

Equality Impact Assessment including Children's Rights and Wellbeing Impact Assessment (CRWIA)

Part 1: Background and Information

Title of proposal	Fife Primary Care Strategy 2023 – 2026 – Stage 1 EQIA
Brief description of proposal (including intended outcomes &	The Fife Primary Care Strategy 2023 – 2026 focuses on the recovery of primary care (post COVID-19 Pandemic), improving quality and making services more sustainable to achieve the strategic ambition to have a resilient and thriving primary care at the heart of an integrated health and social care system. This system will support the delivery of excellent, high quality, accessible and sustainable services for the population of Fife, by;
purpose)	Recovery of Primary Care Establishing a clear culture, narrative, and purpose Focusing on person, patients, carers, and population Enhancing access to Primary Care Services Improving communication, enabling information technology, sharing records, and securing fit for purpose estates Improving Quality Supporting Clinical Transformation Supporting Clinical Transformation Supporting Cluster and locality-based approaches Establishing integrated care teams Focusing on innovation, quality, data, and performance Reducing inequalities Making Our System Sustainable Workforce development and motivation Having Engaged and visible leadership Delivering Finance and contractual frameworks Engaging and supporting the independent contractor business model This strategy recognises the importance of self-care and self-management. Most of the time, people use their own personal and community assets to manage their health and wellbeing and achieve the outcomes that matter to them. Primary care professionals enhance this by providing accessible health care and support to individuals and families in the community, when it is needed, at whatever stage of life. Strong primary care systems are positively associated with better health outcomes and a good primary care system will provide high-quality care for the population it serves, prioritise those at highest risk, support those with long-term conditions to self-manage these conditions as
	well as possible and play a significant role in longer-term prevention and early detection of disease and harm. The scope of this strategy includes General Medical Services, Primary Care Dental Services (General Dental Services and the Public Dental Service), Community Pharmacy Services and Community Optometry Services (High Street Opticians).

	Development of this primary care strategy supports a collaborative whole systems approach across NHS Fife and Fife Health and Social Care Partnership to provide services that are safe and accessible and reflect the needs and demands of the population. The strategy focuses on recovery, quality, and sustainability to improve outcomes for individuals, local communities and to reduce health inequalities.
	The Fife Primary Care Strategy 2023 – 2026 describes how the Fife Health and Social Care Partnership aims to improve all Primary Care Services across Fife to;
	Provide high-quality care for the population it serves
	Prioritise those at highest risk
	Support those with long-term conditions to self-manage these conditions as well as possible
	Play a significant role in longer-term prevention and early intervention/detection of disease and harm.
Lead Directorate / Service / Partnership	Fife Health and Social Care Partnership
EqIA Lead Person	Sarah Howard-Stone, Project Manager – Primary Care Transformation Programme
EqIA Contributors	Lisa Cooper – Head of Service, Primary and Preventative Care Services Christopher Conroy – Programme Director – Primary Care Transformation Programme Heather Bett, Senior Manager, Children's Services Fife HSCP
Date of EqIA	17/07/2023

How does the proposal meet one or more of the general duties under the Equality Act 2010?

Please refer to the HSCP Equality Impact Assessment Guidance.

Consider proportionality and relevance (See Page 10 of Guidance).

General duties	Please Explain
Eliminating discrimination, harassment, and victimisation	The Primary Care Strategy intends to develop Primary Care Services through transformation and change to improve access for patients by delivering improvement to reduce inequalities. The nature of the Strategy will eliminate discrimination across the population of NHS Fife. Any areas of discrimination identified during the planning and delivery stages – these will form essential elements of the deliverables and the work to be taken forward.
Advancing equality of opportunity	The Strategy will provide opportunities to deliver equitable services across Fife. Advance equality of opportunity will be delivered by reducing the gaps between communities and by providing all communities with the same access to Primary Care Services.
Fostering good relations	When planning and delivering the Strategy, work will take place to communicate with different community forums and groups and by doing this the ambition is that good relationships will be established, co-design will be enabled with this seen as essential to provide opportunities for accessible and sustainable services to be delivered and sustained.

