic of disability?</p> <p>Your evidence should show which of the 3 parts of the General Duty have been considered (tick relevant boxes).</p> <p>1) Remove discrimination, harassment and victimisation <input checked="" type="checkbox"/></p> <p>2) Promote equality of opportunity <input checked="" type="checkbox"/></p> <p>3) Foster good relations between protected characteristics. <input type="checkbox"/></p> <p>4) Not applicable <input type="checkbox"/></p>	<p>No, due regard has been taken regarding the accessibility of the Stronger Start Pilot to disabled people.</p> <p>Standard Citizens Advice Bureau policies regarding the number of attempts to contact service users have been relaxed to accommodate clients with communication difficulties/engagement issues.</p> <p>The Stronger Start Pilot will take place at accessible locations and via different delivery methods depending on the needs of the client (e.g. face-to-face, telephone, text, email or online platforms).With regards to face to face engagement, Stronger Start Staff will be co-located at the DDA compliant RAH three days per week. Staff will be located in the inpatients department of the maternity hospital which is located on the ground floor, with electronic door access, accessible toilets, ramps, blue badge</p>	<p>Explore staff training opportunities regarding the interpreting service through NHS GG&C</p>

		<p>parking, and signage. Public transport is available nearby including bus routes.</p> <p>Stronger Start Staff will also have scope to travel to appropriate and accessible venues across Renfrewshire, Inverclyde and West Dunbartonshire to meet with women face to face if this is required. These building will all be DDA compliant.</p> <p>All Stronger Start Staff are aware of the NHS GG&C Interpreting Service and how to access interpreters. The service works with a broad spectrum of disabilities.</p> <p>As part of person centred care, Stronger Start staff may signpost/refer clients to other services, as appropriate, to support and address individual needs.</p> <p>The Renfrewshire HSCP Health Improvement team are leading on the development of an Equalities Planner for staff that will include information on training, activities and awareness dates that are related to the 9 protected Characteristics. This will be accessible to Stronger Start Staff.</p>	
	Protected Characteristic	Service Evidence Provided	Possible negative impact and Additional Mitigating Action Required
(c)	<p>Gender Reassignment</p> <p>Could the service change or policy have a disproportionate impact on people with the protected characteristic of Gender Reassignment?</p>	<p>There is no criteria that would exclude individuals on the basis of gender reassignment from engaging with the Stronger Start Pilot if they meet the eligibility criteria set (High Risk on Blossom Referral Criteria)</p> <p>The Renfrewshire HSCP Health Improvement team are leading on the development of an Equalities</p>	<p>Explore Staff training opportunities in relation to LGBT through already established links with Equalities Network.</p>

	<p>Your evidence should show which of the 3 parts of the General Duty have been considered (tick relevant boxes).</p> <p>1) Remove discrimination, harassment and victimisation <input checked="" type="checkbox"/></p> <p>2) Promote equality of opportunity <input checked="" type="checkbox"/></p> <p>3) Foster good relations between protected characteristics <input type="checkbox"/></p> <p>4) Not applicable <input type="checkbox"/></p>	<p>Planner for staff that will include information on training, activities and awareness dates that are related to the 9 protected Characteristics. This will be accessible to Stronger Start Staff.</p>	
	<p>Protected Characteristic</p>	<p>Service Evidence Provided</p>	<p>Possible negative impact and Additional Mitigating Action Required</p>

