

## Equality Impact Assessment

### Part 1: Background and information

<b>Title of proposal</b>	Strategic Plan for Fife 2023 to 2026
<b>Brief description of proposal (including intended outcomes &amp; purpose)</b>	<p>Every Integration Joint Board in Scotland has to have a Strategic Plan that sets out the vision and future direction of their health and social care services. This includes how the nine National Health and Wellbeing Outcomes for Health and Social Care will be delivered locally, along with the six Public Health Priorities for Scotland. Strategic Plans are reviewed regularly to make sure that they are still relevant to the needs of the area and the people who live there.</p> <p>The previous Strategic Plan for Fife covered the timescale 2019 to 2022. Lots of things have changed since then, both nationally and locally. To ensure that the people who live, visit, or work in Fife have opportunities to influence the Strategic Plan, we worked with a range of service users, patients, carers, employees, and service providers, to find out what is important to them and what the Health and Social Care Partnership should be focussed on over the next three years.</p> <p>We also considered the aims outlined in the Plan for Fife 2017 to 2027 which includes actions to reduce levels of preventable ill health, and premature mortality across all communities, particularly around obesity, alcohol and smoking.</p> <p>The Partnership undertook a Strategic Needs Assessment in 2022 which considered recent demographic changes, and those predicted over the next few years, at both local and Fife level. It is likely that these changes will have a significant influence moving forward, for example as more people live longer there is an increased demand for health and social care services that support multiple or complex health conditions such as dementia or diabetes.</p> <p>All of these factors have informed and shaped the development of this new Strategic Plan for Fife which sets out an updated vision for the next three years (2023 to 2026).</p>

<b>Lead Directorate / Service / Partnership</b>	Fife Health and Social Care Partnership
<b>EqIA Lead Person</b>	Fiona McKay Head of Strategic Planning, Performance & Commissioning
<b>EqIA Contributors</b>	<ul style="list-style-type: none"> <li>• Senior Leadership Team</li> <li>• Extended Leadership Team</li> <li>• Strategic Planning Group</li> <li>• Strategic Plan Working Group</li> <li>• Locality Core Groups</li> <li>• Members of the public involved in some of the Partnership's public engagement events.</li> </ul>
<b>Date of EqIA</b>	September 2022

**How does the proposal meet one or more of the general duties under the Equality Act 2010?** (Consider proportionality and relevance on p.12 and see p.13 for more information on what the general duties mean). If the decision is of a strategic nature, how does the proposal address socio-economic disadvantage or inequalities of outcome?)

<b>General duties</b>	<b>Please Explain</b>
Eliminating discrimination, harassment and victimisation	<p>The new Strategic Plan and range of supporting strategies will ensure that we work effectively with partners, staff, local communities, and individuals, to challenge sources and biases towards inequality.</p> <p>For example, the Fife Immunisation Strategic Framework has supported improved wellbeing and reduced health inequalities by providing equitable access to immunisation for all eligible groups. This was achieved by a number of initiatives including:</p> <ul style="list-style-type: none"> <li>• Timing of sessions</li> <li>• Mobile Units</li> <li>• Specific sessions (for individuals who were shielding or high risk)</li> </ul>

	<p>Another example is the Partnership’s Alcohol and Drug Strategy which has reduced discrimination through increased assertive outreach approaches for those in custody and in prison, and helped to reduce harm by providing specialist support where needed.</p> <p>The Partnership’s Equality Outcomes and Mainstreaming Report is currently being refreshed (November 2022). This will ensure alignment with the priorities in the new Strategic Plan.</p>
<p>Advancing equality of opportunity</p>	<p>Locality Action Plans are currently being developed for each of the seven localities in Fife. Final versions of the Plans are due to be published in March 2023.</p> <p>Work already underway includes engagement on the Home First Strategy which aims to reduce and prevent hospital admissions, improve discharge from hospital for those who do require treatment, and enable people to live well at home or in a homely setting, for longer.</p> <p>National restrictions during the coronavirus pandemic resulted in some face-to-face services being reduced. The Partnership has worked hard to reinstate services wherever practically possible, for example the Wells have now returned to a full face-to-face service in all seven localities. The Wells enable people to speak directly to health and social care professionals and to discuss any concerns regarding their health and wellbeing. This could include carer support, social isolation, housing, benefits, bereavement or any health or social care issue.</p> <p>The strategic priority linked to our Local theme is ‘A Fife where we will enable people and communities to thrive’.</p> <p>We will work with individuals, local communities, staff, and partners to provide personalised care, by the right person, in the right place, and at the right time.</p>
<p>Fostering good relations</p>	<p>The Strategic Plan has been developed by the Partnership’s Strategic Planning Group and the Strategic Plan Working Group. These groups have multi-agency membership</p>