If the decision is of a strategic nature, how does the proposal address socio-economic disadvantage or inequalities of outcome?

Fairer Scotland duty	Please Explain
Socio-economic disadvantage	The Strategy recognises that there are areas within Fife that are socio-economically disadvantaged and that there is a need to improve access to services for these areas. It proposes several initiatives that will reduce boundaries and encourage individuals to access services within Primary Care (eg: GP, Dentist). A performance framework will ensure a targeted approach focused on continuous improvement which will be monitored and reported to the Quality and Communities Committee of the IJB
Inequalities of outcome	The Strategy identifies areas of inequality and recognises that individuals in these areas are less likely to access Primary Care Services for many reasons. The two key deliverables including – Expansion of the Multidisciplinary Team and Development of GP Clusters to ensure engagement with locality and community planning will improve access to services and contribute to reducing the inequalities of outcome for these areas.

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 to inform and assure how the strategic focus of recovery, quality and sustainability will reduce inequalities and improve access to care for the people of Fife

Part 2: Evidence and Impact Assessment

Explain what the positive and / or negative impact of the strategy is on any of the protected characteristics. If there is no impact, please explain why.

				equality group.)	the risk of disadvantage by an equality group.)	
A review of the population across Fife is included in The Strategy to ensure that it is inclusive, consideration has been given to the population along with the growth of the over 65 population and how this is projected to increase which will create additional demands for health and social care services moving forward;			A performance and assurance framework which will include measures to evidence reduction in inequalities will ensure oversight and monitoring of delivery accountable to the IJB via the agreed governance structure	There are no perceived negative impacts as this strategy will focus on quality to improve access to services for all people across Fife		
·	2020	2043				
0-15	64,152	53,544	-17%			
	231,809		+			
65+	78,169	101,424	+30%			
The population within Fife in 2020 was 374,000 people and it is predicted to be 364,164 people. The Strategy reflects the aims to reduce the barriers to Health and Social Care for all ages across Fife.						
 The participation and engagement consultation gained feedback on the following areas: Communication, Workforce, Premises, Technology and Finance. The demographic of those who provided feedback is: 156 people took part either online or face to face. 88 staff provided feedback - 70% of these were female and the overall ages were between 35 and 54. 68 members of public provided feedback with equal representation from male and female. 						
	consideration along with the and how this is create addition care services in Population De 0-15 16-64 65+ The population people and it is The Strategy reported barriers to Hearing ained feedba Communication and Finance. The provided feedle and Finance of the service of t	consideration has been given along with the growth of the and how this is projected to it create additional demands for care services moving forward. Population Demographic 2020 0-15 64,152 16-64 231,809 65+ 78,169 The population within Fife in people and it is predicted to be a trivial to the strategy reflects the aims barriers to Health and Social Fife. The participation and engage gained feedback on the follow Communication, Workforce, and Finance. The demograph provided feedback is: 156 people took part eit face. 88 staff provided feedback were female and the own between 35 and 54. 68 members of public prequal representation from the staff of the st	consideration has been given to the popula along with the growth of the over 65 populand how this is projected to increase which create additional demands for health and care services moving forward; Population Demographic 2020 2043 0-15 64,152 53,544 16-64 231,809 209,218 65+ 78,169 101,424 The population within Fife in 2020 was 374 people and it is predicted to be 364,164 per The Strategy reflects the aims to reduce the barriers to Health and Social Care for all agained feedback on the following areas: Communication, Workforce, Premises, Tecand Finance. The demographic of those with provided feedback is: 156 people took part either online or face. 88 staff provided feedback - 70% of the were female and the overall ages were between 35 and 54. 68 members of public provided feedback equal representation from male and fages ranged from 45 and above with	consideration has been given to the population along with the growth of the over 65 population and how this is projected to increase which will create additional demands for health and social care services moving forward; Population Demographic 2020 2043	consideration has been given to the population along with the growth of the over 65 population and how this is projected to increase which will create additional demands for health and social care services moving forward; Population Demographic 2020 2043	consideration has been given to the population along with the growth of the over 65 population and how this is projected to increase which will create additional demands for health and social care services moving forward; Population Demographic 2020 2043