<p>(d)</p>	<p>Marriage and Civil Partnership</p> <p>Could the service change or policy have a disproportionate impact on the people with the protected characteristics of Marriage and Civil Partnership?</p> <p>Your evidence should show which of the 3 parts of the General Duty have been considered (tick relevant boxes).</p> <p>1) Remove discrimination, harassment and victimisation <input checked="" type="checkbox"/></p> <p>2) Promote equality of opportunity <input checked="" type="checkbox"/></p> <p>3) Foster good relations between protected characteristics <input type="checkbox"/></p> <p>4) Not applicable <input type="checkbox"/></p>	<p>No, there is no criteria which would exclude individuals on the basis of Marriage/Civil Partnership from accessing the Stronger Start Pilot if they meet the eligibility criteria set (High Risk on Blossom Referral Criteria).</p> <p>The Renfrewshire HSCP Health Improvement team are leading on the development of an Equalities Planner for staff that will include information on training, activities and awareness dates that are related to the 9 protected Characteristics. This will be accessible to Stronger Start Staff.</p>	<p>No negative impact</p>
<p>(e)</p>	<p>Pregnancy and Maternity</p> <p>Could the service change or policy have a disproportionate impact on the people with the protected characteristics of Pregnancy and Maternity?</p> <p>Your evidence should show which of the 3 parts of the General Duty have been considered (tick relevant boxes).</p> <p>1) Remove discrimination, harassment and victimisation <input checked="" type="checkbox"/></p>	<p>The Stronger Start Pilot will engage with Pregnant women who are identified as High Risk on the Blossom Referral Criteria.</p> <p>The Stronger Start Pilot will only engage will pregnant people, therefore the service will disproportionately benefit people with the protected characteristics of Pregnancy and Maternity.</p> <p>Pregnancy can deepen poverty for women who don't have access to the support or services required to prepare for the costs associated with pregnancy.</p>	<p>No negative impact</p>

	<p>2) Promote equality of opportunity <input checked="" type="checkbox"/></p> <p>3) Foster good relations between protected characteristics. <input type="checkbox"/></p> <p>4) Not applicable <input type="checkbox"/></p>	<p>Our service will promote equality of opportunity for pregnant vulnerable women and their children in receiving support and advocacy and helping to improve their future financial resilience.</p> <p>The Renfrewshire HSCP Health Improvement team are leading on the development of an Equalities Planner for staff that will include information on training, activities and awareness dates that are related to the 9 protected Characteristics. This will be accessible to Stronger Start Staff.</p>	
	Protected Characteristic	Service Evidence Provided	Possible negative impact and Additional Mitigating Action Required
(f)	<p>Race</p> <p>Could the service change or policy have a disproportionate impact on people with the protected characteristics of Race?</p> <p>Your evidence should show which of the 3 parts of the General Duty have been considered (tick relevant boxes).</p> <p>1) Remove discrimination, harassment and victimisation <input checked="" type="checkbox"/></p> <p>2) Promote equality of opportunity <input checked="" type="checkbox"/></p> <p>3) Foster good relations between protected characteristics <input type="checkbox"/></p>	<p>No, there is no criteria which would exclude individuals on the basis of race from accessing the Stronger Start Pilot if they meet the eligibility criteria set (High Risk on Blossom Referral Criteria)</p> <p>The Stronger Start Pilot will link in with the NHS GG&C interpreter service when required. Interpreting support should be booked for any consultation, appointment or health care interaction in a hospital or a community setting (e.g. doctor or dentist) where a patient cannot communicate or understand English sufficiently well to participate in their appointment or procedure. This includes Deaf patients as well as those who speak another language. This interpreting support should be provided via telephone or online services, but may need to be provided by a face-to-face interpreter in certain circumstances.</p>	Explore staff training opportunities in relation to race through already established links with the IN-Ren Network.

	<p>4) Not applicable <input type="checkbox"/></p>	<p>Strong links established with IN Ren Renfrewshire Integration network to help shape pilot and also access Ethnic Minority related training opportunities for Stronger Start Staff.</p> <p>The Renfrewshire HSCP Health Improvement team are leading on the development of an Equalities Planner for staff that will include information on training, activities and awareness dates that are related to the 9 protected Characteristics. This will be accessible to Stronger Start Staff</p>	
(g)	<p>Religion and Belief</p> <p>Could the service change or policy have a disproportionate impact on the people with the protected characteristic of Religion and Belief?</p> <p>Your evidence should show which of the 3 parts of the General Duty have been considered (tick relevant boxes).</p> <p>1) Remove discrimination, harassment and victimisation <input checked="" type="checkbox"/></p> <p>2) Promote equality of opportunity <input checked="" type="checkbox"/></p> <p>3) Foster good relations between protected characteristics. <input type="checkbox"/></p> <p>4) Not applicable <input type="checkbox"/></p>	<p>No, there is no criteria which would exclude individuals on the basis of religion and belief from accessing the Stronger Start Pilot if they meet the eligibility criteria set (High Risk on Blossom Referral Criteria)</p> <p>RCAB and Stronger Start will not collect personal data from service users regarding religion & belief however will respect any religious practices of its service users.</p> <p>Due regard has been taken regarding service users where their religion and beliefs may prohibit interaction with males to ensure that this does not take place. The Stronger Start Team are all female so all clients will engage with a female worker.</p> <p>The Renfrewshire HSCP Health Improvement team are leading on the development of an Equalities Planner for staff that will include information on training, activities and awareness dates that are related to the 9 protected Characteristics. This will be accessible to Stronger Start Staff.</p>	No negative impact

