

Equality Impact Assessment Toolkit

DOCUMENT INFORMATION

Version number	V2
Version date	20/06/2025
Status	Approved
Review date	20/06/2026 (annual review)
Key Contact	Halima Dagia, Equality, Diversity and Inclusion Manager: equality@selondonics.nhs.uk
Approved by	Equalities Sub Committee
Target audience	All NHS South East London Integrated Care Board (SELICB) staff with a focus on planning/commissioning team/procurements/policy makers/plans/strategies

Foreword

As the Chief of Staff and the Senior Responsible Officer for Equalities at NHS South East London Integrated Care Board, I can confirm that South East London Integrated Care Board is committed to putting Equality, Diversity, and Inclusion at the heart of everything South East London Integrated Care Board does. We believe that these principles are fundamental to delivering high-quality healthcare services that meet the diverse needs of our community and workforce.

The Equality Act 2010 requires us to evaluate and document the impact of our functions, policies, processes, and decisions on individuals with protected characteristics. Our chosen method for fulfilling this obligation is through conducting thorough and systematic Equality Impact Assessments.

The key purpose of an Equality Impact Assessment is to:

- Promote all aspects of equality.
- Identify whether certain groups are excluded from any of our services.
- Identify any direct or indirect discrimination.
- Assess if there are any positive or negative impacts on particular groups.
- Promote good relations between people of different equality groups.
- Act as a method to improve services.

By embedding Equality Impact Assessments into our service planning and decision-making processes, we ensure that we are not only compliant with the law but also that we are proactive in fostering an environment, which embeds Equality, Diversity and Inclusion. This toolkit has been designed to support you in conducting effective Equality Impact Assessments, providing the necessary guidance and resources to assess and address the impact of our work on all individuals, particularly those with protected characteristics.

We trust that you will find this guidance valuable in your efforts to advance and embed Equality, Diversity, and Inclusion within our organisation. Together, we can ensure that NHS South East London Integrated Care Board continues to provide equitable and high-quality care to all members of our community and workforce.

Tosca Fairchild
Chief Of Staff
Equalities Senior Responsible Officer

Contents

How to use this toolkit.....	4
What is an Equality Impact Assessment?	5
Why are Equality Impact Assessments important?	6
Equality Act 2010	8
Protected Characteristics	9
When to complete an Equality Impact Assessment	11
Roles and responsibilities	13
Equality Impact Assessment process	15
Equality Impact Assessment Process Flow Chart.....	23
Governance Flow Chart	24
Governance Flow Chart explained.....	25
Examples of positive and negative impacts	27
Equality Impact Assessment: Screening Form (EXAMPLE)	29
Equality Impact Assessment: Full Assessment (EXAMPLE)	42
Equality Impact Assessment: Full form (EXAMPLE).....	44
Action plan	52
Equality Impact Assessment check list	56
Glossary.....	58

How to use this toolkit

Welcome to the South East London Integrated Care Board Equality Impact Assessment Toolkit. This comprehensive resource is designed to guide you through conducting effective Equality Impact Assessments, ensuring compliance with the Equality Act 2010, and fostering a fair and inclusive environment within the South East London Integrated Care Board. To get the most out of this toolkit, it should be used in conjunction with the additional resources available on our intranet page on the following link: [Equality, Diversity & Inclusion - Equality Impact Assessment \(EIA\) \(sharepoint.com\)](#), which includes a detailed frequent asked questions (FAQ) section designed to address any queries you may have.

Please note that throughout this toolkit we use the term 'project' for your, plans, service specification, business case, strategies, policies, practices etc.

The toolkit is helpful in helping in understanding South East London Integrated Care Boards Equality Impact Assessment process. It offers a thorough explanation of the legislation, protected characteristics, roles and responsibilities and many other things. Equality Impact Assessments play a crucial role in preventing discrimination, advancing equality, and promoting good relations within the organisation and for local people and communities. This toolkit is essential in helping staff in completing the Equality Impact Assessment forms.

This toolkit is designed to be user-friendly and practical. Here are some steps to help you navigate and utilise the contents effectively:

1. **Start with the basics:** Begin by reading the toolkit in full, as this will help you to gain an understanding on what an Equality Impact Assessment is and why it is important along with how to carry out an effective Equality Impact Assessment and when.
2. **Review legal context:** Familiarise yourself with the Equality Act 2010 and protected characteristics to ensure your assessments are legally compliant. Please use the following link to the Equality Act 2010: [Equality Act 2010: guidance - GOV.UK \(www.gov.uk\)](#).
3. **Identify relevant activities:** Use the guidance provided to determine which project needs to be assessed.
4. **Follow the process:** Use the step-by-step guide and flow charts to help you complete your Equality Impact Assessment.
5. **Learn from examples:** Use the provided examples within the toolkit to help you fill in and complete the forms.
6. **Utilise additional resources:** Access our intranet page on the following link: [Equality, Diversity & Inclusion - Equality Impact Assessment \(EIA\) \(sharepoint.com\)](#) for further resources and refer to the frequently asked questions section for answers to common questions. If you still require assistance, please contact a member of the Equality, Diversity and Inclusion Team, who will be able to help you.

Remember, the success of your Equality Impact Assessment efforts relies on being thorough, reflective, consistent, and a genuine commitment to equality, in order for your project to achieve the best outcomes for those it is designed to support.

What is an Equality Impact Assessment?

An Equality Impact Assessment is an effective risk assessment tool used to identify the potential impacts (either positive or negative) of projects relating to the workforce or local people and communities.

The purpose of an Equality Impact Assessment is to improve the work of the Integrated Care Board by making sure it does not discriminate and advances and promotes equality. It is a way to make sure individuals and teams think carefully about the likely impact of their projects on local people and communities, and workforce, and mitigate any negative impacts. It also helps us meet our legal equalities duties by documenting how we have considered equalities in all our key activities.

The Equality Impact Assessment process has been designed to be an inclusive process, which covers workforce, service and workforce impact. This toolkit will detail when one should be completed, however please note that it is not an exhaustive list.

An Equality Impact Assessment is carried out by completing an initial screening form, drawing on existing research and insight, monitoring information, and engagement with all relevant stakeholders. Once this has been completed, action plans can be drawn up to address issues identified to ensure that projects are inclusive.

Equality Impact Assessments should be seen as an integral part of your projects development and should be incorporated from the start of a project as part of essential business planning and governance requirements. They should also be built in as an important part of continuous service and performance review. Assessing for equality impact is an aspect of delivering service improvements. For some of the services, equality considerations may already be well integrated into service planning and review. The Equality Impact Assessment process will simply enable services to document equality deliberations and conclusions and show transparency and accountability to the wider community.

Why are Equality Impact Assessments important?

Equality Impact Assessments are an essential part of Integrated Care Board planning and governance because they:

- Support service improvement.
- Enhance value for money.
- Inform business plans.
- Encourage engagement with people and communities, and staff.
- Increase social inclusion.
- Develop better understanding of the needs and considerations of staff, people and communities.
- Increase user/public/staff trust

We have a comprehensive Equality Impact Assessment template, which cover the nine protected characteristics. It also includes a further three protected characteristics to consider: carers, socio-economic/deprivation and digital inclusion.

By conducting Equality Impact Assessments, the Integrated Care Board can:

- Identify potential disparities and ensures that all groups have the right access to services and opportunities
- Identify and eliminate direct or indirect discrimination, fostering a more inclusive environment.
- Demonstrate a commitment to transparency and accountability in decision-making processes.
- Promote good practice and provide evidence of compliance with the Public Sector Equality Duty (PSED).

Benefits of Equality Impact Assessments:

- **Promoting equality:** Allow us (as planners/commissioners) to tackle health inequality. It should be a natural part of our thought process in making decisions to advance equality, eliminate discrimination, and promote good relations.
- **Resource allocation:** Before making decisions about the allocation of resources, we must understand the potential impact of our decision on local people and communities/workforce. Equality Impact Assessments must be started at the beginning of your project to ensure you can benefit from this inclusive tool.
- **Structured approach:** They provide a structured approach to evaluating the impact of our decisions, leading to more informed and equitable outcomes.
- **Service improvement:** Allows us to tailor services to better meet the needs of all local people and communities and facilitate ongoing evaluation and improvement of services, ensuring they remain relevant and effective.
- **Informing engagement and building trust:** Identifying and engaging local people and communities most likely to be impacted by proposals and by demonstrating a commitment to equality fosters trust and confidence amongst our diverse communities and workforce. By promoting good relations, we are able to help build a more cohesive and harmonious society.
- **Economic efficiency:** Identifying and addressing inequalities can lead to more efficient use of resources by targeting interventions where they are most needed.

- **Cultural inclusivity:** Encourages a culture of inclusivity within organisations, where equality and diversity are embedded in everyday practices. Employees who see their organisation committed to equality are more likely to be engaged and motivated.

Equality Act 2010

The Equality Act 2010 is an important act that combines and strengthens previous anti-discrimination legislation, providing a comprehensive legal framework to protect the rights of individuals and advance equality of opportunity for all. It was introduced on 1 October 2010 and covers nine protected characteristics: age, disability, gender reassignment, marriage and civil partnership, pregnancy and maternity, race, religion or belief, sex, and sexual orientation.

Key features of the Equality Act 2010 include:

- Elimination of discrimination, harassment and victimisation and any other conduct that is prohibited by the Act.
- Advancing equality of opportunity between people who share protected characteristics and people who do not share it.
- Fostering good relations between people who share a relevant protected characteristic and those who do not.

The Equality Act 2010 is fundamental to conducting an effective Equality Impact Assessment, as it provides the legal backdrop and guiding principles for assessing how proposed policies, practices, or projects might affect people from different characteristics. By adhering to the principles of the Equality Act 2010, organisations can ensure that they are fostering an inclusive environment, promoting fairness, and preventing discrimination in all their activities. This toolkit will guide you through the process of applying these principles systematically and effectively.

For more information on the Equality Act 2010 please click on the following link: [Equality Act 2010: guidance - GOV.UK \(www.gov.uk\)](https://www.gov.uk/equality-act-2010-guidance).

Protected Characteristics

The Equality Act 2010 identifies nine protected characteristics which safeguard individuals from discrimination and ensures equality. These characteristics are essential for creating inclusive environments and promoting fairness. Additionally, our organisation also focuses on digital inclusion, carers, and socioeconomic status/deprivation to address broader equality concerns.

Age:

Protection against unfair treatment based on age, whether young or old. This includes direct and indirect discrimination, harassment, and victimisation in various settings such as employment and services.

Disability:

Ensures that individuals with physical or mental health conditions (including neurodiversity) are protected from discrimination. Employers and service providers must make reasonable adjustments to accommodate disabled people.

Gender Reassignment:

Protects individuals who are undergoing or have undergone gender reassignment. This includes protection from discrimination, harassment, and victimisation.

Marriage and Civil Partnership:

Provides protection for individuals who are married or in a civil partnership, specifically in the context of employment. It ensures equal treatment and prohibits discrimination based on marital status.

Pregnancy and Maternity:

Ensures that women/birthing people are not discriminated against because of pregnancy, childbirth, or related conditions as well as being on maternity leave. This protection extends to employment, education, and the provision of goods and services.

Race:

Prohibits discrimination based on race, which includes colour, nationality, ethnic or national origins. It ensures equal treatment and opportunities for individuals of all racial backgrounds.

Religion or Belief:

Protects individuals from discrimination based on their religious beliefs or no belief. This includes various faiths, beliefs, and philosophical beliefs, such as atheism.

Sex/gender:

Ensures that individuals are not discriminated against based on their sex. This protection covers both men and women and addresses issues such as equal pay, harassment, and treatment in the workplace and beyond.

Sexual Orientation:

Protects individuals from discrimination based on their sexual orientation, whether they are heterosexual or part of the LGBTQ+ community. It ensures equal treatment in employment, education, and services.

Digital Inclusion:

Recognises the importance of access to digital technology and the internet. Digital inclusion ensures the delivery of health and wellbeing for the local people and communities of South East London regardless of age, ability, socioeconomic status, or geographic location, to enable everyone equal access to digital technologies and the skills needed to use them effectively.