Protected characteristic	Positive impact (May benefit an equality group.)	Negative impact (Could disadvantage an equality group.)	Mitigations (Steps we will take to reduce the risk of disadvantage by an equality group.)	No Impact
	The Strategy should have a positive impact for all age groups across NHS Fife as it will be delivering transformation to improve services in a safe, sustainable manner and of a high quality.			
Disability (Mental, Physical, Sensory, and Carers of Disabled People)	The Strategy considers the ageing population, as detailed above, along with the demand for unpaid care and how this will place greater pressure on public resources (Primary Care – health and social care). The aims within the Strategy should have a positive impact on patients with Disabilities as; The Strategy considers how Communication will be developed for the population of Fife around Primary Care Services and recognises that patients/residents need to be involved in the development of services to help shape and inform improvements.	A key priority within the Strategy is Digital Developments to support services being more widely accessible to people who cannot access services via the usual channels (e.g.: telephoning for an appointment, etc). The Strategy also recognises the issues around digital exclusion, and that work will need to be taken forward to ensure that this does not become a barrier for people.	A stage 2 EQIA will be completed to ensure inclusivity for all patients.	
	One of the Priorities within the Strategy is Premises and how these need to be reviewed with locality and accessibility considered to ensure they support the ongoing transformation required to delivery high quality primary care services to the whole population of Fife.			
	It also recognises the need to deliver services within a shared facility, to prevent patients having to attend multiple appointments and locations. When reviewing premises consideration should be given around accessibility of these premises. All developments relating to premises will have an EQIA completed to assess the impact on an individual basis.			
Gender Reassignment	Review of premises gives the opportunity to consider the needs of this population The focus on health inequalities will provide the opportunity to consult on the specific needs of this population group	Current challenges to access may impact on this group that may find it hard to engage with services, this strategy aims to improve access positively impacting on this group	Ensure ongoing consultation to establish the particular needs of this group Review of premises gives the opportunity to consider the needs	The Strategy should not directly impact based on gender reassignment alone. It considers the need to be inclusive of all communities and how they will access

Protected characteristic	Positive impact (May benefit an equality group.)	Negative impact (Could disadvantage an equality group.)	Mitigations (Steps we will take to reduce the risk of disadvantage by an equality group.)	No Impact
	Digital strategy will allow changes to approaches that will facilitate easier access for this group eg gendered forms Opportunity to ensure staff are trauma informed and able to meet the needs of a diverse group		of this population The focus on health inequalities will provide the opportunity to consult on the specific needs of this population group Digital strategy will allow changes to approaches that will facilitate easier access for this group eg gendered forms Opportunity to ensure staff are trauma informed and able to meet the needs of a diverse group	services.
Marital Status (Marriage and Civil Partnerships)				The Strategy should not directly impact based on marriage and civil partnership alone. It considers the need to be inclusive of all communities and how they will access services.
Pregnancy and Maternity	The Strategy objectives are that services should be accessible for everyone and that a communication plan will be developed to ensure inclusivity. This approach should have a positive impact across all communities within Fife.		Review of premises gives the opportunity to consider the needs of this population ensuring access to suitable breast feeding spaces MDT approach will improve access to services without the need to travel	The Strategy will pro- actively improve Primary Care Services and in doing so, support pregnancy and maternity.
Race (All Racial Groups including Gypsy/Travellers)	The Strategy objectives are that services should be accessible for everyone and that a communication plan will be developed to ensure inclusivity. This approach should have a positive impact across all communities within Fife.	Within the Strategy recognition will be given that there may be the requirement to have focused initiatives for those individuals within our community who do not traditionally engage with Primary and Preventative Care Services.	The Strategy recognises the requirements for a communication plan, this plan will take cognisance of communities who may not traditionally engage with Primary and Preventative Care Services to reduce inequalities in this area.	The Strategy should not directly impact based on race alone. It considers the need to be inclusive of all communities and how they will access services.