	Protected Characteristic	Service Evidence Provided	Possible negative impact and Additional Mitigating Action Required
(h)	<p>Sex</p> <p>Could the service change or policy have a disproportionate impact on the people with the protected characteristic of Sex?</p> <p>Your evidence should show which of the 3 parts of the General Duty have been considered (tick relevant boxes).</p> <p>1) Remove discrimination, harassment and victimisation <input checked="" type="checkbox"/></p> <p>2) Promote equality of opportunity <input checked="" type="checkbox"/></p> <p>3) Foster good relations between protected characteristics. <input type="checkbox"/></p> <p>4) Not applicable <input type="checkbox"/></p>	<p>The Stronger Start Pilot will engage with Pregnant women who are identified as High Risk on the Blossom Referral Criteria. The Stronger Start Pilot is therefore a service specific to pregnant women.</p> <p>The Renfrewshire HSCP Health Improvement team are leading on the development of an Equalities Planner for staff that will include information on training, activities and awareness dates that are related to the 9 protected Characteristics. This will be accessible to Stronger Start Staff.</p> <p>NHS GG&C Maternity Services are required to put in place routine enquiry of domestic abuse and each woman using maternity services must be asked, when appropriate, whether they are experiencing domestic abuse. As a result all eligible women referred to Stronger Start will have been subject to sensitive routine enquire.</p> <p>In situations where women disclose gender-based violence/financial abuse, the Stronger Start team will follow the Citizens Advice Bureau's safeguarding policy. The Stronger Start Team will have information on national helplines and services available to women in these circumstances.</p>	<p>No negative impact</p> <p>Explore staff training opportunities around Gender Based Violence</p>
(i)	<p>Sexual Orientation</p> <p>Could the service change or policy have a disproportionate impact on the people with the protected characteristic of Sexual Orientation?</p>	<p>No, there is no criteria which would exclude individuals on the basis of sexual orientation from accessing the Stronger Start Pilot if they meet the eligibility criteria set (High Risk on Blossom Referral Criteria)</p>	<p>No negative impact</p> <p>Explore staff training opportunities around LGBT</p>

	<p>Your evidence should show which of the 3 parts of the General Duty have been considered (tick relevant boxes).</p> <p>1) Remove discrimination, harassment and victimisation <input checked="" type="checkbox"/></p> <p>2) Promote equality of opportunity <input checked="" type="checkbox"/></p> <p>3) Foster good relations between protected characteristics. <input type="checkbox"/></p> <p>4) Not applicable <input type="checkbox"/></p>	<p>The Stronger Start Pilot will not collect personal data from service users regarding sexual orientation, unless pertinent to advice giving.</p> <p>The Renfrewshire HSCP Health Improvement team are leading on the development of an Equalities Planner for staff that will include information on training, activities and awareness dates that are related to the 9 protected Characteristics. This will be accessible to Stronger Start Staff. The Health Improvement Team have also established links with the Equalities Network to provide LGBT Training for Staff, which Stronger Start staff can access.</p> <p>All Stronger Start Staff will use sensitive and gender neutral language when enquiring or referring to the partner of the women that they are engaging with. This will ensure that staff don't make assumptions or judgements around a partner's gender.</p>	<p>through established links with Equalities Network.</p>
	Protected Characteristic	Service Evidence Provided	Possible negative impact and Additional Mitigating Action Required
(j)	<p>Socio – Economic Status & Social Class</p> <p>Could the proposed service change or policy have a disproportionate impact on people because of their social class or experience of poverty and what mitigating action have you taken/planned?</p> <p>The Fairer Scotland Duty (2018) places a duty on public bodies in Scotland to actively consider how they can reduce inequalities of outcome caused by socioeconomic disadvantage when making <u>strategic</u> decisions. If relevant, you should evidence here what</p>	<p>No, there is no criteria which would exclude individuals on the basis of socio-economic status and social class from accessing the Stronger Start Pilot if they meet the eligibility criteria set (High Risk on Blossom Referral Criteria).</p>	<p>No negative impact</p>