Carers:

Acknowledges the unique challenges faced by individuals who provide unpaid care to family members or friends with disabilities, illnesses, or other needs. Carers often face barriers in employment, education, and accessing services.

Socioeconomic Status/Deprivation:

Addresses the impact of economic inequality on individuals' opportunities and well-being. Socioeconomic status can affect access to education, employment, healthcare, and other essential services

To understand what questions you should consider when completing the Equality Impact Assessment, please click on the following link: [Equality, Diversity & Inclusion - Equality Impact Assessment \(EIA\) \(sharepoint.com\)](#).

When to complete an Equality Impact Assessment

You may be wondering when an Equality Impact Assessment should be completed. Below is a list of situations where an Equality Impact Assessment is typically required. However, there may be other instances where it is also necessary. If you are uncertain about whether an Equality Impact Assessment is needed, please contact the Equality, Diversity, and Inclusion Team on equality@selondonics.nhs.uk.

Policies and Practices:

All policies and practices for example, Human Resource policies, should complete an Equality Impact Assessment. When developing new policies and practices, it is essential to incorporate equality considerations from the start. This includes predicting and assessing potential impacts on various protected characteristic groups and implementing measures to promote inclusivity while preventing any negative impacts. When existing policies and practices are reviewed, they should have Equality Impact Assessments completed to understand if any negative impacts have occurred and whether further mitigating actions are required.

Please note: If you are adapting a policy from NHS England or any other source (e.g. NICE etc.) for South East London Integrated Care Boards purpose, it will require an Equality Impact Assessment to be completed. This is necessary due to the diverse demographics of our organisation and population. What affects one region in England may not have the same impact in another region.

Strategies and Plans

Equality Impact Assessments must be completed for all new strategies and plans (e.g. emergency planning) and when they are being reviewed. This process involves evaluating the potential impact of these plans and strategies on service users or the workforce. The goal is to ensure that these strategies and plans are designed to promote equity and address any disparities that may occur.

Service design and development (Planning/Commissioning):

An Equality Impact Assessment must be conducted for all aspects of service provision (planning/commissioning) and delivery, including services offered by external providers (commissioned by South East London Integrated Care Board). The Equality Impact Assessment should be carried out prior to any contracts being issued. The ideal time to start one would be when the contract documentation is being drafted. The assessment should focus on ensuring that these services are accessible and equitable for our local people and communities from all protected characteristics. It is critical to examine the access, experience and outcomes of the services we provide to ensure they meet the needs of our local people and communities in South East London. Carrying out the Equality Impact assessment early on in your project will help to inform your service specification and adapt it accordingly. The Equality Impact Assessment should be reviewed annually (if possible) to understand if any negative impacts have changed.

Procurement.

This section is interlinked to the service design and development section above. Colleagues will need to take procurement into consideration when developing the service specification, which will need an Equality Impact Assessment. The procurement process includes all activities involved in acquiring the goods and services (sourcing, negotiating

terms, purchasing, receiving and inspecting goods). It is important to maintain detailed records of the entire process. During this process it will be essential to ensure the procured service has a diverse workforce, has monitoring in place for Equality, Diversity and Inclusion impacts along with evaluating the criteria and processes used to select service providers ensuring they adhere to Equality, Diversity and Inclusion. When going out for tender, it is important to include Equality, Diversity and Inclusion questions as part of the tender process. The Procurement Hub Team will be able to help but in the first instance please liaise with the Equality, Diversity and Inclusion Team.

Decommission services/phasing out policies

Ensures that these actions do not inadvertently disadvantage any specific group or community. This assessment helps to identify and mitigate any potential negative impacts on underserved communities relying on the service or the workforce who may disproportionately rely on the policy. It allows organisations to make transparent decisions and consider alternative provisions to maintain equitable access.

Frameworks

Frameworks are structured systems that guide decision-making, service delivery, and policy implementation within the Integrated Care Board. They provide clear guidelines and processes for various functions, such as Information Governance or Procurement. To ensure these frameworks are fair, inclusive and equitable, an Equality Impact Assessment must be completed. This process will help to prevent systemic biases and promotes fairness, ensuring that new frameworks do not reinforce existing inequalities but instead promote equitable outcomes for all individuals.

Training

When developing and implementing training sessions or modules, it's important to consider their impact on local people and communities, and the workforce to promote Equality, Diversity and Inclusion and address any potential inequalities. An Equality Impact Assessment may be needed based on factors such as the content of the training, especially if it is training on protected characteristics, if the training is mandatory for the entire workforce or if the training is on a sensitive topic. Additionally, any new or significantly revised training sessions/modules should be assessed for their impact on different protected characteristics.

Please note: the above will continue to be referenced as 'project' going forward within this toolkit.

Roles and responsibilities

Everyone in the organisation has a role in ensuring that all projects are equitable, with Equality, Diversity, and Inclusion integrated into our daily activities, in relation to Equality Impact Assessments, we all share particular responsibilities, as detailed below:

Board/Executives/Very Senior Managers:

The Board, Executives, and Very Senior Managers are responsible for championing the importance of Equality Impact Assessments at the highest level and ensuring that they check that an Equality Impact Assessment has been completed when/if approving any projects.

Committees and Sub Committees:

Committees and Sub Committees play a pivotal role in the governance of Equality Impact Assessments. They should review the Equality Impact Assessment along with the projects that are presented to them. They should ensure it is comprehensive and accurate, ensuring that all potential impacts have been considered and appropriate mitigations have been identified. If an Equality Impact Assessment (screening or full) has not been completed for a project, the members of the committees are responsible for requesting its completion, prior to approving the project. For more details on the governance structure and the roles of various Committees and Sub Committees, please see page [25-26](#).

Senior Management Team/Senior Leadership Team:

The Senior Management Team/Senior Leadership Team play a critical role in promoting the implementation of Equality Impact Assessments within their areas. They should ensure that all projects have completed an Equality Impact Assessment and that their teams understand the importance of these assessments. They should review Equality Impact Assessment outcomes and action plans prior to the project going for approval. If any gaps are identified in the Equality Impact Assessment, they should ensure that this is rectified, and improvements are made. They should monitor the implementation of the action plan, ensuring that the proposed mitigations are completed within a timely manner.

Managers:

Managers are responsible for overseeing the Equality Impact Assessment process within their departments. They should ensure that their teams complete Equality Impact Assessments for relevant projects, provide necessary support, and ensure that identified actions are implemented. Managers should also monitor the effectiveness of Equality Impact Assessments and report on progress to senior leadership where relevant.

Individuals filling in the Equality Impact Assessment:

Individuals tasked with completing Equality Impact Assessments are responsible for conducting a thorough and accurate assessment. They should gather relevant data, undertake engagement where necessary, analyse potential impacts on all protected characteristics, and develop action plans to mitigate any negative impacts. They should ensure the Equality Impact Assessment is transparent and inclusive. If they require help in completing an Equality Impact Assessment, they should contact the Equality, Diversity and Inclusion Team for guidance and training.

Equality, Diversity, and Inclusion Team:

The Equality, Diversity, and Inclusion Team provides expert guidance and support throughout the Equality Impact Assessment process. They develop and maintain the

Equality Impact Assessment tools and resources, offering training and advice, and ensuring the process is compliant with the Equality Act 2010. They also monitor and evaluate how effective the Equality Impact Assessment process is. The team will ensure all Equality Impact Assessments are reviewed, and feedback is provided in 10 working days.

Equality Impact Assessment process

Step 1: Define the Scope

It will be essential to identify if your project requires an Equality Impact Assessment to be completed (for the list please see page [13-14](#)). This will ensure you are able to set clear objectives and outcomes. Remember that your Equality Impact Assessment should demonstrate what the project does (or will do) to make sure it is accessible to different people and communities, not just that it can, in theory, be used by anyone.

An Equality Impact Assessment should be initiated at the very beginning of the process and updated throughout each stage. Start the assessment when you first develop your project and ensure that a completed Equality Impact Assessment is included in the approval process for the relevant committee.

Questions to consider:

- What is the purpose of the project?
- Why is an Equality Impact Assessment necessary for this project?
- Who will be affected by the project? This will help identify which communities you need to engage with to develop your project.
- What are the intended benefits and potential risks associated with the project?
- What evidence and data are required to conduct the Equality Impact Assessment?
- Who should be involved in the Equality Impact Assessment process?
- How will the findings of the Equality Impact Assessment be used to inform decision-making on the project?
- What are the timelines and resources required for completing the Equality Impact Assessment? (plenty of time should be provided to the Equality, Diversity and Inclusion Team for reviewing and approval).
- How will the Equality Impact Assessment and its recommendations (if any) be measured and monitored?

Step 2: Gather Data and Evidence

You should start gathering data and evidence to help complete your Equality Impact Assessment and understand what the positive and negative impacts will be. Data is routinely collected on age, gender, disability and ethnicity; however, there may be some difficulty in obtaining data on sexual orientation, religion and belief or gender reassignment.

For any projects involving patients/local people and communities you can gather data from the service, Patient Advice Liaison Service or Complaints or review insight from local people and communities from the Engagement Team and engagement activity including focus groups and surveys which is on the what we have heard from local people web page. You can also gather data and, intelligence from local Joint Strategic Needs Assessment etc. It could be any work undertaken previously on a different project. The analysis of this data may also help develop your engagement activity (if this is required).

For projects related to the workforce, data can be obtained through NHS National Staff Survey results, looking at previous Equality Impact Assessments, data from focus groups etc.

If there is a lack of data, you will be required to undertake engagement with the workforce/local people and communities to complete your Equality Impact Assessment. If you are unable to do this, a valid reason must be provided.

Tips:

- **Identifying relevant data source:** *Internal Data:* such as workforce data, surveys, Joint Strategic Needs Assessment, results of recent engagement activity, information analysis of audit reports and reviews health needs assessment etc. *External Data:* national statistics, surveys, information from local groups and partner agencies, demographic data, Census findings, recent research studies or journal articles, studies of deprivation etc.
- **Types of data to collect:** *Quantitative Data:* Numerical data collected through surveys, statistical analyses, and demographic studies, which provide numerical insights into trends, disparities, and usage patterns etc. and *Qualitative Data:* Descriptive data collected through focus groups, interviews, and open-ended survey questions etc.
- **Disaggregating data by protected characteristics:** Ensure data is broken down by relevant protected characteristics (Please see page 9-10 for the breakdown).
- **Existing research and reports:** Examine existing research studies/reports.
- **Engaging stakeholders (step 3):** Engage with a wide range of stakeholders internal and external such as the workforce or local people and communities.
- **Benchmarking and comparative analysis:** Compare data and practices with similar organisations.
- **Identifying gaps in data:** Recognise areas where data is lacking and plan for additional data collection if necessary.
- **Analysing data for trends and patterns:** Analyse the collected data to identify trends. See where evidence highlights poorer access, experience or outcomes for any of the protected characteristics, plus socio-economic deprivation, carers or digital inclusion.
- **Documenting and organising data:** Ensure that all gathered data and evidence are well-documented, organised, and easily accessible for analysis and referenced throughout the Equality Impact Assessment process.
- **Ensuring data quality and validity:** Validate the accuracy, reliability, and relevance of the data collected. Cross-check data sources and methods to ensure robustness and credibility of the evidence.

Step 3: Engage Stakeholders

You may need to engage with local people and communities or the workforce for various reasons, including to further understand their views or lived experiences and to gather further insight. Your Equality Impact Assessment will help you identify which communities are most likely to be affected by your proposals as well as gaps in insight and therefore, help you identify who you most need to engage with.