	<p>including relevant colleagues from the independent and third sectors, and public representation.</p> <p>The Engagement Overview for the development of the Strategic Plan includes consultation and engagement with a wide range of stakeholders, groups and organisations. This has ensured that a wider range of individuals have had the chance to provide their views and feedback, and to influence the direction of the Strategic Plan over the next three years.</p> <p>The Partnership continues to promote inclusiveness. A recent example being the setting up of a dedicated Team to support carer involvement and promote participation and engagement by unpaid carers and other individuals.</p> <p>Our Sustainable theme includes this strategic priority ‘A Fife where we will ensure services are inclusive and viable’.</p> <p>We will work together to identify unpaid carers within our communities, and increase the support available for carers, including enabling regular breaks for carers, and supporting all models of care.</p> <p>We will work with our partners in the third and independent sector to deliver services that are collaborative.</p>
Socio-economic disadvantage	<p>We recognise that low income and reduced access to resources, can impact negatively on people’s health and wellbeing. For example, it can affect an individual’s ability to:</p> <ul style="list-style-type: none"> <li>• have safe, good quality, accessible housing,</li> <li>• access their local community and families for support,</li> <li>• access to nutritious food, and know how to prepare/cook fresh produce,</li> <li>• buy fuel to heat homes and cook nutritious meals.</li> </ul> <p>Our Wellbeing theme is linked to the strategic priority ‘A Fife where we will support early</p>

	<p>intervention and prevention’.</p> <p>We will support people to develop and maintain the knowledge to manage their own health conditions and lead healthier lives.</p> <p>We will actively promote opportunities and knowledge in our citizens and staff that support reducing the risk of harms, and give individuals confidence to look after their health, to the best of their abilities</p> <p>We will maximise opportunities to provide safe, sustainable, and appropriate housing.</p>
<p>Inequalities of outcome</p>	<p>Outcomes is a key theme of the new Strategic Plan, and the related strategic priority is ‘A Fife where we will promote dignity, equality, and independence’.</p> <p>This approach embeds equalities in our practice and ensures that we will, as appropriate, target specific actions to support communities and individuals most at risk of harm from inequalities. In addition, we will actively work to improve health and wellbeing outcomes across Fife.</p> <p>The Partnership has several initiatives designed to reduce or remove inequalities of outcome. For example, the Shared Lives Fife service provides family-based care in the homes of carers to adults with disabilities or mental health difficulties. Families and individuals are carefully matched to support adults to live their lives as fully as possible.</p> <p>Link Life Fife provides support for adults to help manage stress or anxiety that is affecting their mental health or general well-being. Individuals can be referred to Link Life Fife by their GP or Primary Care Team.</p> <p>The Partnership’s Deaf Communication Service provide advice and support for the deaf community and work closely with local communities to remove barriers to communication for people affected by deafness.</p>

Having considered the general duties above, if there is likely to be no impact on any of the equality groups, parts 2 and 3 of the impact assessment may not need to be completed. Please provide an explanation (based on evidence) if this is the case.

An Equality Impact Assessment is required.

## Part 2: Evidence and Impact Assessment

Explain what the positive and / or negative impact of the policy change is on any of the protected characteristics

<b>Protected characteristic</b>	<b>Positive impact</b> (May benefit an equality group.)	<b>Negative impact</b> (Could disadvantage an equality group.)	<b>Mitigations</b> (Steps we will take to reduce the risk of disadvantage by an equality group.)
Age (including older people aged 65+)	By ensuring that individuals have appropriate opportunities and accessible routes to get involved in the development of the Strategic Plan these stakeholders will be able to provide feedback on the Plan, and their views on the priorities that should be taken forward by the Partnership over the next three years.	<p>Failure to consider and mitigate the specific barriers faced by children or older people when developing the Strategic Plan would serve to exclude them from the engagement process and fail to capture their feedback in relation to health and social care services important to them.</p> <p>Potential barriers include:</p> <ul style="list-style-type: none"> <li>• arranging engagement activities during school hours, or in locations with little or no public transport.</li> <li>• failure to consider the differential knowledge or experience of using more modern, often digital, engagement</li> </ul>	<p>Discussion and collaboration with partners and community groups that have experience and expertise in engaging with people of different ages will enable the Partnership to identify and mitigate the potential barriers that children and older people may face, and then take reasonable steps to reduce or remove these barriers.</p> <p>Mitigations include:</p> <ul style="list-style-type: none"> <li>• providing easy-ready versions, and information that is accessible to individuals with a range of competences, reading skills, and different levels of capacity.</li> </ul>