steps have been taken to assess and mitigate risk of exacerbating inequality on the ground of socio-economic status. Additional information available here: [Fairer Scotland Duty: guidance for public bodies - gov.scot \(www.gov.scot\)](https://www.gov.scot/resources/information/fairer-scotland-duty-guidance-for-public-bodies/)

Seven useful questions to consider when seeking to demonstrate 'due regard' in relation to the Duty:

1. What evidence has been considered in preparing for the decision, and are there any gaps in the evidence?
2. What are the voices of people and communities telling us, and how has this been determined (particularly those with lived experience of socio-economic disadvantage)?
3. What does the evidence suggest about the actual or likely impacts of different options or measures on inequalities of outcome that are associated with socio-economic disadvantage?
4. Are some communities of interest or communities of place more affected by disadvantage in this case than others?
5. What does our Duty assessment tell us about socio-economic disadvantage experienced disproportionately according to sex, race, disability and other protected characteristics that we may need to factor into our decisions?
6. How has the evidence been weighed up in reaching our final decision?
7. What plans are in place to monitor or evaluate the impact of the proposals on inequalities of outcome that are associated with socio-economic disadvantage? 'Making Fair Financial Decisions' (EHRC, 2019)²¹ provides useful information about the 'Brown Principles' which can be used to determine whether due regard has been given. When engaging with communities the National Standards

Maternity services have been shown to provide a key opportunity to prevent and mitigate child poverty, with maternal and family poverty being linked to a range of poor health, social and economic outcomes. Pregnancy can be a trigger for financial difficulties with many welfare benefits available at this time unclaimed. High levels of benefit sanctions have previously been reported for pregnant women which directly impacts on women and their unborn babies.

The Stronger Start Pilot and its Steering Group, are committed to improving the rates of Child Poverty throughout the Clyde area. The Stronger Start Pilot will engage with women from across Renfrewshire, Inverclyde and West Dunbartonshire. Data indicates that Renfrewshire, Inverclyde, and West Dunbartonshire all feature in the 2020 SIMD 5% most deprived places in Scotland. There continues to be particularly high proportions of children in low-income families living in these three areas, with all maternity wards seeing rises in the proportion of children living in relative poverty.

In Renfrewshire the percentage of children living in relative poverty after housing costs, was 23%, with 16% of children living in absolute poverty and 25% of children under 16 living in SIMD1.

In Inverclyde the percentage of children living in relative poverty after housing costs, was 24.4%, with 16% of children living in absolute poverty and 47% of children under 16 living in SIMD1.

In West Dunbartonshire, the percentage of children living in relative poverty after housing costs, was