The Integrated Care System has developed its people and communities strategic framework, which can be access on the following link: [Working with People and Communities Strategic Framework](#). This outlines our ambition for how we want to work with local people and communities and what we need to put in place to do this:

- We need to build relationships and trust with communities
- We need to make engagement accessible and inviting

- We need to coordinate our engagement better across South East London
- We need to go out to communities and bring the conversation close to people
- We need to recognise the impact that engagement has on people
- We will continue to develop our ways of working in these areas over the next year

The Integrated Care Board has legal duties, which require that people are 'involved'. This can be achieved by consulting people, providing people with information, or in other ways. Integrated Care Board's are required to involve service users, their carers and representatives in:

- The planning of commissioning arrangements.
- The development and consideration of proposals for changes in the way those services are commissioned where implementation of proposals has an impact on the manner in which the services are delivered or the range of health services available.
- Decisions affecting the operation of those commissioning arrangements

Engaging local people and communities/workforce is a critical component of the Equality Impact Assessment process, as it ensures that the assessment is grounded in the lived experiences of people. There are many ways that you can involve people including, focus groups, surveys, outreach and one-on-one interviews. The engagement toolkit, which can be accessed on the following link: [Engagement toolkit - South East London ICS \(selondonics.org\)](https://selondonics.org) helps you identify which methods are best suited to what you want to find out. It includes both face to face and digital methods to ensure inclusive engagement, enabling people who are digitally excluded to give their views as well as people who prefer to give their views digitally.

When undertaking engagement, you will need to ensure your techniques are effective for the engagement and ensure there is diverse and inclusive participation. The engagement toolkit and engagement planning template and checklist (which can be accessed on the following link: [engagement planning template and checklist](#)) helps you think through what you need to consider, including:

- **Clarify objectives and expectations:** Clearly communicate the purpose, objectives, and expected outcomes of the Equality Impact Assessment to stakeholders to ensure they understand the process and their role in providing input.
- **Identifying key stakeholders:** Internal Stakeholders: Include employees at all levels. Local people and communities, who is directly affected by your proposals, who is indirectly affected, whose voice is missing. The how to map your stakeholders guide provides further detail (this can be accessed on the following link: [The how to map your stakeholders](#)).
- **Ensure inclusiveness:** Aim for diversity and inclusiveness among stakeholders to capture a broad range of perspectives and experiences related.
- **Select appropriate engagement methods:** Use a variety of methods to engage stakeholders effectively.
- **Tailor engagement approaches and consider the language you use:** Adapt engagement methods to the needs and preferences of different stakeholder groups.
- **Provide adequate information:** Ensure stakeholders have access to relevant information, data, and documentation related to the project, policy or practice.
- **Facilitate open and inclusive discussions:** Create a supportive and respectful environment that encourages stakeholders to express their views openly.

- **Address power dynamics:** Recognise and mitigate power imbalances that may exist among stakeholders, ensuring that all voices are heard and valued equally.
- **Document stakeholder insight and feedback:** Record and document stakeholder feedback, including both qualitative insights and quantitative data, to inform the Equality Impact Assessment.

If you need to undertake any engagement with local people and communities, contact the Engagement Team at engagement@selondonics.nhs.uk.

Step 4: Analysis

Now the data has been gathered, you will be required to undertake analysis to understand how your project will impact individuals. Please remember that individuals can belong to more than one protected characteristic, so intersectionality should be considered. To carry out a comprehensive analysis the following may be helpful:

Tips for analysing Quantitative Data:

- **Define clear objectives:** Establish what you aim to discover from the data, such as disparities in service usage among different groups.
- **Use descriptive statistics:** Summarise data using measures like mean, median, mode, range, and standard deviation to understand trends.
- **Segment data:** Break down data by protected characteristics (age, gender, disability, etc.) to identify specific impacts on different groups.
- **Look for patterns:** Identify trends, patterns, and outliers within each area to uncover potential areas of inequality.
- **Compare groups:** Use comparative analysis to determine if differences between groups are statistically significant.
- **Visualise data:** Create charts, graphs, and tables to visualise disparities and make complex data more understandable.
- **Check for bias:** Ensure data collection methods were unbiased and that the sample is representative of the population.
- **Use benchmarks:** Compare your data with national or regional benchmarks to contextualise findings and identify relative disparities.
- **Document findings:** Clearly record all analyses, methods, and conclusions to maintain transparency and reproducibility.

Tips for analysing Qualitative Data:

- **Organise data:** Categorise responses by themes and protected characteristics to facilitate easier analysis.
- **Identify themes:** Use thematic analysis to identify recurring themes, patterns, and issues mentioned by respondents.
- **Code data:** Develop a coding scheme to systematically categorise and tag sections of text based on themes and relevant protected characteristics.
- **Look for direct quotes:** Highlight direct quotes that show common concerns or insights to provide depth to your findings.
- **Assess tone and context:** Consider the context and tone of responses to understand the sentiment and underlying issues.
- **Compare across groups:** Identify differences and similarities in responses among various groups to pinpoint specific concerns or needs.

- **Use software:** Employ qualitative analysis software to assist in coding and organising large volumes of text data (please ensure these are software's approved by the Integrated Care Board and do not break information governance requirements).
- **Triangulate data:** Cross-check qualitative findings with quantitative data to validate insights and provide a comprehensive understanding.
- **Focus on outliers:** Pay attention to unique or divergent responses that might indicate overlooked issues or minority perspectives.
- **Document analysis process:** Keep detailed records of how themes were identified and how data was interpreted to ensure transparency.

The how to develop and analyse effective survey questions guide also provides further information to help you. This can be found on the following link: [how to develop and analyse effective survey questions](#).

Step 5: Potential impacts, mitigating action plans and monitoring

Following the collation of your data, insight from engagement and analysis you will be able to identify any potential negative or positive impacts your project may have. This will allow you to develop a mitigating action plan or make changes to your project to address any negative impacts. Within your plan give an outline of the key actions based on any gaps, challenges and opportunities you have identified. Include any action to address specific equality issues and data gaps which need to be addressed through consultation or further research. Ensure the actions are specific, measurable, achievable, realistic and have a timescale. It will also be important to detail how and who will monitor this action plan.

The following steps should be considered at this point:

- Positive and negative impacts
- Assess the consequence and likelihood of Impacts
- Prioritise Impacts (Low, Medium and High)
- Consider intersectionality - recognise that individuals may belong to multiple protected characteristics
- Document your findings to be included as part of the Equality Impact Assessment
- If needed, complete an action plan: think about what needs to be communicated, how do you make adjustments without losing positive impacts, what do you need to do to prepare for the change and what support will you require?
- Ensure monitoring of the action plan is in place

Step 6: Complete the Equality Impact Assessment

Following steps **1 to 5** you will need to complete the screening form, which will allow you to see whether a full Equality Impact Assessment is required. However, if you have significant impacts identified following steps 2-5 and require a comprehensive action plan then you should complete the full Equality Impact Assessment form.

The screening form is matrix-based and functions similarly to our risk registers (Corporate or Board Assurance Framework). It is supported by three tables: the first helps assess the likelihood of impact, the second supports the assessment of consequences, and the third is a scoring table that includes five key questions. These questions guide you in determining appropriate scores to input into the matrix.

It is essential to complete this form with detailed and comprehensive information. This ensures that, should the Equality and Human Rights Commission (EHRC) review the form in isolation, they would fully understand the work undertaken. Additional guidance is available within the form itself, along with an example provided in this toolkit.

Please note that the overall likelihood and consequence scores are not calculated by adding up the answers to the five questions. Instead, you must determine an overall score based on the pattern of responses. For example, if your responses for likelihood include three 'Almost Certain', one 'Possible', and one 'Unlikely', the overall likelihood would be assessed as 'Almost Certain' (score of 5). Similarly, if the consequence ratings include four 'Medium' and one 'Low', the overall consequence would be 'Medium' (score of 4). You would then multiply the two overall scores: 5 (Likelihood) x 4 (Consequence) = 20. According to the matrix, a score of 20 falls within the red zone, which indicates the need to complete a full Equality Impact Assessment.

The completed Equality Impact Assessment form(s) should be emailed to equality@selondonics.nhs.uk for review and approval (prior to your project going for approval). The Equality, Diversity and Inclusion Team will review and respond to your completed Equality Impact Assessment form (screening or full) within **10 working days**. If the Equality, Diversity and Inclusion Team have any queries, require further information or would like to have a discussion, they will contact you. Following this the Equality Impact Assessment will be approved (if any changes or further work is required, this will need to be completed prior to approval).

If the Equality, Diversity and Inclusion Team identify that you need to complete a full Equality Impact Assessment form, they will inform you of this and advise on the next steps.

Please ensure:

- You start the Equality Impact Assessment Process early in the development of your project and long before it is approved.
- You have completed steps 1-5 prior to completing the form.
- When sending the Equality Impact Assessment form for approval to the Equality, Diversity and Inclusion Team you include all relevant documentation, e.g. policy, service specification/business case etc.

Tips:

Screening form:

- Provide summary of how and what data you collected.
- Detail whether engagement was undertaken with stakeholders, and if not explain why it was not needed. If engagement was undertaken, provide a summary.
- Provide a list of the data sources you used.
- If no significant impact is identified, explain why (for each protected characteristic).

Full Equality Impact Assessment form:

- Provide summary of how and what data you collected.
- Detail whether engagement was undertaken with stakeholders, if not explain why it was not needed and if engagement was required, provide a summary.
- Provide a list of the data sources you used.
- List specific actions to mitigate any identified negative impacts.

- Describe how these measures will be implemented and monitored.
- Prioritise actions based on the importance and scale of the impact.
- Ensure the most critical issues are addressed first.
- Document all decisions made during the assessment process, including why certain actions were chosen over others.
- Ensure the Equality Impact Assessment form is clear, thorough, and transparent.
- Outline a plan for regular review and update of the Equality Impact Assessment to ensure ongoing relevance and effectiveness.
- Specify review dates and responsible parties for monitoring the impact over time.
- Explain how stakeholder feedback will be integrated into ongoing assessment and implementation.

Step 7: Monitoring of mitigating actions

Monitoring the actions and how effective they are is an important part of the Equality Impact Assessment process. This will ensure the intended outcomes are achieved and that any unforeseen issues are promptly addressed. For any negative impacts that are significant, you should speak to the Risk Team to understand if these are required to be added to the Corporate Risk Register.

Through monitoring you will be able to:

- **Ensure effectiveness:** Review how effective the actions are and see if they are preventing the negative impact identified.
- **Measure outcomes:** Evaluate the outcome of your action to see if it has made a measurable improvement
- **Identify other consequences:** Allows you to see if any new issues or unintended issues have arisen as a consequence of your actions.
- **Promote accountability:** It will hold those responsible for the actions accountable to ensure they are completed in a timely manner.

Tips:

- Establish clear metrics and indicators of success
 - Develop specific, measurable, achievable, relevant, and time-bound (SMART) indicators to track the success of the mitigating actions.
 - Indicators might include quantitative data and qualitative feedback
- Regular data collection
 - Implement a structured schedule for collecting and analysing the data.
 - Ensure that data collection methods are inclusive and accessible.
- Review and analysis
 - Conduct regular reviews/analysis of data to assess the impact of the mitigating actions
 - Compare the findings against the original data that you collected prior to the actions.
- Engage stakeholders
 - Involve stakeholders, including people from affected communities and groups, in the monitoring process.
 - Facilitate open channels of communication for ongoing feedback.
- Adjust and improve
 - Based on the results, make necessary adjustments to the actions.
 - Detail any changes and the reasons for change.

- Report findings
 - Prepare and disseminate reports on the outcomes of the monitoring process.
 - Ensure that reports highlight successes, areas for improvement, and any adjustments made to the original plan.
- Continuous improvement
 - Monitoring should be viewed as an ongoing process rather than a one-time activity.

Step 8: Approval of your project

Your approved Equality Impact Assessment will form part of your project documentation that you will take to the committee/board for approval. It is essential that the Equality Impact Assessment should be started at the beginning of the project and continuously updated as you go through the steps.

The committee/meeting members must ensure that an Equality Impact Assessment has been completed and approved by the Equality, Diversity and Inclusion Team prior to approving a project. If an Equality Impact Assessment is missing or deemed inadequate, the project will not be approved until this has been rectified.