Religion, Belief, and Non-Belief	The Strategy objectives are that services should be accessible for everyone and that a communication plan will be developed to ensure inclusivity. This approach should have a positive impact across all communities within Fife.	As above	As above	The Strategy should not directly impact based on religion and belief or spiritual care alone. It considers the need to be inclusive of all communities and how they will access services.
Sex (Women and Men)	The Strategy objectives are that services should be accessible for everyone and that a communication plan will be developed to ensure inclusivity. This approach should have a positive impact across all communities within Fife.	As above	As above	The Strategy does not distinguish between genders as it considers the entire population across Fife. It recognises that access to services for those people at highest risk needs to be a priority for all.
Sexual Orientation (Heterosexual, Gay, Lesbian and Bisexual)	By considering Different models of care services may be more accessible for people of different sexual orientation MDT may make more gender specific services available The focus on health inequalities will provide the opportunity to consult on the specific needs of population groups	As above	As above	The Strategy should not directly impact based on sexual orientation alone. It considers the need to be inclusive of all communities and how they will access services.

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

	Positive impact	Negative impact	Mitigations	No Impact
Armed Forces Community	The strategy will ensure inclusive access to care for people across Fife including people and families within the armed forces			The Strategy should not directly impact on individuals within the armed forces, veterans, and their family members. It considers the need to be inclusive of all communities and how they will access services.
Carers	The Strategy recognises the needs of carers when accessing Primary and Preventative Care Services including that this may be difficult due to their individual circumstances.	Carers may be disadvantaged when accessing services/or when there are changes to services provided to those they care for. Often these impacts can be significant, such as affecting their ability to combine caring with employment, a breakdown in the caring role, economic hardship, or a negative impact on the carer's own health and wellbeing.	The Strategy makes provision for supporting carers and working collaboratively with them to access services, advice, guidance, and information they need along with being able to direct them to available practice support if needed. The Strategy also references the ambitions within the Partnerships Carers Strategy along with how it supports its' delivery.	
Looked After Children and Care Leavers			Services should use easy to access approaches and the digital approach will support this Opportunities to develop the workforce to ensure trauma informed Opportunity to provide enhanced MDT services that meet wider needs Consultation to be undertaken with CE young people	The Strategy should not directly impact on looked after children and care leavers as it considers the need to be inclusive of all communities and how they will access services.
Privacy (including information security, data protection, and human rights)	Digital transformation is a key enabler and priority for the plan and there are no perceived impacts	No perceived impact	Data Protection Impact Assessments will be completed when appropriate in alignment with service development	The Strategy should not directly impact on privacy. The improvements within the Strategy will be introduced whilst taking cognisance of privacy and all regulations

				that are relevant.
Economy	The Strategy recognises that	There is a risk due to national legislation	Remobilisation of Oral	
,	children and adults from the most	challenges that recovery may not occur at	improvement programmes to	
	deprived areas are less likely to	the pace required to improve access for all	support prevention and early	
	access Primary Care Services,	people across Fife	intervention	
	namely Dental Treatment. The		Recovery and Quality as	
	Strategy proposes a number of		strategic focus: Ensuring	
	initiatives that will reduce these		effective communication and	
	inequalities by increasing accessing		digital plans as key enablers	
	and support for those in deprived		are critical to supporting	
	areas.		access to care in the right	
			place at the right time and	
			signposting people to the	
			service and agencies best for	
			their health and care needs	

- 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.

Evidence used	Source of evidence
Information within the Strategy	Primary Care Strategy 2023-2026
Feedback Information	Primary Care Strategy 2023-2026 – Participation and Engagement
	Consultation Summary
Evidence gaps	Planned action to address evidence gaps
Voice of children and young people	A P&E plan will be created and implemented as strategy is progressed

If this proposal will impact on children/young people's rights either directly or indirectly, please complete Part 3. If this proposal will have no impact on children/young people's rights, please provide an explanation below and continue to Part 5.