<p>for Community Engagement²² should be followed. Those engaged with should also be advised subsequently on how their contributions were factored into the final decision.</p>	<p>27.6%, with 20% living in absolute poverty and 45% of children under 16 living in SIMD1.</p> <p>The Stronger Start Pilot delivery model will align with evidence that suggests that when addressing multiple needs, there is a need for a person centred and holistic approach. The pilot will also focus on understanding structural barriers as well as supporting the following six priority family types identified as being at highest risk of child poverty:</p> <ul style="list-style-type: none">• lone parent families• minority ethnic families• families with a disabled adult or child• families with a younger mother (under 25)• families with a child under one, and larger families (three or more children).• <p>This approach has been recognised as important when providing financial support, helping to tackle, mitigate and prevent poverty, and supporting families to navigate a complex set of support services.</p> <p>The Stronger Start Steering Group has responsibility for the development, implementation, monitoring and evaluation of the Stronger Start Pilot. RCAB will provide quarterly monitoring reports to this group, which will include data information in relation to the protected characteristics. This information will be used to shape service delivery in relation to the pilot, as well as shaping future service delivery across NHS GG&C. The Stronger Start Steering group will work closely with the NHS GG&C Financial Inequality Group to provide progress reports and link in with the Child Poverty Agenda across NHS GG&C as well as at a national level.</p>	
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<p>(k)</p>	<p>Other marginalised groups</p> <p>How have you considered the specific impact on other groups including homeless people, prisoners and ex-offenders, ex-service personnel, people with addictions, people involved in prostitution, asylum seekers & refugees and travellers?</p>	<p>The Stronger Start Pilot will provide support to pregnant women who are in the following marginalised groups:</p> <ul style="list-style-type: none"> • Currently involved with social work where there are child protection concerns • Previous children in kinship or Local Authority Care (Maternal or Paternal) • Current problematic alcohol and/or drug use (Maternal or Paternal) • Care experienced • Woman in treatment for problematic drug use • Current alcohol use and/or recreational drug use (cocaine/illicit benzodiazepines) • Current, significant gender based violence • Women who DNA from maternity services and who are disengaged from mainstream, supportive and children's services • Asylum seekers with additional risk factors - Trafficking, sexual assault, Trauma, Significant • Significant, Current Mental Health Issues • Significant Learning Disability that could impact on parenting/safeguarding • Young parents <16 • Women with impaired capacity • Street Homeless/hard to reach • Women living with HIV <p>Maternity services have been found to be successful sites for embedded money advice and advocacy services allowing support from an early stage in pregnancy, particularly when a trauma-informed model of care is implemented. The Trauma Informed Pathway treats each person as an individual, tailoring care to their specific needs and goals, as</p>	
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		well as promoting collaboration with other care providers to offer wraparound support to improve outcomes. All Stronger Start Staff will complete Trauma Informed Practice training and ensure that they work in a trauma informed way with all clients.	
8.	<p>Does the service change or policy development include an element of cost savings? How have you managed this in a way that will not disproportionately impact on protected characteristic groups?</p> <p>Your evidence should show which of the 3 parts of the General Duty have been considered (tick relevant boxes).</p> <p>1) Remove discrimination, harassment and victimisation <input type="checkbox"/></p> <p>2) Promote equality of opportunity <input type="checkbox"/></p> <p>3) Foster good relations between protected characteristics. <input type="checkbox"/></p> <p>4) Not applicable <input type="checkbox"/></p>	No, the service development does not include an element of cost savings.	
		Service Evidence Provided	Possible negative impact and Additional Mitigating Action Required
9.	What investment in learning has been made to prevent discrimination, promote equality of opportunity and foster good relations between protected characteristic groups? As a minimum include recorded completion rates of statutory and mandatory learning programmes	All Stronger Start staff will complete an RCAB induction as well as an NHS GG&C induction, with both processes including equality and diversity related policy and training.	Ethnic Minority related staff training opportunities will be explored through already established links with the IN