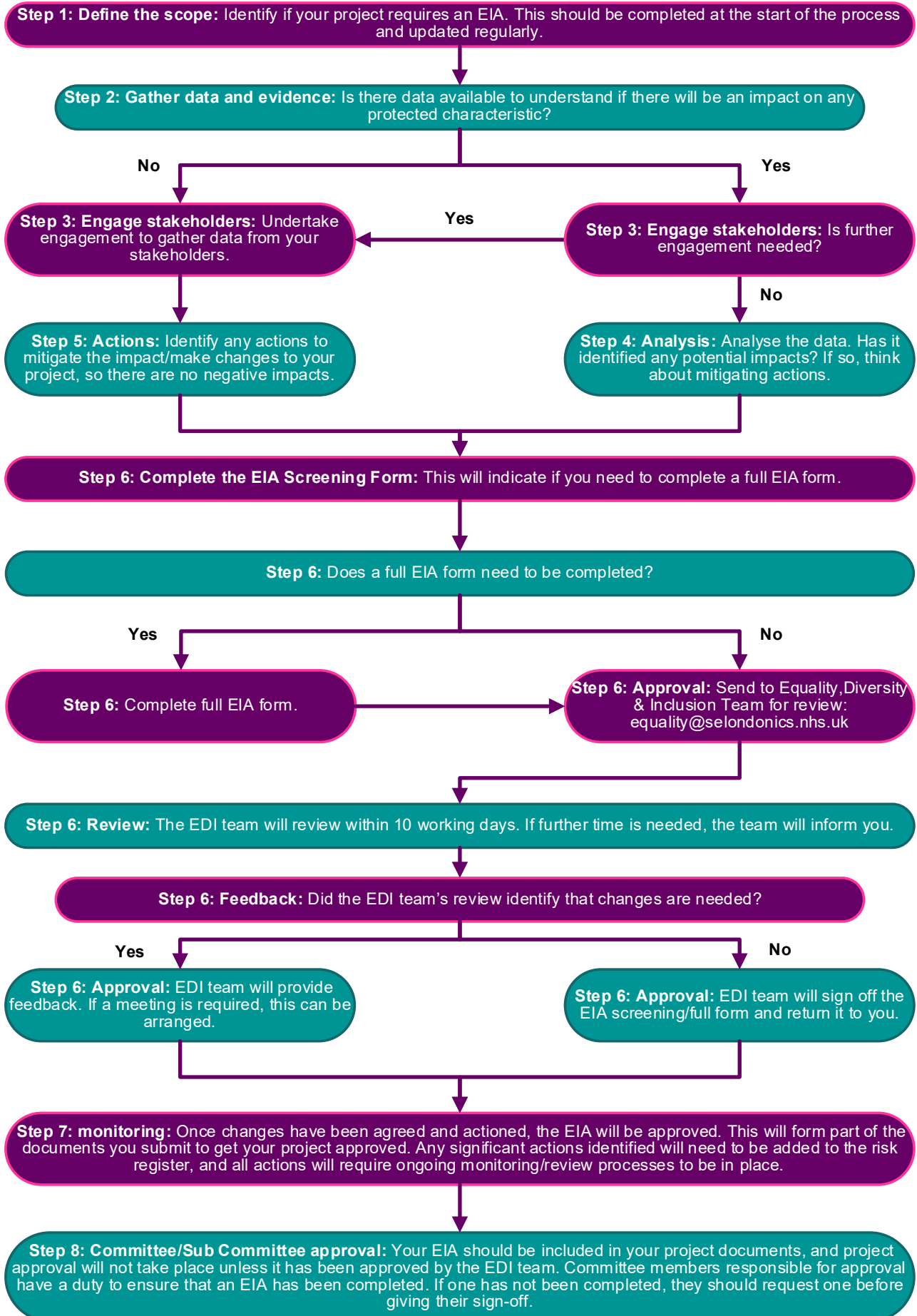
Tips:

- Ensure the Equality Impact Assessment form is included within your project documentation.
- Provide a clear summary of the Equality Impact Assessment findings and proposed actions within the main document to highlight its significance.
- Seek formal sign-off from all relevant committees, confirming that the Equality Impact Assessment has been reviewed and approved.
- Document the approval process and any feedback or conditions set by the committee.
- Clearly define and communicate the roles and responsibilities of all involved in implementing the Equality Impact Assessment findings and actions.
- Ensure that everyone understands their specific duties and the timeline for implementing mitigating actions.
- Establish a plan for ongoing monitoring of the Equality Impact Assessment implementation to track progress and effectiveness.
- Schedule regular reviews and updates to the Equality Impact Assessment to ensure it remains relevant and responsive to any new data or changing circumstances.

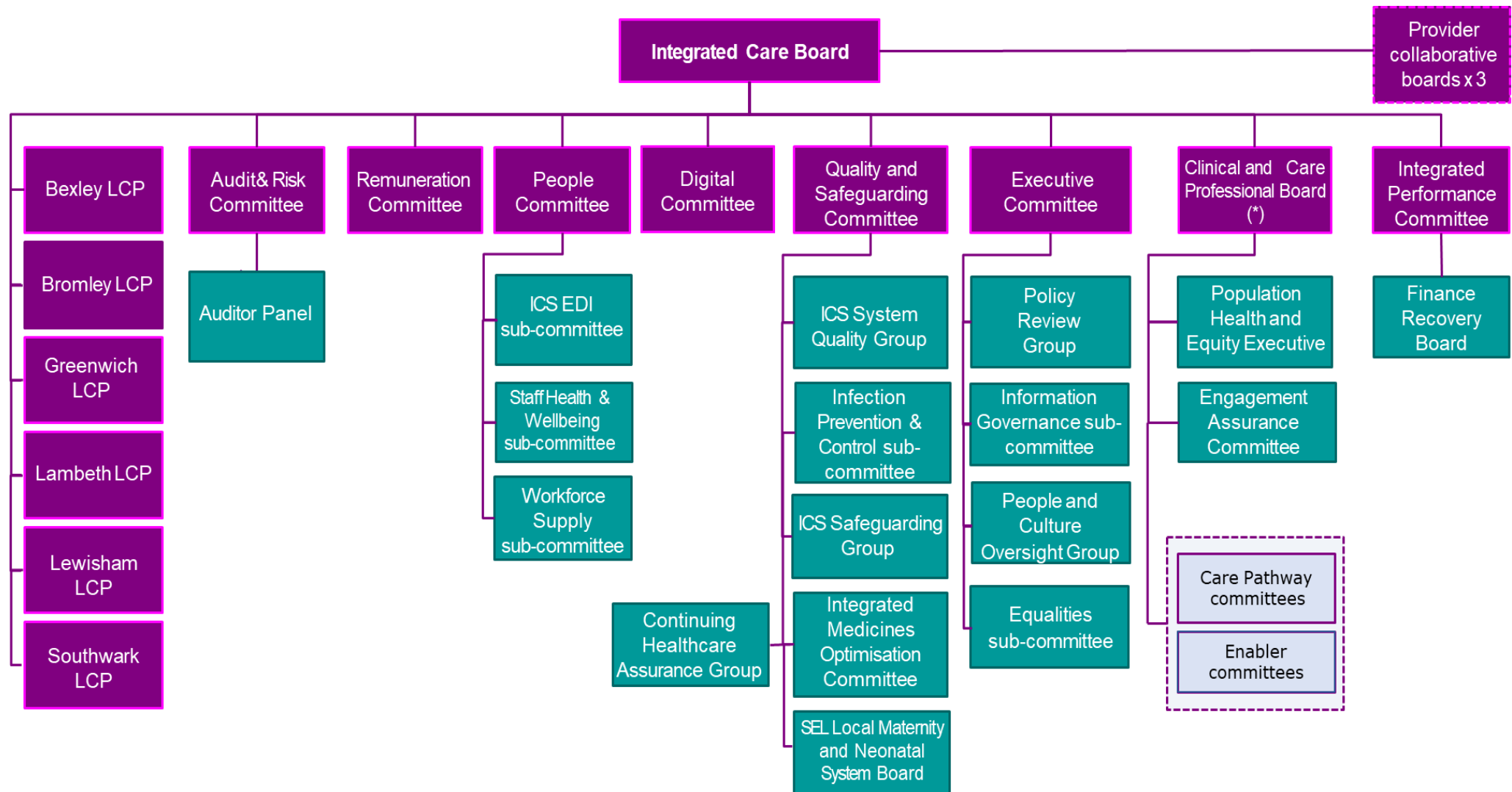
Relevant committee's responsibility:

- The committee responsible for reviewing and approving your document must ensure that the Equality Impact Assessment has been completed properly.
- Members of the committees must exercise due diligence in evaluating the Equality Impact Assessment to ensure it addresses all relevant impacts and mitigating measures.
- If the Equality Impact Assessment is incomplete or missing, the committee should withhold approval until an approved Equality Impact Assessment is submitted.

Equality Impact Assessment Process Flow Chart



Governance Flow Chart



Governance Flow Chart explained

The governance flow chart helps individuals identify the appropriate committees for where their project may need to go for approval. These committees are responsible for ensuring that an Equality Impact Assessment has been completed for each project prior to approval (as outlined in step 8 of the process above).

You must ensure that an Equality Impact Assessment has been completed and approved (by the Equality, Diversity & Inclusion Team) prior to it going to any sub committees or committees for approval.

The following sections provide an overview of the focus and design of each committee:

South East London Integrated Care Board:

The board has ultimate responsibility for all functions of the Integrated Care Board (the organisation) which, along with the Integrated Care Partnership, holds the leadership of South East London to account for delivering the agreed health and care strategy and acting in a way that is consistent with it. The below committees all sit under this board.

Local Care Partnership Committees:

Place based Local Care Partnership Committees, responsible for convening local system partners to develop plans to meet the needs of the local population, reduce inequalities and optimise integration opportunities. The ICB will delegate responsibility for the delivery of specified out of hospital care objectives and outcomes, including the management of the associated budget. A representative from each LCP will be a member of the South East London Integrated Care Board.

Audit & Risk Committee:

No project to be approved here as this is an audit committee and has no remit for the approval of projects.

Remuneration Committee:

Responsibilities for this committee are: decision making, with accountability to the board for all matters relating to remuneration, fees and allowances for employees and individuals who provide services to the ICB, and for confirmation of the ICB pay policy including adoption of any pay frameworks for all employees. Any plans or frameworks relating to the above will require an Equality Impact Assessment and will need to be in place prior to going the Remuneration Committee.

People Committee:

Sub-committees are: ICS EDI sub-committee, Workforce Supply sub-committee, and Staff Health and Wellbeing sub-committee. Your project may go to a sub-committee prior to the People Board. Responsibilities include: the design, development and delivery of plans related to the health and care workforce in South East London. This includes meeting any national targets, and ensuring sufficient and consistent strategies across the ICS for equality, diversity and inclusion and staff health and wellbeing.

Digital Committee:

Responsibilities include: development of ICB Digital Strategy, developing investment cases and funding bids for digital schemes and investment, and aligning digital solutions and systems across SEL.

Quality & Safeguarding Committee:

Sub-committees for this are: ICS System Quality Group, Infection Prevention and Control Committee, ICS Safeguarding Committee, Integrated Medicines Optimisation Committee, Continuing Healthcare Assurance Group and SEL Local Maternity and Neonatal System Board. Your project may go to a sub-committee prior to the Quality & Safeguarding Committee. Responsibilities for this committee include quality assurance, input to and understanding of standards to be secured as part of ICB strategic and operational plans, in-year oversight and assurance of plan delivery, infection prevention and control, medicines optimisation, and holding links to Local Authority assurance including safeguarding and Oversight and Scrutiny.

Executive Committee:

Sub-committees are: Policy Review Group, People and Culture Oversight Group, Information Governance sub-committee and Equalities sub-committee. Your project may go to a sub-committee prior to the Executive Committee. Responsibilities include: managing the operational activity and approving the policies of the ICB. To support the planning & finance and quality & performance committees in the oversight of delivery and performance.

Clinical & Care Professional Board:

Sub-committees are: Population Health Management Group, Engagement Assurance committee, Care Pathway committees, Enabler committees. Your project may go to a sub-committee prior to be taken to the Clinical & Care Professional Committee.