A Children's Rights and Wellbeing Impact Assessment (CRWIA) is required

Part 3 – Children's Rights & Wellbeing Impact Assessment

Which UNCRC Articles are relevant to the policy/procedure/strategy/practice (Please check Guidance for information)	Article 24 – Every child has a right to health care, Article 12 - Every child has the right to have a say in all matters affecting them, and to have their views taken seriously.
What impact will the policy/procedure/ strategy/practice have on children's rights?	☐ Negative☑ Positive☐ Neutral
Will there be different impacts on different groups of children and young people?	The Strategy should not have different impacts on different groups of children and young people as it considers all the need to be inclusive of all communities and groups.
What options have you considered to modify the policy/procedure/strategy/practice or mitigate any negative impact?	A strategic needs analysis evidenced reduced access and uptake of care across Primary care services in SIMD 1 and 2, this strategy will focus on reducing inequalities including those experienced by children and young people
How will the policy/procedure/strategy/practice contribute to the wellbeing of children and young people?	The Strategy recognises inequalities along with those individuals from deprived areas notably SIMD 1 and 2. It proposes several initiatives to improve access to care which will contribute to the wellbeing of children and young people in alignment with current health improvement programmes e.g. oral health improvement
How will the policy/procedure/strategy/practice promote the Rights of the Child?	The principles of GIRFEC, UNCRC and The Promise will be anchored too as the strategy is implemented. A performance and assurance framework will support ongoing evaluation in line with article 24
Have you engaged with children & young people in the development of this policy/procedure/	☐ Yes – Please complete Part 4
strategy/practice?	⋈ No however engagement will be facilitated when progressing to implementation
	We will ensure C&YP voices are heard and included in future engagement events, development of GP Clusters and Locality Planning structures
	We will consider the needs of specific groups of C&YP e.g. young carers

needs and the impact the strategy may have on their role as a critical element of the P&E plan moving forward

• Please record the evidence used to support the children's rights and wellbeing impact assessment. This could include demographic information, academic research, service monitoring/inspection reports, user surveys etc. Look at what existing evidence tells you about children and young people's views and experiences. Identify any gaps in the evidence base and advise how you will address these.

Evidence used	Source of evidence
Evidence gaps	Planned action to address evidence gaps

Part 4 – Children's Rights & Wellbeing – Engagement and Participation of Children and Young People

Engagement and participation with children and young people should incorporate the 7 golden rules of participation. Please tell us how you made sure these were followed during participation and engagement

1.	Understand my rights	How did you ensure that the child/children or young people had an understanding about their rights?
2.	A chance to be involved	Did children and young people understand the project, and what is being asked of them How did you ensure that all communication was accessible? How did you meet the needs of all children and young people taking part?
3.	Remember it is my choice	How did you make sure you gave children and young people choices?

4)/ I M		
4.	Value Me	How did you make sure that children and young people know their views have been taken	
		seriously and have made an impact?	
5.	Support Me	How did you identify and overcome any barriers to participation?	
6.	Work Together	How well did working together achieve aims of participation?	
7.	Keep in Touch	What have you planned to ensure that children & young people are informed of the	
	rtoop in rodon	outcome/decision?	
Wha	it impact has the engag	gement/participation made?	
	As advised and assured, a participation and engagement programme will be facilitated when the strategy progresses to		
	implementation to ensure voices are heard as we focus on recovery, quality and sustainability of services to ensure they support		
equa	equality of access and care across Fife for everyone		

Part 5: Recommendations and Sign Off
(Recommendations should be based on evidence available at the time and aim to mitigate negative impacts or enhance positive impacts on any or all the protected characteristics).

Recommendation	Lead Person	Timescale

1.A further EQIA will be required once implementation progresses to ensure the children and young people are engaged and listened too	Lisa Cooper	6 months – January 2024
2.		
3.		
4.		
5.		

By signing off the EqIA including CRWIA, you are agreeing that the EqIA including CRWIA 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: 21 June 2023	Date sent to Compliance Team:
	FOI.IJB@fife.gov.uk
Senior Officer Name: Lisa Cooper	Designation: Head of Primary and Preventative Care Services

FOR COMPLIANCE TEAM ONLY

EqIA Ref No.	2023.005
Date checked and initials	3/7/23 - CH