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		<p>methods, or failure to consider the accessibility requirements of older people.</p>	<ul style="list-style-type: none"> <li>• ensuring opportunities to engage are inclusive and cover an appropriate range of formats, for example digital, telephone, and face-to-face.</li> <li>• arranging physical engagement activities in locations that are accessible for the intended audience.</li> </ul>
<p>Disability (Mental, Physical, Sensory, and Carers of Disabled People)</p>	<p>By ensuring that individuals have appropriate opportunities and accessible routes to get involved in the development of the Strategic Plan these stakeholders will be able to provide feedback on the Plan, and their views on the priorities that should be taken forward by the Partnership over the next three years.</p>	<p>Failure to consider and mitigate the specific barriers faced by people with mental and physical disabilities when developing the Strategic Plan would serve to exclude them from the engagement process and fail to capture their feedback in relation to health and social care services important to them.</p> <p>Potential barriers include:</p>	<p>Discussion and collaboration with partners and community groups that have experience and expertise in engaging with people with mental and physical disabilities will enable the Partnership to identify and mitigate the potential barriers that disabled people face, and then take reasonable steps to reduce or remove these barriers.</p> <p>Mitigations include:</p>

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		<ul style="list-style-type: none"> <li>• arranging engagement activities in buildings that lack appropriate access, or venues that require significant or specific travel arrangements.</li> <li>• providing limited access options, for example digital-only consultations, or failure to provide easy-read versions.</li> </ul>	<ul style="list-style-type: none"> <li>• arranging physical engagement opportunities in locations with disabled access and appropriate facilities such as induction loops, interpreters, or extra staff assistance if required.</li> <li>• providing consultations and other information in alternative formats.</li> <li>• ensuring opportunities to engage are inclusive and cover an appropriate range of formats, for example digital, telephone, and face-to-face.</li> </ul>
Gender Reassignment	By ensuring that individuals have appropriate opportunities and accessible routes to get involved in the development of the Strategic Plan these stakeholders will be able to provide feedback on the Plan,	Failure to consider and mitigate the specific barriers faced by transgender people when developing the Strategic Plan would serve to exclude them from the engagement process and fail to capture	Discussion and collaboration with partners and community groups that have experience and expertise in engaging with transgender people will enable the Partnership to identify and mitigate the potential barriers

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	<p>and their views on the priorities that should be taken forward by the Partnership over the next three years.</p>	<p>their feedback in relation to health and social care services important to them.</p> <p>Potential barriers include:</p> <ul style="list-style-type: none"> <li>• failure to provide sufficient privacy during engagement opportunities, as some individuals may prefer not to share their views in a public forum.</li> <li>• providing forms or surveys which do not include appropriate options for pronouns and gender (natal, identified, and expressed).</li> <li>• arranging activities in venues that do not provide suitable facilities for transgender people, for example buildings which only provide gender-neutral or single</li> </ul>	<p>that individuals may face, and then take reasonable steps to reduce or remove these barriers.</p> <p>Mitigations include:</p> <ul style="list-style-type: none"> <li>• ensuring opportunities to engage are inclusive, and enabling individuals to contribute in confidence where preferred.</li> <li>• signposting alternative formats that can be utilised in a confidential setting, for example providing details of online surveys during public events.</li> <li>• arranging events in venues that provide appropriate facilities and signage for transgender people.</li> </ul>

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		sex, toilets, signage, and other amenities.	
Marital Status (Marriage and Civil Partnerships)	It is unlikely that an individual's marital status will have an impact on their opportunity to review or provide feedback on the Strategic Plan.	N/A	N/A
Pregnancy and Maternity	By ensuring that individuals have appropriate opportunities and accessible routes to get involved in the development of the Strategic Plan these stakeholders will be able to provide feedback on the Plan, and their views on the priorities that should be taken forward by the Partnership over the next three years.	<p>Failure to consider and mitigate the specific barriers faced by women who are pregnant or breastfeeding when developing the Strategic Plan would serve to exclude them from the engagement process and fail to capture their feedback in relation to health and social care services important to them.</p> <p>Potential barriers include:</p> <ul style="list-style-type: none"> <li>• arranging engagement activities in venues that have limited access or facilities for women who are pregnant or breastfeeding.</li> </ul>	<p>Discussion and collaboration with partners and community groups that have experience and expertise in engaging with women who are pregnant or breastfeeding, will enable the Partnership to identify and mitigate the potential barriers that individuals may face, and then take reasonable steps to reduce or remove these barriers.</p> <p>Mitigations include:</p> <ul style="list-style-type: none"> <li>• ensuring opportunities to engage are inclusive and cover an appropriate range of formats, for example</li> </ul>