Responsibilities for this committee include: bringing together clinicians, care professionals and South East London residents to ensure the ICB has robust care, patient and public engagement, population health management, and leadership in place to shape and that the ICB's plans are demonstrably influenced by the outputs of its engagement work.

Integrated Performance Committee:

Sub-committee is: Finance Recovery Board. Responsibilities include: developing an Integrated Care Strategy, overseeing system performance and supporting key programmes (where this requires the insight and sponsorship of senior leaders from across health, local authority services and the VCSE sector and Healthwatch).

Examples of positive and negative impacts

Positive impacts	Negative impacts
<p>Example one: A targeted training programme for Global Majority women.</p> <p>Where global majority women are unrepresented in the workplace, a targeted training program can lead to increased confidence, empowerment, career advancement, increase retention, representation in leadership position.</p>	<p>Example one: An event held in a building with no loop facilities.</p> <p>Without these facilities, individuals who rely on hearing aids or cochlear implants may struggle to hear and participate fully in the event. This can lead to feelings of exclusion and frustration, reducing the accessibility and inclusivity of the event, and creates barriers to employment.</p>
<p>Example two: An organisation notices a lack of applications from the Global Majority population. They review and improve their recruitment process, focusing on language, format adverts, selection criteria, communication strategies and outreach.</p> <p>This can lead to a more diverse applicant pool and attract a wider range of talent, fostering a more inclusive and culturally diverse workforce, which promotes greater diversity of thought and innovation..</p>	<p>Example two: An organisation only accepts complaints in writing.</p> <p>This creates a disadvantage for people with disabilities, those who do use English as their first language and for people whose written communication is not a strong cultural norm such as British Sign Language Users.</p>
<p>Example three: A service is to be delivered from a building that has undergone a full access audit and accessible for people with physical and hidden disabilities.</p> <p>This means people are more likely to be able to access the service and ensure it is a welcoming environment. This can lead to increased attendance, engagement and participation from diverse groups.</p>	<p>Example three: Information about a service/policy is published and contains jargon and small print.</p> <p>It can make it difficult for many people to understand, especially those who are not familiar with the terminology or have visual impairments. This can lead to confusion, misunderstandings, and a lack of clarity about the service or policy.</p>
<p>Example four: Ensuring that all service user information can be made available on request in audio, large, print and Braille.</p> <p>This enhances accessibility for individuals with visual impairments or other disabilities. This will ensure that all users can have equal access, understanding, and engagement with the services.</p>	<p>Example four: A recruitment drive scheduled during Ramadan.</p> <p>This can exclude or disadvantage Muslim candidates who are fasting and observing religious practices. Fasting can affect energy levels and concentration, potentially impacting their performance in interviews or assessments. Additionally, scheduling events during prayer times could lead to conflicts with candidates' religious commitments. This could result to a less diverse applicant pool.</p>

Example five: A targeted health improvement campaign for young men between the ages of 15 to 21.

This allows for messaging and interventions to be tailored to the unique challenges and communication preferences of this gender and age group, leading to increased engagement and better health outcomes.

Example Six: A new ICT system has been procured to allow patients to be checked in and booked for appointments.

Would Improve accessibility and convenience: The new ICT system can significantly enhance accessibility for all patients, including those with disabilities. Features like online appointment scheduling, digital check-ins, and mobile access can reduce the need for physical presence and wait times.

Example five: Where the choice of venue for a staff social event prevents members of a particular religion/belief or belief group from participating.

This will make the staff member feel excluded and discriminated amongst others. This can create a sense of alienation, lower morale and make them feel their cultural or religious needs are not being considered or respected.

Example Six: A new ICT system has been procured to allow patients to be checked in and booked for appointments.

It can cause a digital divide and accessibility issues: Not all patients have equal access to digital technologies. Some individuals, particularly older adults, those from lower socio-economic backgrounds, or those with limited digital literacy, may struggle with using the new ICT system. This could result in decreased access to healthcare services.

Equality Impact Assessment: Screening Form (EXAMPLE)

1. Please fill in the requested information below. For each question (1-5), refer to the definitions of "likelihood" and "consequence" provided on the next page. In the columns provided (below), note down the terms such as "likely" (for likelihood) or "medium impact" (for consequence). This will help you decide the overall category for the likelihood and consequence. Please review the tables below prior to starting your Equality Impact Assessment form.
2. **Calculation:** At the end, you'll need to determine the overall likelihood and consequence. **Multiply** these together (likelihood x consequence) to get a score. This score will show whether you need to complete a full Equality Impact Assessment form. Please note that the overall likelihood and consequence scores are not calculated by adding up the answers to the five questions. Instead, you must determine an overall score based on the pattern of responses. For example, the overall score for likelihood is 'Almost Certain' (score of 5) and the score for consequence is 'Medium' (score of 4). You would then multiply the two overall scores: $5 \times 4 = 20$.
3. To decide if you only need to complete this screening form or a full Equality Impact Assessment, use the overall score. For instance, if the score is 4 (likelihood) x 4 (consequence) = 16, this score is in the red zone, meaning a Full Equality Impact Assessment is required.
4. For each question, please take into consideration how significant the impact will be on the service user/workforce or the organisation. **You will need to provide enough details to ensure that this EIA can be used as standalone document in the event of an Equality and Human Rights Commission (EHRC)**
5. **Please note:** The term "project" includes Policies, Practices, Strategies, Plans, Planning, Commissioning, Procurement, Service Provision/Delivery, Decommission Services/Phasing out Policies, and Frameworks and Training.
6. **Please ensure that you have read and understood the Equality Impact Assessment toolkit prior to completing this form.**

The following protected characteristics / health inequalities need to be considered for any negative impacts:

Protected Characteristics		
Age	Pregnancy/Maternity	Marriage/Civil Partnership (employment only)
Disability	Race	Socio-economic / Deprivation
Sex	Religion/Belief	Carers
Gender reassignment	Sexual orientation	Digital Inclusion

Equality Impact Assessment: Screening Form

Name (project lead or delegate)	Alex Smith						
Job title	Project Lead						
Organisation	South East London ICB						
Name of Project	Wizz Online Appointments						
Area(s) / Place(s) Impacted	<input type="checkbox"/> SEL ICB	<input type="checkbox"/> Bexley	<input type="checkbox"/> Bromley	<input type="checkbox"/> Greenwich	<input type="checkbox"/> Lambeth	<input type="checkbox"/> Lewisham	<input checked="" type="checkbox"/> Southwark
Publication of EIA	Is there any reason this EIA cannot be published on the ICB website (anonymously)? If yes, please provide an explanation.						
	<input type="checkbox"/> Yes:			<input checked="" type="checkbox"/> No: It is fine to publish this EIA anonymously.			
Engagement/Data gather	<p>Purpose of Engagement and Data Collection The purpose of engagement was to ensure the introduction of the new online appointment booking system is equitable, accessible, and responsive to the diverse needs of our local population. We aimed to understand any potential barriers to access, in particular for individuals with protected characteristics (including carers, digitally excluded groups, and those from lower socio-economic backgrounds). This enabled us to identify both positive and negative impacts early and take proactive steps to mitigate them.</p> <p>Engagement Methods Used We used a mix of quantitative and qualitative engagement methods, which included:</p> <ul style="list-style-type: none"> - A survey was developed and distributed both online and in paper format (available in Easy Read and translated versions upon request). - We conducted focus groups which targeted communities, including older service users, disabled people, and those from Global Majority backgrounds. - One-to-one interviews were offered to carers and those without digital access. - Feedback mechanisms at the point a patient was receiving care (e.g. during phone or face-to-face booking) were used to gather insights from those less likely to engage digitally. <p>Type of Data Considered We reviewed demographic data from local population health profiles, digital inclusion, and GP practice registration data to understand potential inequalities in access. This informed where to target engagement activities. We also analysed patient feedback data from existing appointment booking processes to identify existing issues.</p> <p>Stakeholder Identification and Communication Stakeholders were identified through:</p>						

- Internal data from primary care practices.
- Signposting by the SEL ICB's engagement team.
- Community and voluntary sector partners who support specific groups (e.g., Age UK, local disability advocacy groups etc.).

To ensure we communicated effectively, we ensured:

- Used clear, jargon-free information.
- Surveys and materials were translated into the top five most spoken languages locally.
- Community organisations helped disseminate the survey through trusted networks.

Ensuring Diverse Representation and Tailored Approaches

We used targeted outreach to include voices that are often underrepresented in digital consultations, such as:

- Individuals aged 75+ (engaged via community centres and care homes).
- People with learning disabilities (through supported workshops with carers present).
- Global Majority communities (via trusted faith-based and cultural organisations).
- Carers (through carer support groups and forums).
- Surveys were available in large print, Easy Read, and languages other than English.
- Phone and in person options were offered for those who could not engage digitally.

Data Analysis and Inclusion

Feedback was analysed thematically for qualitative data and by demographic subgroup for quantitative data. This helped us identify trends or disparities in experiences across different protected characteristics.

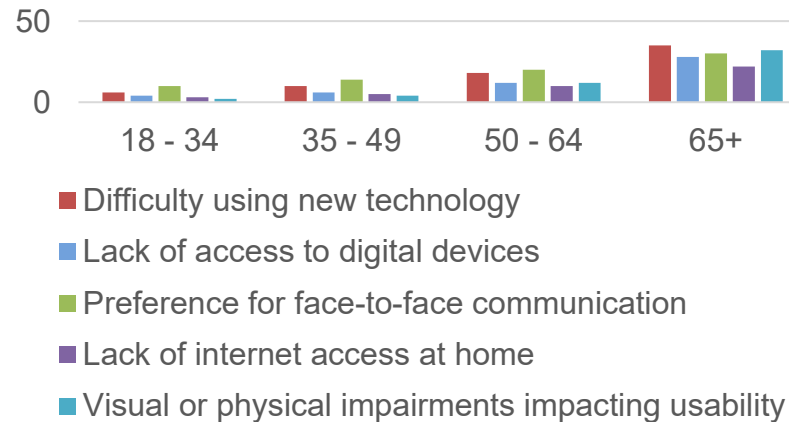
Findings Summary

Positive feedback included appreciation for the convenience and flexibility of booking online.

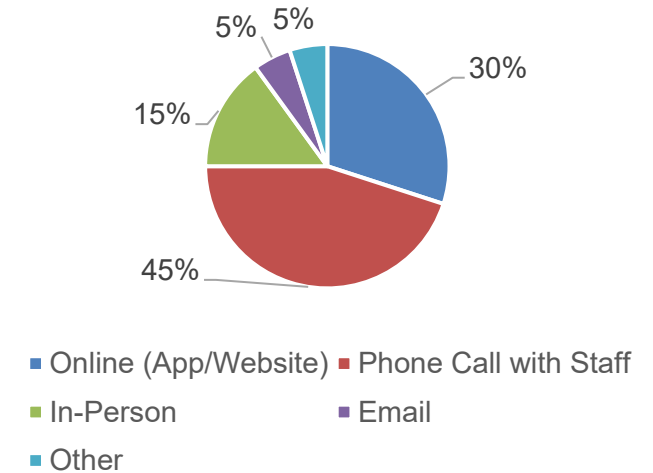
Negative impacts were identified for:

- Older people and disabled individuals with low digital literacy or no access to devices.
- Those with English as a second language who found the interface difficult to understand.
- Carers who reported difficulty managing multiple appointments for dependents online.
- Socio-economic
- Feedback also showed that some individuals prefer speaking to a person due to anxiety or lack of confidence using digital tools.

