

**Equality and Health Impact Assessment for
Innovate Healthier Together (IHT) Programme Fellowship**

Please read the Guidance Notes prior to commencing this Assessment

Please note:

- The completed Equality and Health Impact Assessment (EHIA) must be:
 - Included as an appendix with the cover report when the strategy, policy, plan, procedure and/or service change is submitted for approval
 - Published on the RUH intranet and internet pages as part of the consultation (if applicable) and once agreed.
- Formal consultation must be undertaken, as required

This template should be used to assess your proposal against the 9 protected characteristics under the Equality Act and those facing health inequalities. In particular those elements of the proposal which support groups at disproportionate risk of facing health inequalities or inequalities associated with their protected characteristic.

If the proposal you want to assess is long, you may wish to assess each section of the document chapter by chapter rather than against each identified characteristic/health inequality, especially where there is an overlap of characteristics and steps identified to advance equality. A further template is provided for this.

Please answer all questions:-

1.	Name of Document/Policy: <i>(For service change, provide the title of the Project Outline Document or Business Case and Reference Number)</i>	<i>Innovate Healthier Together (IHT) Programme Fellowship Equality and Health Impact Assessment</i>
2.	Name of Division and title of lead member of staff, including contact details	<i>Ellie Wetz, Associate Director, IHT, Health Innovation West of England (HIWE) Ellie.Wetz@nhs.net</i>

3.	Objectives of strategy/ policy/ plan/ procedure/ service	<p>HIWE are working in partnership with Bristol, North Somerset and South Gloucestershire Integrated Care Board (BNSSG ICS) to increase the adoption and spread of successful innovative interventions across BNSSG ICS.</p> <p>Aligning itself with workstream 1: developing in innovation infrastructure, one of the programme objectives is to establish a network that will be sustainable beyond the lifetime of the IHT programme (Fellowship).</p>
4.	<p>Evidence and background information considered. For example</p> <ul style="list-style-type: none"> • population data • staff and service users data, as applicable • needs assessment • engagement and involvement findings • research • good practice guidelines • participant knowledge • list of stakeholders and how stakeholders have engaged in the development stages • comments from those involved in the designing and development stages <p>Population demographics for our workforce and local population, (B&NES, Somerset and Wiltshire) are available through the following link:</p>	<p>BNSSG Future Health Report (2022) contains details on demographics across BNSSG, including disparity between different areas within the system and difference in outcomes dependent on these characteristic.</p>
5.	<p>Who will be affected by the strategy/ policy/ plan/ procedure/ service?</p> <p>I.e. does the policy/service change apply to staff, all patients, only certain patient groups, visitors etc.</p>	<p>The Fellowship has the potential to impact upon all staff working in health and care service providers and service users, their carers/family/friends. The IHT team will ensure engagement across the Fellowship (recruitment of Fellows and the benefit of Fellowship activity) is reflective of the diversity of the BNSSG population.</p>

EHIA / How will the strategy, policy, plan, procedure and/or service impact on people?

Questions in this section relate to the impact on people on the basis of their 'protected characteristics' or health inequalities. You should try to complete each section, but it is recognised that different policies/plans will impact proportionally more on some differences more than others, the key is to demonstrate you have thought about the characteristic and can evidence, (where appropriate), how you have engaged that group in the development of the policy/business plan and what steps you've taken to reduce inequality.

How will the strategy, policy, plan, procedure and/or service impact on:-	Commenting on and assessing the equality and health inequalities provisions. <i>For each protected characteristic describe how equality and health inequalities considerations have impacted on the content of the strategy/ policy/ plan/ procedure/ service</i>
6.1 Age For most purposes, the main categories are: <ul style="list-style-type: none"> • under 18; • between 18 and 65; and • over 65 	The Fellowship will exclude anyone below and above working age such as those under 18 and over 65 due to the nature of those employed within health and care settings. However, the impact and benefit of the programme will cover the life-course of the BNSSG population.
6.2 Persons with a disability as defined in the Equality Act 2010 Those with physical impairments, learning disability, sensory loss or impairment, mental health conditions, long-term medical conditions such as diabetes	The Fellowship will not exclude anyone with this protected characteristic, however adjustments will have to be made in line with specific requirements e.g. ensuring venues are accessible.