	<p>(or local equivalent) covering equality, diversity and human rights.</p>	<p>All Stronger Start Staff must complete the mandatory NHS GG&C Equality and Human Rights Learn Pro module. The e-learning module introduces staff to equality legislation (Equality Act 2010 & Human Rights Act 1998) and contextualises within a health and social care setting using a range of video clips and practical exercises.</p> <p>All Stronger Start Staff must complete the mandatory Citizens Advice Scotland Equality, Diversity, and Inclusion training.</p> <p>All Stronger Start staff will be trained in Trauma Informed Practice and The Promise as part of their induction. An ongoing training needs assessment will take place for all staff to identify any training needs in relation to equalities.</p> <p>Through co location at the RAH and attendance at teams, a strong working relationship will be established between Stronger Start staff and the Blossom Maternity Service staff team. This will enable shared learning between staff, as well as enabling the Stronger Start Pilot to become fully embedded within the Blossom Maternity Service across Clyde.</p> <p>Strong links have already been established with IN Ren Renfrewshire Integration network to help shape the pilot and also enable all Stronger Start Staff to access Ethnic Minority related training opportunities, resources and shared learning opportunities.</p> <p>The Renfrewshire HSCP Health Improvement team are leading on the development of an Equalities Planner for staff that will include information on training, activities and awareness dates that are</p>	<p>Ren Renfrewshire Integration Network.</p> <p>LGBT related staff training opportunities will be explored through already established links with the Equalities Network.</p>
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		related to the 9 protected Characteristics. This will be accessible to Stronger Start Staff. The Health Improvement Team have also established links with the Equalities Network to provide LGBT Training for Staff, which Stronger Start staff can access.	
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10. In addition to understanding and responding to legal responsibilities set out in Equality Act (2010), services must pay due regard to ensure a person's human rights are protected in all aspects of health and social care provision. This may be more obvious in some areas than others. For instance, mental health inpatient care or older people's residential care may be considered higher risk in terms of potential human rights breach due to potential removal of liberty, seclusion or application of restraint. However risk may also involve fundamental gaps like not providing access to communication support, not involving patients/service users in decisions relating to their care, making decisions that infringe the rights of carers to participate in society or not respecting someone's right to dignity or privacy.

The Human Rights Act sets out rights in a series of articles – right to Life, right to freedom from torture and inhumane and degrading treatment, freedom from slavery and forced labour, right to liberty and security, right to a fair trial, no punishment without law, right to respect for private and family life, right to freedom of thought, belief and religion, right to freedom of expression, right to freedom of assembly and association, right to marry, right to protection from discrimination.

Please explain in the field below if any risks in relation to the service design or policy were identified which could impact on the human rights of patients, service users or staff.

There are no identified risks in relation to the service design which could impact on the human rights of patients, service users or staff.

Please explain in the field below any human rights based approaches undertaken to better understand rights and responsibilities resulting from the service or policy development and what measures have been taken as a result e.g. applying the PANEL Principles to maximise Participation, Accountability, Non-discrimination and Equality, Empowerment and Legality or FAIR* .

Participation – Work is being undertaken by RCAB and the Stronger Start Steering group, in partnership with the Improvement Service to capture user experience of the pilot. Case studies will be developed which outline client's experiences. Pilot will be Analysed to understand

reasons for non-engagement of those who were referred to, but failed to uptake the service. Pre and post engagement external interviews will be carried out with clients who give consent.

Accountability – The Stronger Start Pilot seeks to support women across Clyde who are engaged with the Blossom Maternity Service regardless of protected characteristics. We will provide onward referral/signposting to relevant services/supports as appropriate to all identified clients. RCAB will provide quarterly monitoring reports to the Stronger Start Steering group, which will include data information in relation to the protected characteristics. This information will be used to shape service delivery in relation to the pilot, as well as shaping future service delivery across NHS GG&C. The Stronger Start Steering group will work closely with the NHS GG&C Financial Inequality Group to provide progress reports and link in with the Child Poverty Agenda across NHS GG&C as well as at a national level. The steering group will also provide progress and evaluation updates to Renfrewshire HSCP, Inverclyde HSCP and West Dunbartonshire HSCP.

Non-discriminatory and Equality – This EQIA outlines the steps being taken to ensure the service is non-discriminatory.

Empowerment – The Stronger Start Staff strive to enable and encourage active participation and empowerment of clients.

Legality – The service is compliant with UK and Scottish Law

*

- **Facts:** What is the experience of the individuals involved and what are the important facts to understand?
- **Analyse rights:** Develop an analysis of the human rights at stake
- **Identify responsibilities:** Identify what needs to be done and who is responsible for doing it
- **Review actions:** Make recommendations for action and later recall and evaluate what has happened as a result.