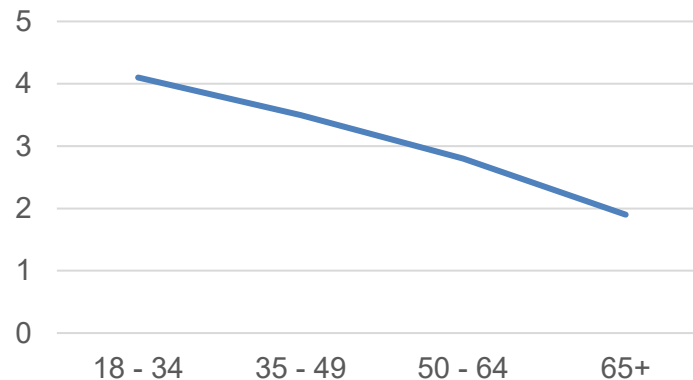
Barriers to Accessing Digital Tools by Age Group



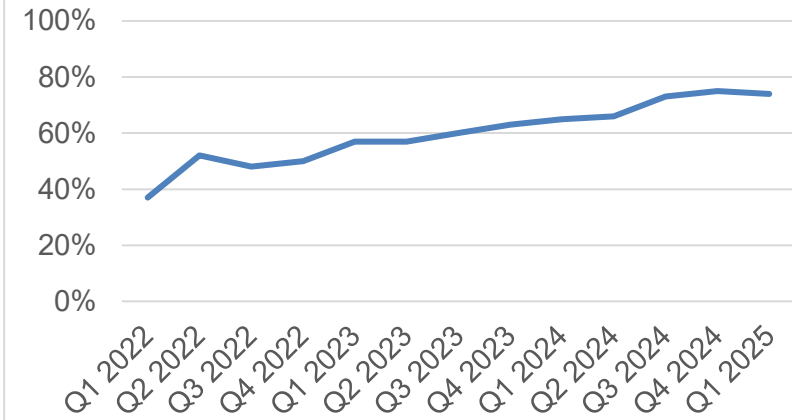
% Preferred Contact Method



Self-Reported Digital Confidence Score (by Age)



% Carers reporting Difficulty



No immediate changes were made to the business case but mitigating actions have been identified (below)

Actions going forward:

- Provide in-person and telephone support to assist older service users and those who do not have access to digital devices with the online system.

	<ul style="list-style-type: none"> - A training guide and digital support sessions will be offered through community partners. - Ensure the website meets Accessible Information Standard - Implement voice command and screen reader compatibility - The online system will be developed with language translation options and screen reader compatibility. - Ensure priority booking options for maternity-related appointments. - Allow easy updating of personal information and preferred names in the system. - Alternative Booking Methods: In person and over the telephone. - To help socio-economically there will be sign posting to charities who can provide digital equipment and internet access. - Ensure the system is accessible via smartphones as well as computers. - Provide free internet access points in public libraries and community centres. - Ensure staff are aware and trained to be using the new system, so they are able to help any service user queries. - Further engagement is planned post implementation to monitor ongoing impact and adapt accordingly. - Carers who find it difficult managing multiple appointment online, can have different accounts for their dependents linked to one log in. 		
Aim/Purpose of the project/decision	The service is introducing a new online appointment booking system to improve access to healthcare services, reduce wait times, and enhance patient experience. This Equality Impact Assessment evaluates the potential impacts on the nine protected characteristics and considers additional factors such as digital inclusion, carers, and socio-economic status.		
Date it will be going to committee/SMT/SLT for approval	30 August 2024 to be approved at the Digital Sub-Committee		
Project Lead (or Delegate) Signature	Alex Smith	Date	1 August 2024
EDI Team Signature		Date approved	
Comments from EDI Team			

No.	Please answer the following questions, using any data/intelligence you have available right now.	Likelihood	Consequence	Comments
1.	Does this project affect people with protected characteristics, and to what extent does it impact access, experience, and outcomes?	5 - Almost Certain	4 - Medium Impact	<p>This is likely to have a positive impact on access and convenience for many service users, particularly those who are digitally confident and prefer managing their care online. However, negative impacts have been identified in particular for older adults, disabled people, those who may not have English as their language, and carers who have a difficult time managing multiple appointments, individuals may not have access to mobile phone, laptop/computer and internet (age, disability, race, carers and socio-economic). Mitigating actions such as maintaining a telephone booking line, offering translated materials, and providing community-based digital support are in place to reduce this risk (all mitigating actions have been detailed above).</p> <p>Ultimately, while the project is expected to enhance user experience for many, continuous monitoring is needed to ensure it does not worsen outcomes for those at risk of digital exclusion.</p>
2.	Has your data and/or engagement identified that there will be an impact on Protected Characteristics?	5 - Almost Certain	4 - Medium Impact	<p>There are both positive and negative impacts identified through the engagement and data analysis. The project is likely to have a positive impact on access and convenience for many service users, especially those who are digitally confident and prefer managing their care online. However, negative impacts were identified for groups more likely to be digitally excluded, including older adults, disabled people, carers managing multiple appointments, people who do not speak English as their first language, and individuals without access to digital devices or the internet. To address these, mitigating actions have been implemented (as stated above and in Q5). These actions are intended to reduce barriers, but ongoing monitoring will be</p>

				necessary to ensure the system remains accessible and equitable for all service users.
3.	Are adjustments/mitigating actions required to ensure the project is accessible and what will the Impact be on protected characteristics?	5 - Almost Certain	4 - Medium Impact	<p>To reduce the negative accessibility impacts, several actions have been identified and have either been implemented or will be implemented. These can be seen in the engagement data and mitigating actions explained above and in Q5.</p> <p>Changes have also been made to how we communicate ensuring we use clear, jargon free language and culturally appropriate materials. The service design has been informed by inclusive design principles, including screen-reader compatibility and mobile-friendly access, as well as consultation with disability and carer groups to identify additional reasonable adjustments where needed.</p> <p>Resources have been allocated to support these mitigating actions, including a small fund for translating materials and a partnership with local voluntary organisations to deliver digital support. Timelines for implementation have been built into the project plan, with regular review points scheduled post-launch to assess and adapt as needed.</p> <p>Along with the actions identified we have built in feedback mechanisms as roll out the service to help capture ongoing accessibility issues and inform further improvement.</p>
4.	Are significant health inequalities associated with this project and what will the affect be on people with protected characteristics?	3 - Possible	3 - (Low) Medium Impact	This project will reduce and may increase existing health inequalities. As we are offering more flexible and easy access to appointments, the online booking system will help to reduce inequalities for those who are digitally literate or have mobility constraints, this will

				<p>increase access to care. However, if the mitigating actions are not implemented appropriately then this could widen the inequalities for groups such as older adults, disabled people, those with limited English, carers, and individuals from lower socio-economic backgrounds.</p> <p>The project has considered social determinants of health, particularly digital access, income levels, and communication barriers. For example, the risk of digital exclusion has been addressed through non-digital alternatives (e.g. telephone booking), and by partnering with community organisations to support digital literacy. Carers have been considered, recognising the added complexity they face in managing multiple appointments, and translated materials and accessible formats have been developed to support those with communication needs or language barriers.</p> <p>Certain protected groups, including Global Majority, disabled people, and individuals in deprived areas, are at greater risk of poor health outcomes, and this project acknowledges that geographical and socio-economic factors, such as poor internet connectivity or lack of access to digital devices. By embedding an inclusive design, maintaining flexible access routes, and continuing community engagement, the project aims to reduce these risks and support equity of access across all population groups.</p>
5.	If any impact is identified, how likely will there be mitigating actions and how will these be reviewed?	5 - Almost Certain	4 - Medium Impact	<p>Mitigating actions will be put in place and monitored to ensure there is no adverse effect on any protected characteristics, particularly for those groups identified above. These actions include:</p>

				<ul style="list-style-type: none"> - Provide in-person and telephone support to assist older service users and those who do not have access to digital devices with the online system. - A training guide and digital support sessions will be offered through community partners. - Ensure the website meets Accessible Information Standard - Implement voice command and screen reader compatibility - The online system will be developed with language translation options and screen reader compatibility. - Ensure priority booking options for maternity-related appointments. - Allow easy updating of personal information and preferred names in the system. - Alternative Booking Methods: In person and over the telephone. - To help socio-economically there will be sign posting to charities who can provide digital equipment and internet access. - Ensure the system is accessible via smartphones as well as computers. - Provide free internet access points in public libraries and community centres. - Ensure staff are aware and trained to be using the new system, so they are able to help any service user queries. - Further engagement is planned post implementation to monitor ongoing impact and adapt accordingly. - Carers who find it difficult managing multiple appointment online, can have different accounts for their dependents linked to one log in.
--	--	--	--	--

				<p>There is a clear implementation plan, which outlines the responsibilities and timelines for each action. The project team will be responsible for the actions and ensuring they are implemented. Progress will be monitored using a combination of service usage data (e.g. online vs. telephone bookings), demographic analysis, and ongoing feedback mechanisms (such as patient surveys and partner input). Reviews will be taking place at 3,6 and 12 months after the service has been launched.</p> <p>We will ensure there is ongoing engagement with the protected groups, which have been impacted.</p>
	Overall	5 - Almost Certain	4 - Medium Impact	<p>20 - Red</p> <p>A Full EIA must be undertaken.</p>

Likelihood:

Score	Likelihood	Description
1	Rare	Occurrence is rare/measures are in place to ensure that no adverse impact will occur to patients or staff with protected characteristics. There is sufficient data to make a decision and relevant engagement has been undertaken.
2	Unlikely	It is unlikely to occur/ measures are in place to ensure that no adverse impact will occur to patients or staff with protected characteristics/ there is sufficient data to make a decision and engagement has been undertaken.
3	Possible	There is a 50/50 possibility for it to occur/no measures in place for any adverse impact if it was to occur/ there is insufficient data to make a decision or engagement has not been undertaken.
4	Likely	There is a high chance of inequalities to occur more likely/no measures are in place any adverse impact/ there is insufficient data to make a decision or engagement has not been undertaken.
5	Almost certain	It is almost certain to cause inequalities with this project/ there are no measures in place for any adverse impact/ there is insufficient data to make a decision or engagement has not been undertaken.

Consequence

Score	Consequence	Description
1	No impact	<ul style="list-style-type: none"> No impact any of the protected characteristics or the organisation/no adverse impact likely. No engagement is required/there is enough data from previous engagement undertaken No adjustments needed to make the proposal accessible. No health inequalities associated with this project No monitoring of mitigating actions required as no impact/ mitigating reasons e.g. Legal obligations/for a certain protected characteristics. Equality Analysis Screening form to be completed only.
2	Minor impact	<ul style="list-style-type: none"> Minor impact any of the protected characteristics or the organisation/adverse impact is unlikely. No/minor engagement is required/there is enough data from previous engagement undertaken No/minor adjustments needed to make the proposal accessible. No/minor health inequalities associated with this project No monitoring of mitigating actions required as no impact/mitigating reasons e.g. legal obligations/for a certain protected characteristics. Measures are in place to ensure there is no adverse impact that will occur Equality Analysis Screening form to be completed only.
3	(Low) medium impact	<ul style="list-style-type: none"> There is a medium impact any of the protected characteristics or the organisation/adverse impact is likely. There is a requirement for engagement is required/there is insufficient data to make a decision on impact on protected characteristics Adjustments are needed to make the proposal accessible. There is a medium impact health inequalities associated with this project monitoring of mitigating actions required as there is a medium impact / Measures/ mitigating actions are not yet in place to ensure negative impact does not occur. Will most likely require a full Equality Analysis to be completed.
4	Medium Impact	<ul style="list-style-type: none"> Significant to critical impact to any of the protected characteristics or the organisation/adverse impact is likely. There is a requirement for engagement /there is insufficient data to make a decision on impact on protected characteristics/There is a fair amount of evidence that some groups are (or could be) differently affected by it. There is evidence to suggest that adjustments are needed to make the proposal accessible. There is a significant to critical impact on health inequalities associated with this project/ leads to non-compliance with legislation and could therefore be an organisation risk Monitoring of mitigated actions required as there is a significant to critical impact / Measures/ mitigating actions are not yet in place to ensure negative impact does not occur.

		<ul style="list-style-type: none"> Requires a full Equality Analysis to be completed.
5	High impact	<ul style="list-style-type: none"> Critical to Major impact to any of the protected characteristics or the organisation/adverse impact is highly likely. There is a requirement for engagement /there is insufficient data to make a decision on impact on protected characteristics/There is a fair amount of evidence that some groups are (or could be) differently affected by it. There is substantial amount of evidence to suggest that adjustments are needed to make the proposal accessible. There is a critical to major impact on health inequalities associated with this project/ leads to non-compliance with legislation and could therefore be an organisation risk Monitoring of mitigated actions required as there is a critical to major impact / Measures/mitigations are not yet in place to ensure negative impact does not occur. Requires a full Equality Analysis to be completed.