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			<p>digital, telephone, and face-to-face.</p> <ul style="list-style-type: none"> <li>• providing multiple engagement opportunities so that individuals have several opportunities to get involved and provide their views on the Strategic Plan.</li> <li>• providing appropriate support so that women can breastfeed during engagement opportunities.</li> </ul>
Race (All Racial Groups including Gypsy/Travellers)	By ensuring that individuals have appropriate opportunities and accessible routes to get involved in the development of the Strategic Plan these stakeholders will be able to provide feedback on the Plan, and their views on the priorities that should be taken forward by the Partnership over the next three years.	Failure to consider and mitigate the specific barriers faced by some ethnic and racial groups when developing the Strategic Plan would serve to exclude them from the engagement process and fail to capture their feedback in relation to health and social care services important to them.	Discussion and collaboration with partners and community groups that have experience and expertise in engaging with ethnic and racial groups will enable the Partnership to identify and mitigate the potential barriers that individuals may face, and then take reasonable steps to reduce or remove these barriers.

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		<p>Potential barriers include:</p> <ul style="list-style-type: none"> <li>• providing limited access options, for example digital-only consultations, or failure to provide information in different languages.</li> <li>• arranging engagement activities in venues that may be difficult for some individuals to access, or at times that may be restrictive.</li> </ul>	<p>Mitigations include:</p> <ul style="list-style-type: none"> <li>• ensuring that interpretation services, including interpreting tools and face-to-face interpreters, are available if/when required.</li> <li>• providing consultations and other information in alternative formats and languages.</li> <li>• organising engagement events in accessible locations and offering tailored opportunities where required.</li> </ul>
Religion, Belief, and Non-Belief	By ensuring that individuals have appropriate opportunities and accessible routes to get involved in the development of the Strategic Plan these stakeholders will be able to provide feedback on the Plan, and their views on the priorities	Failure to consider and mitigate the specific barriers faced by individuals with particular religious or philosophical beliefs, or individuals connected to someone who has a particular religion or belief, when	Discussion and collaboration with partners and community groups that have experience and expertise in engaging with individuals that have particular religious or philosophical beliefs will enable the Partnership to identify and

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	that should be taken forward by the Partnership over the next three years.	<p>developing the Strategic Plan would serve to exclude them from the engagement process and fail to capture their feedback in relation to health and social care services important to them.</p> <p>Potential barriers include:</p> <ul style="list-style-type: none"> <li>• arranging engagement activities on specific days or at times that are likely to be restrictive for particular religious groups.</li> <li>• holding all engagement activities in religious venues, for example churches or denominational schools.</li> <li>• providing information and materials that contain content that could be perceived as discriminatory towards particular groups.</li> </ul>	<p>mitigate the potential barriers that individuals may face, and then take reasonable steps to reduce or remove these barriers.</p> <p>Mitigations include:</p> <ul style="list-style-type: none"> <li>• ensuring opportunities to engage are inclusive and cover an appropriate range of formats, for example digital, telephone, and face-to-face.</li> <li>• providing multiple engagement opportunities so that individuals have several opportunities to get involved and provide their views on the Strategic Plan.</li> <li>• ensuring that engagement materials and other information do not contain biased or</li> </ul>

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			potential discriminatory content.
Sex (Women and Men)	By ensuring that individuals have appropriate opportunities and accessible routes to get involved in the development of the Strategic Plan these stakeholders will be able to provide feedback on the Plan, and their views on the priorities that should be taken forward by the Partnership over the next three years.	<p>Failure to consider and mitigate the specific barriers faced by individuals of a particular sex when developing the Strategic Plan would serve to exclude them from the engagement process and fail to capture their feedback in relation to health and social care services important to them.</p> <p>Potential barriers include:</p> <ul style="list-style-type: none"> <li>• arranging engagement activities in locations, and/or on specific day and times that are likely to be restrictive for particular groups, for example holding all public meetings at times, or in locations, that are inaccessible for</li> </ul>	<p>Discussion and collaboration with partners and community groups that have experience and expertise in engaging with individuals of a particular sex will enable the Partnership to identify and mitigate the potential barriers that individuals may face, and then take reasonable steps to reduce or remove these barriers.</p> <p>Mitigations include:</p> <ul style="list-style-type: none"> <li>• ensuring opportunities to engage are inclusive and cover an appropriate range of formats, for example digital, telephone, and face-to-face.</li> <li>• providing multiple engagement opportunities so that</li> </ul>