Having completed the EQIA template, please tick which option you (Lead Reviewer) perceive best reflects the findings of the assessment. This can be cross-checked via the Quality Assurance process:

- Option 1: No major change (where no impact or potential for improvement is found, no action is required)
- Option 2: Adjust (where a potential or actual negative impact or potential for a more positive impact is found, make changes to mitigate risks or make improvements)
- Option 3: Continue (where a potential or actual negative impact or potential for a more positive impact is found but a decision not to make a change can be objectively justified, continue without making changes)
- Option 4: Stop and remove (where a serious risk of negative impact is found, the plans, policies etc. being assessed should be halted until these issues can be addressed)

11. If you believe your service is doing something that 'stands out' as an example of good practice - for instance you are routinely collecting patient data on sexual orientation, faith etc. - please use the box below to describe the activity and the benefits this has brought to the service. This information will help others consider opportunities for developments in their own services.

Actions – from the additional mitigating action requirements boxes completed above, please summarise the actions this service will be taking forward.	Date for completion	Who is responsible?(initials)
<p>Explore opportunity to gather data on Religion, Sexual Orientation and Gender Reassignment.</p> <p>Equalities related data will be reviewed by the Stronger Start Steering Group on a quarterly basis and will be used to inform service design and delivery to ensure continued inclusion across all protected characteristics.</p> <p>Stronger Start Pilot data should be analysed to understand age profiles of those engaging (and not engaging with the service).</p> <p>Consideration of financial costs impacting on engagement is important (e.g. travel costs to attend venues or credit for phones). Close working links have been established with the Support and Information Service across NHS GG&C to help overcome some these financial considerations. This relationship will be sustained throughout the life of the pilot with clear communication pathways established.</p> <p>Explore staff training opportunities regarding the interpreting service through NHS GG&C</p> <p>Explore Staff training opportunities in relation to LGBT through already established links with the Equalities Network.</p>	<p>Feb 2025</p> <p>Ongoing throughout the life of the pilot.</p> <p>Feb 2025</p> <p>Ongoing throughout the life of the pilot.</p> <p>August 2024</p> <p>August 2024</p>	<p>RCAB</p> <p>RCAB to provide data. Steering Group will review.</p> <p>RCAB to provide data. Steering Group will review.</p> <p>Led by RCAB.</p> <p>Steering Group to identify training. RCAB to coordinate staff attendance.</p> <p>Steering Group to identify training. RCAB</p>

<p>Explore staff training opportunities around Gender Based Violence</p>	<p>August 2024</p>	<p>to coordinate staff attendance. Steering Group to identify training. RCAB to coordinate staff attendance.</p>
<p>Explore staff training opportunities in relation to race through already established links with the IN-Ren Network.</p>	<p>August 2024</p>	<p>Steering Group to identify training. RCAB to coordinate staff attendance.</p>

Ongoing 6 Monthly Review please write your 6 monthly EQIA review date:

5th August 2024

Lead Reviewer:
EQIA Sign Off:

Name: Abigail Rodden
Job Title: Health Improvement Lead
Signature: A.Rodden
Date: 13/2/24

Quality Assurance Sign Off:

Name Alastair Low
Job Title Planning Manager
Signature Alastair Low
Date 14/02/2024

**NHS GREATER GLASGOW AND CLYDE EQUALITY IMPACT ASSESSMENT TOOL
MEETING THE NEEDS OF DIVERSE COMMUNITIES
6 MONTHLY REVIEW SHEET**

Name of Policy/Current Service/Service Development/Service Redesign:

Please detail activity undertaken with regard to actions highlighted in the original EQIA for this Service/Policy

		Completed	
		Date	Initials
Action:			
Status:			
Action:			
Status:			
Action:			
Status:			
Action:			
Status:			

Please detail any outstanding activity with regard to required actions highlighted in the original EQIA process for this Service/Policy and reason for non-completion

		To be Completed by	
		Date	Initials
Action:			
Reason:			
Action:			
Reason:			

Please detail any new actions required since completing the original EQIA and reasons:

		To be completed by	
		Date	Initials
Action:			
Reason:			
Action:			
Reason:			

Please detail any discontinued actions that were originally planned and reasons:

Action:	
Reason:	
Action:	
Reason:	

Please write your next 6-month review date

Name of completing officer:

Date submitted:

If you would like to have your 6 month report reviewed by a Quality Assuror please e-mail to: alastair.low@ggc.scot.nhs.uk