- To determine if you need to complete a full Equality Impact Assessment form, use the overall score from the table above.
- Calculate the score by multiplying Likelihood and Consequence (L X C).
- Use the following key to interpret your score:
 - **Green:** Only the screening form needs to be completed.
 - **Amber:** Complete the screening form; a full Equality Impact Assessment may be needed after review by the EDI team.
 - **Red:** A full Equality Impact Assessment form must be completed.

Equality Impact Assessment Matrix

		Likelihood					
		Rare	Unlikely	Possible	Likely	Almost Certain	
		1	2	3	4	5	
Consequence	High impact	5	5	10	15	20	25
	Medium Impact	4	4	8	12	16	20
	(Low) medium impact	3	3	6	9	12	15
	Minor impact	2	2	4	6	8	10
	No Impact	1	1	2	3	4	5

Equality Impact Assessment: Full Assessment (EXAMPLE)

To complete the full assessment, please consider the following information. Below is the form you need to fill out and return to the Equality, Diversity, and Inclusion Team at equality@selondonics.nhs.uk.

1. Impact on Protected Patient and Staff Groups

- 1.1. Consider how your project affects protected groups to avoid disproportionate impacts and biases in services or workforce decisions.
- 1.2. For information on protected characteristics, click on the following link: [Protected characteristics | EHRC](#)
- 1.3. Do you understand the local demographics, potential health inequalities, and barriers to engagement (such as language or service access)? What involvement with local people and communities has been considered, or what engagement gaps need addressing? Consider intersectional issues where individuals may face disadvantages due to more than one protected characteristic, e.g., Global Majority women.
- 1.4. Have you undertaken engagement with staff to understand their needs, concerns, and any increased risks? If implementing this project, will a risk assessment be necessary? In workforce planning, should considerations be made for increasing representation or occupational requirement exceptions?

2. Describe Potential Impacts on Protected Groups:

- 2.1. **Age:** Consider how different age groups will access the project. How does the age distribution in the community/workforce affect the project? How will you ensure Digital Inclusion?
- 2.2. **Disability:** Consider visible and hidden disabilities, including physical, mental, Neurodiversity and learning disabilities. Think about accessibility (location, signage, furniture etc.), disability awareness training for staff, engaging with the community and whether mental health issues are significant in the local population.
- 2.3. **Race:** Consider local demographics and cultural issues, such as language support and cultural sensitivity. Address health inequalities and provide staff training on cultural awareness, how to tackle health inequalities etc.
- 2.4. **Sex/gender:** Understand the impact on males and females, considering privacy, dignity, and occupational requirement exceptions (this is specific exceptions for example, a service for domestic abuse). Consider how the project may affect health outcomes differently for men and women.
- 2.5. **Pregnancy & Maternity:** Consider accessibility for pregnant individuals and those on maternity, such as facilities for breastfeeding and baby-changing, and whether the project supports their needs in accordance with the law. Have you considered pregnant workforce needs?
- 2.6. **Religion or Belief:** Consider the religion or beliefs of the local population. This includes staff training on respecting differences, and accommodating religious practices, such as prayer times or timings to implement a change/activity e.g. during a time of religious holiday such as Ramadan? Is there an area for prayer times, religious rituals etc.
- 2.7. **Sexual Orientation:** Create an inclusive and welcoming environment that respects Lesbian Gay Bisexual Transgender Queer and other (LGBTQ+) individuals. Ensure language and materials are welcoming and that staff are trained on how to ask about sexual orientation

respectfully and sensitively. Consider health needs and inequalities for the LGBTQ+ community, particularly trans people who often face significant barriers to healthcare, poorer outcomes and greater social stigma.

2.8. Gender Reassignment: Ensure the project is inclusive and non-judgmental for those undergoing gender reassignment. Consider confidentiality, training (is it needed), and communication needs.

2.9. Marriage and Civil Partnership: Consider whether the project creates disparities in issues of access and confidentiality. You need to ensure there is equal status for spouses and civil partners.

2.10. Carers: Does your project have an impact on carers? Consider the impact on carers, including venue and timing, and ensure their voices are heard. Provide necessary support.

2.11. Socio-economic/deprivation: Consider the impact on individuals facing economic hardship, such as low-income families or those experiencing homelessness or substance misuse.

2.12. Digital inclusion: Assess access to technology, digital literacy, and the accessibility of digital platforms. Ensure resources are available in different languages and formats. Consider whether specific training or support is required. Does it meet Accessible Information Standards.

3. Adherence to the General Duty of the Equality Act 2010

Does the project:

3.1. Eliminate unlawful discrimination, harassment, and victimisation?

3.2. Advance equality of opportunity between those who share a protected characteristic and those who do not?

3.3. Foster good relations across all protected characteristics?

4. Does this project/decision adhere to the relevant articles of the Human Rights Act 1998?

4.1. Summarise how the project upholds relevant articles of the Human Rights Act 1998 using the FREDA values framework (below).

Value	Human Rights	Example
Fairness	Right to a fair trial	Establishing a robust and fair process for addressing concerns about the professional conduct or performance of healthcare professionals.
Respect	Right to respect for family and private life, home and correspondence	Respecting diverse families, including same-sex couples with children. Avoiding unjustified denial of access to family for those in detention or residential care.
Equality	Right not to be discriminated against in the enjoyment of other human rights	Committing to improving mental health services for people from Global Majority groups. Ensuring that no one is denied treatment solely because of their age.
Dignity	Right not be tortured or treated in an inhuman or degrading way	Making sure there are enough staff to promptly change wet sheets to prevent degrading treatment.
Autonomy	Right to respect for private life	Involving individuals in decisions about their treatment and care.

5. Preventing disproportionate negative impacts

5.1. If any disproportionate negative impacts are identified, outline the actions to mitigate these impacts. Complete the action plan below (Equality Impact Assessment: Full assessment) to ensure proper monitoring and review.

Equality Impact Assessment: Full form (EXAMPLE)

Equality Impact Assessment: Full assessment							
Name (project lead or delegate)	Alex Smith						
Job title	Project Lead						
Organisation	South East London ICB						
Name of Project	Wizz Online Appointments						
Area(s) / Place(s) Impacted	<input type="checkbox"/> SEL ICB	<input type="checkbox"/> Bexley	<input type="checkbox"/> Bromley	<input type="checkbox"/> Greenwich	<input type="checkbox"/> Lambeth	<input type="checkbox"/> Lewisham	<input checked="" type="checkbox"/> Southwark
Publication of EIA	Is there any reason this EIA cannot be published on the ICB website (anonymously)? If yes, please provide an explanation.						
	<input type="checkbox"/> Yes:				<input checked="" type="checkbox"/> No: It is fine to publish this EIA anonymously.		
Engagement/Data gather	<p>Purpose of Engagement and Data Collection The purpose of engagement was to ensure the introduction of the new online appointment booking system is equitable, accessible, and responsive to the diverse needs of our local population. We aimed to understand any potential barriers to access, in particular for individuals with protected characteristics (including carers, digitally excluded groups, and those from lower socio-economic backgrounds). This enabled us to identify both positive and negative impacts early and take proactive steps to mitigate them.</p> <p>Engagement Methods Used We used a mix of quantitative and qualitative engagement methods, which included:</p>						

- A survey was developed and distributed both online and in paper format (available in Easy Read and translated versions upon request).
- We conducted focus groups which targeted communities, including older service users, disabled people, and those from Global Majority backgrounds.
- One-to-one interviews were offered to carers and those without digital access.
- Feedback mechanisms at the point a patient was receiving care (e.g. during phone or face-to-face booking) were used to gather insights from those less likely to engage digitally.

Type of Data Considered

We reviewed demographic data from local population health profiles, digital inclusion, and GP practice registration data to understand potential inequalities in access. This informed where to target engagement activities. We also analysed patient feedback data from existing appointment booking processes to identify existing issues.

Stakeholder Identification and Communication

Stakeholders were identified through:

- Internal data from primary care practices.
- Signposting by the SEL ICB's engagement team.
- Community and voluntary sector partners who support specific groups (e.g., Age UK, local disability advocacy groups etc.).

To ensure we communicated effectively, we ensured:

- Used clear, jargon-free information.
- Surveys and materials were translated into the top five most spoken languages locally.
- Community organisations helped disseminate the survey through trusted networks.

Ensuring Diverse Representation and Tailored Approaches

We used targeted outreach to include voices that are often underrepresented in digital consultations, such as:

- Individuals aged 75+ (engaged via community centres and care homes).
- People with learning disabilities (through supported workshops with carers present).
- Global Majority communities (via trusted faith-based and cultural organisations).
- Carers (through carer support groups and forums).
- Surveys were available in large print, Easy Read, and languages other than English.
- Phone and in person options were offered for those who could not engage digitally.

Data Analysis and Inclusion

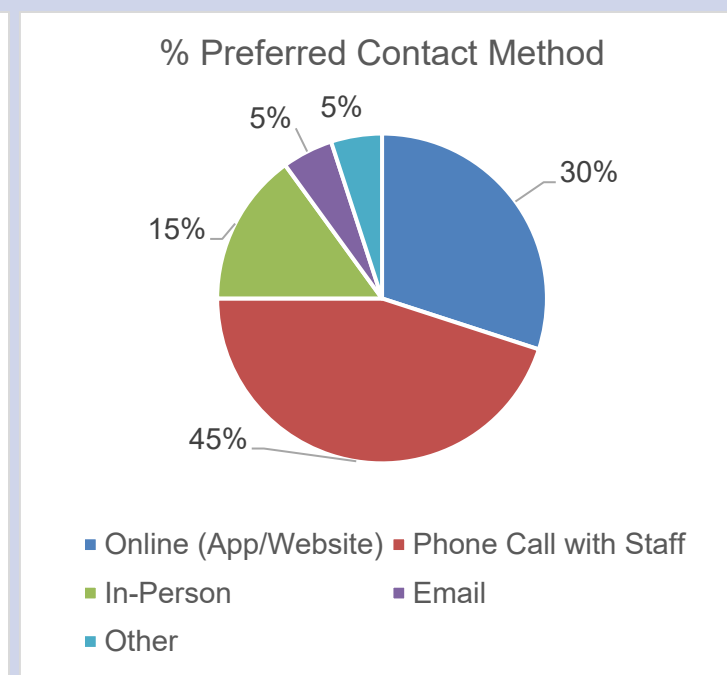
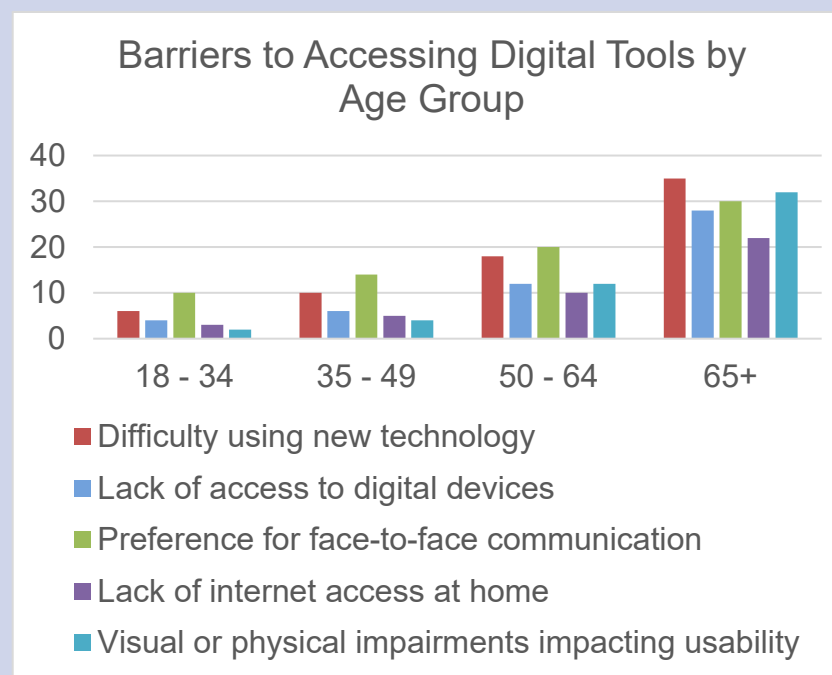
Feedback was analysed thematically for qualitative data and by demographic subgroup for quantitative data. This helped us identify trends or disparities in experiences across different protected characteristics.