<p>How will the strategy, policy, plan, procedure and/or service impact on:-</p>	<p>Commenting on and assessing the equality and health inequalities provisions.</p> <p><i>For each protected characteristic describe how equality and health inequalities considerations have impacted on the content of the strategy/ policy/ plan/ procedure/ service</i></p>
<p>6.3 People of different genders: Consider men, women, gender fluid, and non-binary people. Also consider those who have undergone or are undergoing gender reassignment</p> <p><i>NB Gender-reassignment is anyone who proposes to, starts, is going through or who has completed a process to change his or her gender with or without going through any medical procedures. Usually referred to as Trans or Transgender</i></p>	<p>The Fellowship will not exclude anyone within this protected characteristic</p>
<p>6.4 People who are married or who have a civil partner.</p>	<p>The Fellowship will not exclude anyone within this protected characteristic</p>
<p>6.5 Women who are expecting a baby, who are on a break from work after having a baby, or who are breastfeeding. They are protected for 26 weeks after having a baby whether or not they are on maternity leave.</p>	<p>The Fellowship will not exclude anyone within this protected characteristic, however adjustments will be made to ensure they are included within the programme if required.</p>

<p>How will the strategy, policy, plan, procedure and/or service impact on:-</p>	<p>Commenting on and assessing the equality and health inequalities provisions.</p> <p><i>For each protected characteristic describe how equality and health inequalities considerations have impacted on the content of the strategy/ policy/ plan/ procedure/ service</i></p>
<p>6.6 People of a different race, nationality, colour, culture or ethnic origin including non-English speakers, gypsies/travellers, migrant workers</p>	<p>The Fellowship will not exclude anyone within this protected characteristic; however, adjustments/provisions will be put in place should there be any specific requirements such as interpreters.</p>
<p>6.7 People with a religion or belief or with no religion or belief. The term 'religion' includes a religious or philosophical belief</p>	<p>The Fellowship will not exclude anyone within this protected characteristic however adjustments/provisions will be put in place should there be any specific requirements</p>
<p>6.8 People who are attracted to other people of:</p> <ul style="list-style-type: none"> • the opposite sex (heterosexual); • the same sex (lesbian or gay); • both sexes (bisexual) 	<p>The Fellowship will not exclude anyone within this protected characteristic</p>
<p>Health Inequality factors NB: (this may not be required for all strategies/policies – for instance if completing an EHIA for a staff policy, but consideration should be given where appropriate).</p>	
<p>6.9 Consider any other groups and risk factors relevant to this strategy,</p>	<p>NA</p>

<p>How will the strategy, policy, plan, procedure and/or service impact on:-</p>	<p>Commenting on and assessing the equality and health inequalities provisions.</p> <p><i>For each protected characteristic describe how equality and health inequalities considerations have impacted on the content of the strategy/ policy/ plan/ procedure/ service</i></p>
<p>policy, plan, procedure and/or service. Example groups are given in table 1 of the EHIA guidance.</p>	

Please answer question 7.0 following the completion of the EIA and complete the action plan

<p>7.0 Please summarise the potential positive and/or negative impacts of the strategy, policy, plan or service</p>	<p>We have not identified any protected characteristics being excluded from the Fellowship; however, we have acknowledged that there may be some instances where special provision/adjustments may have to be made to support inclusivity within the Fellowship.</p> <p>We acknowledge above we have identified that anyone outside of working age may be not included in the fellowship due to our target cohort, however if anyone expressed an interest in involvement with the Fellowship, we would not exclude them.</p>
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Action Plan for Mitigation / Improvement and Implementation

	Action	Lead	Timescale	Action taken by Division/Directorate.
8.1 What are the key actions identified as a result of completing the EHIA?	Check sign up requirements on BackStage for the event to ensure we have accounted for any special requirements/adjustments on the day of the launch/future events	Eleanor Powell	Continuous	To regularly review stakeholder plan, considering all nine protected characteristics and consider whether additional effort needs to be made to ensure that the IHT Programme leads are engaging with a diverse range of people across the system that reflect the diversity of the BNSSG population.
	Aiming for diverse attendance at all virtual and f2f networking events.	Ellie Wetz	Continuous	Ensure all events are accessible and marketing has appropriately targeted those across the nine protected characteristic groups.
	Ensuring events and all communications are accessible to those with any of the protected characteristics.	Ellie Wetz	Continuous	
	IHT Programme Leads to complete DICE Champion training .	Ellie Wetz	January 2024	DICE Champion training completed

	Action	Lead	Timescale	Action taken by Division/Directorate.
<p>8.2 Is a more comprehensive Equalities Impact Assessment or Health Impact Assessment required?</p> <p>Think about relevance and proportionality to the Equality Act and ask: is the impact significant enough that a formal and full consultation is required?</p>	<p>Not at this stage. We will undertake additional EHIAs on any innovation supported as part of the IHT Programme.</p>	Ellie Wetz	Continuous	
<p>8.3 What are the next steps?</p> <p>Some suggestions:-</p> <ul style="list-style-type: none"> • Decide whether the strategy, policy, plan, procedure and/or service proposal: <ul style="list-style-type: none"> • Continues unchanged as there are no significant negative impacts • Adjusts to account for the negative impacts • Continues despite potential for adverse impact or missed opportunities to advance equality, (set out justifications for doing so) • Stops. • Strategy, policy, plan, procedure and/or service proposal approved • Publish report of this impact assessment • Monitor and review 	<p>Programme Lead to review and approve IHT Fellowship EQIA</p>	Ellie Wetz	30/04/24	