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		individuals with child-care responsibilities.	<p>individuals have several opportunities to get involved and provide their views on the Strategic Plan.</p> <ul style="list-style-type: none"> <li>• arranging physical engagement activities in locations that are accessible for the intended audience and offering tailored opportunities where required.</li> </ul>
Sexual Orientation (Heterosexual, Gay, Lesbian and Bisexual)	By ensuring that individuals have appropriate opportunities and accessible routes to get involved in the development of the Strategic Plan these stakeholders will be able to provide feedback on the Plan, and their views on the priorities that should be taken forward by the Partnership over the next three years.	Failure to consider and mitigate the specific barriers faced by individuals who are (or who are perceived as) heterosexual, gay, lesbian or bisexual, when developing the Strategic Plan would serve to exclude them from the engagement process and fail to capture their feedback in relation to health and social care services important to them.	Discussion and collaboration with partners and community groups that have experience and expertise in engaging with individuals who are (or who are perceived as) heterosexual, gay, lesbian or bisexual, will enable the Partnership to identify and mitigate the potential barriers that individuals may face, and then take reasonable steps to reduce or remove these barriers.

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		<p>Potential barriers include:</p> <ul style="list-style-type: none"> <li>• failure to provide sufficient privacy during engagement opportunities, as some individuals may prefer not to share their views in a public forum.</li> <li>• providing forms or surveys which do not include appropriate options for sexual orientation.</li> </ul>	<p>Mitigations include:</p> <ul style="list-style-type: none"> <li>• ensuring opportunities to engage are inclusive, and enabling individuals to contribute in confidence where preferred.</li> <li>• signposting alternative formats that can be utilised in a confidential setting, for example providing details of online surveys during public events.</li> </ul>

Please also consider the impact of the policy change in relation to:

	<b>Positive impact</b>	<b>Negative impact</b>	<b>No impact</b>
Carers	<p>Many carers are included in the protected characteristics groups highlighted above. This includes carers who are in protected characteristics groups themselves, and individuals who care for other people that are in protected characteristics groups.</p> <p>All carers are included in the Partnership's Carers Strategy and the supporting delivery plan, guidance, and procedures. This approach ensures that carers, requirements, and potential impacts on their health and wellbeing, as well as their capacity to undertake their caring role, are considered in all planning and decision-making.</p>	<p>Changes to the way that services are delivered can impact on individuals, and the people who care for them. For example, reductions in service provision for the individual can have a negative impact on the carers' health and wellbeing, work role, family relationships or other commitments.</p> <p>The risk of adverse impacts will be addressed through the implementation of the Carers Strategy and proactive inclusion of carers in service planning, decision-making, and delivery.</p>	
Looked After Children and Care Leavers	<p>These groups are included in the mitigations highlighted above.</p>		X

Privacy (including information security, data protection, and human rights)	Fife Health and Social Care Partnership has robust procedures in place to ensure compliance with legislative requirements including data protection and privacy rights.		X
Economy	The Partnership's Medium-Term Financial Strategy includes appropriate mitigations for potential economic impacts.		X

- Please record the evidence used to support the impact assessment. This could include officer knowledge and experience, research, customer surveys, service user engagement.
- Any evidence gaps can also be highlighted below.

<b>Evidence used</b>	<b>Source of evidence</b>
1. Equality Outcomes and Mainstreaming Report	Legislative requirements, benchmarking, stakeholder input.
2. Locality Action Plans	Multi-agency discussions.
3. Engagement Overview	Ongoing engagement with key stakeholder groups.
4. Annual Performance Report 2021 to 2022	Service updates and case studies.

### Part 3: Recommendations and Sign Off

#### Sign off

(By signing off the EqIA, you are agreeing that the EqIA represents a thorough and proportionate analysis of the policy based on evidence listed above and there is no indication of unlawful practice and the recommendations are proportionate.

Date completed: September 2022	Date sent to Community Investment Team: 6 <sup>th</sup> October 2022. <a href="mailto:Enquiry.equalities@fife.gov.uk">Enquiry.equalities@fife.gov.uk</a>
Senior Officer Name: Fiona McKay	Designation: Head of Strategic Planning, Performance & Commissioning

#### FOR COMMUNITY INVESTMENT TEAM ONLY

EqIA Ref No.	Strategic Plan for Fife 2022 to 2026
Date checked and initials	ZR 22.11.2022