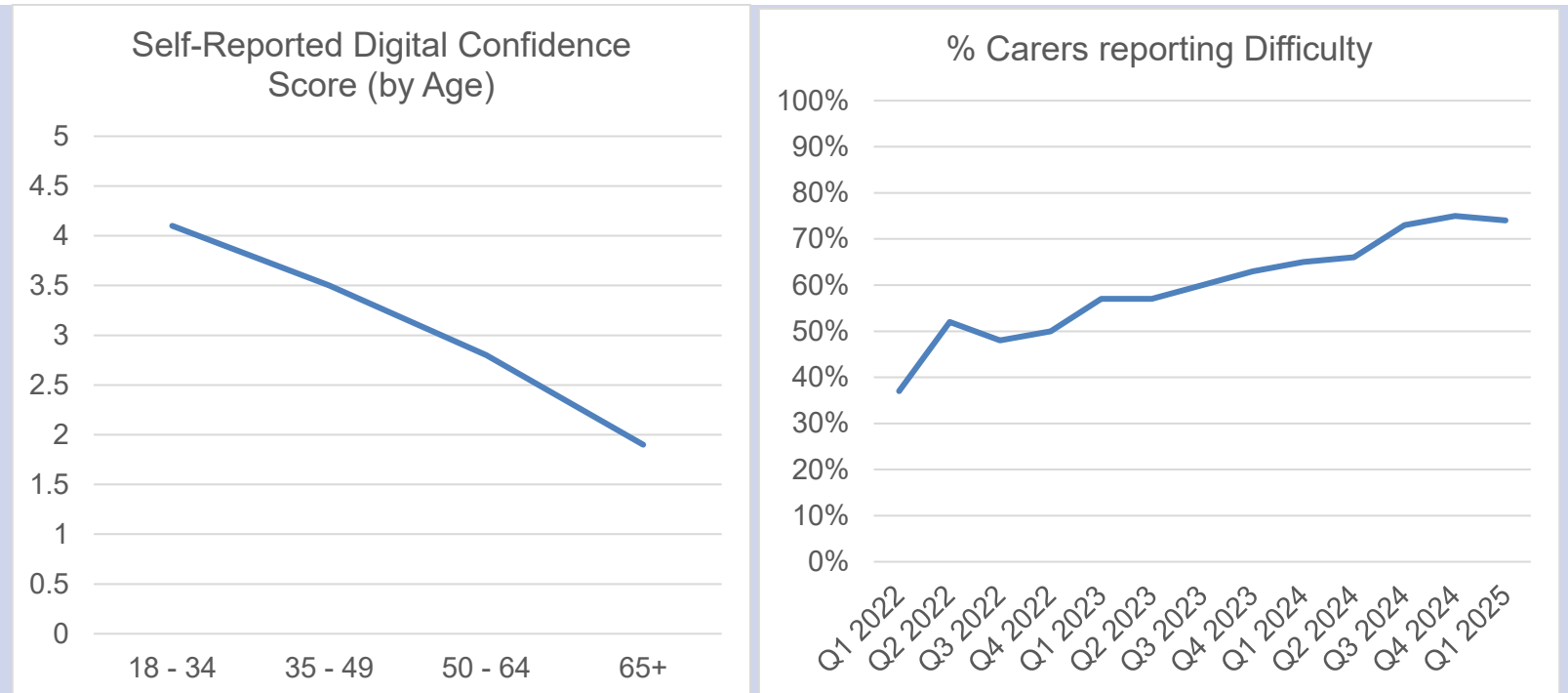
Findings Summary

- Positive feedback included appreciation for the convenience and flexibility of booking online.

Negative impacts were identified for:

- Older people and disabled individuals with low digital literacy or no access to devices.
- Those with English as a second language who found the interface difficult to understand.
- Carers who reported difficulty managing multiple appointments for dependents online.
- Socio-economic
- Feedback also showed that some individuals prefer speaking to a person due to anxiety or lack of confidence using digital tools.





No immediate changes were made to the business case but mitigating actions have been identified (below)

Actions going forward:

- Provide in-person and telephone support to assist older service users and those who do not have access to digital devices with the online system.
- A training guide and digital support sessions will be offered through community partners.
- Ensure the website meets Accessible Information Standard
- Implement voice command and screen reader compatibility
- The online system will be developed with language translation options and screen reader compatibility.
- Ensure priority booking options for maternity-related appointments.
- Allow easy updating of personal information and preferred names in the system.
- Alternative Booking Methods: In person and over the telephone.
- To help socio-economically there will be sign posting to charities who can provide digital equipment and internet access.

	<ul style="list-style-type: none"> - Ensure the system is accessible via smartphones as well as computers. - Provide free internet access points in public libraries and community centres. - Ensure staff are aware and trained to be using the new system, so they are able to help any service user queries. - Further engagement is planned post implementation to monitor ongoing impact and adapt accordingly. - Carers who find it difficult managing multiple appointment online, can have different accounts for their dependents linked to one log in. 		
Aim/Purpose of the project/decision	The service is introducing a new online appointment booking system improve access to healthcare services, reduce wait times, and enhance patient experience. This Equality Impact Assessment evaluates the potential impacts on the nine protected characteristics and considers additional factors such as digital inclusion, carers, and socio-economic status.		
Date it will be going to committee/SMT/SLT for approval	30 August 2024 to be approved at the Digital Sub-Committee		
Project Lead (or Delegate) Signature	Alex Smith	Date	1 August 2024
EDI Team Signature		Date Approved	
Comments from EDI Team			
1) How does this project impact protected patient and staff groups?	The introduction of an online appointment booking system offers significant benefits in terms of convenience and accessibility. However, it also presents challenges, particularly for older adults, those with disabilities, non-English speakers, and individuals from lower socio-economic backgrounds. Mitigation measures, including support services, accessibility enhancements, and digital inclusion initiatives, are essential to ensure equitable access for all patients.		

2) Please briefly describe any potential impacts on the protected groups below:	Summary of likely impacts	Will this be disproportionate? Y/N
Age	<p>Positive Impacts:</p> <ul style="list-style-type: none"> • Younger patients, particularly those under 40, are more likely to use and benefit from the convenience of an online system. • Facilitates easier booking for parents scheduling appointments for their children. <p>Negative Impacts:</p> <ul style="list-style-type: none"> • Older adults, especially those over 65, may face challenges due to lower digital literacy rates. 	Y
Disability	<p>Positive Impacts:</p> <ul style="list-style-type: none"> • People with mobility issues can book appointments without needing to visit the practice. • Visual and hearing impairments can be accommodated with accessible website features. <p>Negative Impacts:</p> <ul style="list-style-type: none"> • Visually impaired individuals may struggle if the website is not fully accessible. 	Y
Race	<p>Positive Impacts:</p> <ul style="list-style-type: none"> • Available 24/7, which benefits individuals who may work irregular hours or multiple jobs. <p>Negative Impacts:</p> <ul style="list-style-type: none"> • Language barriers might prevent non-English speakers from using the system. 	Y
Sex/gender	<p>Positive Impacts:</p> <ul style="list-style-type: none"> • Equally benefits all sexes by providing more flexible appointment scheduling. 	N
Pregnancy and maternity	<p>Positive Impacts:</p> <ul style="list-style-type: none"> • Pregnant individuals can easily schedule necessary frequent appointments. <p>Negative Impacts:</p>	N

	<ul style="list-style-type: none"> • Lack of priority slots for those have maternity related appointments/concerns 	
Religion or belief	Positive Impacts: Flexibility in booking allows patients to schedule around religious observances.	N
Sexual orientation	Positive Impacts: <ul style="list-style-type: none"> • Easier and private access to healthcare services for LGBTQ+ individuals. 	N
Gender reassignment	Positive Impacts: <ul style="list-style-type: none"> • Simplifies the booking process for transgender individuals who might face anxiety with in-person interactions. Negative Impacts: <ul style="list-style-type: none"> • Potential misgendering issues in the system if personal information is not correctly updated. 	N
Marriage or civil partnership	Positive Impacts: <ul style="list-style-type: none"> • Couples can manage appointments more efficiently together. 	N
Carers	Positive Impact: <ul style="list-style-type: none"> • Convenience and Accessibility: An online booking system allows carers to easily schedule and manage appointments at any time, reducing the need for phone calls or in-person visits, which can be challenging when balancing caregiving responsibilities. Negative Impact: <ul style="list-style-type: none"> • Digital Divide: Carers who are not tech-savvy or lack access to reliable internet may find it difficult to use an online system, potentially leading to missed or improperly scheduled appointments. 	N
Socio-economic/deprivation	Positive Impacts: <ul style="list-style-type: none"> • Reduces the need for travel, saving time and money for economically disadvantaged individuals. Negative Impacts: <ul style="list-style-type: none"> • Those in deprived areas may have less access to digital devices and the internet. 	Y

Digital Inclusion	<p>Positive Impacts:</p> <ul style="list-style-type: none"> • Increases convenience for those with digital access. <p>Negative Impacts:</p> <ul style="list-style-type: none"> • Digital exclusion for those without internet access or digital devices. • Staff unaware of how to use the online booking system 	Y
3) Does this project adhere to the three aims of the General Duty of the Equality Act 2010?	<p>Yes – mitigating actions have been put into place to ensure that any negative impact does not arise related to any of the protected characteristics, which provides equal opportunities (access?) through alternative booking (?) methods still being available and provision of training. This service will bring many positive impacts along with it and fosters good relations across protected characteristics by promoting accessibility, inclusivity and fairness. It ensures that people with diverse needs, such as those who may struggle with traditional booking methods due to language barriers, mobility challenges, or differing work schedules can access services more easily. Additionally, online booking allows users to exercise greater autonomy and control over their appointments, fostering a more equitable and user-friendly experience that helps build trust and positive relationships between the organisation and its service users.</p>	
4) Preventing disproportionate negative impacts	<p>Mitigating actions have been planned/ already implemented and are detailed below. There will be a plan to monitor the system's usage and gather feedback from service users. A follow up Equality Impact Assessment will be conducted to assess the ongoing impacts and make any adjustments needed.</p>	

Action plan

Action Plan – where outcomes or issues arising from the assessment have identified unintended negative impacts they should be prevented. Please complete the action plan below, using additional rows where necessary, to highlight mitigating actions and how they will be implemented.

Action plan				
Organisation name	South East London ICB			
Project lead name and title	Alex Smith: Project Lead			
Name of project	Wizz Online Appointments			
Date of completion	30 September 2024 (date of launch)			
itigating action	Which protected characteristic does it relate to?	Outcome	Lead name	Completion date
Provide in-person and telephone support to assist older service users and those who do not have access to digital devices with the online system.	Age	We have appointed a staff member to be able to assist any service users who may require help to use online booking over the telephone or in person.	Alex Smith	Complete
Offer a training guide and digital support sessions will be offered through community partners.	Age/Digital inclusion	The staff member who will be assisting service users will also be providing training sessions and/or leaflets on how to use the system to any of our service users.	Alex Smith	Complete

Ensure the website meets Accessible Information Standard	Disability	This is ongoing and we are in the process of ensuring the booking website meets AIS – this will make it easier for service users who have a disability to navigate the website.	Alex Smith	30 September 2024
Implement voice command and screen reader compatibility.	Disability	As we will be adhering to the AIS – website will be compatible with screen readers and voice commands.	Alex Smith	30 September 2024
The online system will be developed with language translation options and screen reader compatibility.	Race	Those who require the booking system to be in a different language will be able to change the language.	Alex Smith	30 September 2024
Ensure priority booking options for maternity-related appointments.	Pregnancy & maternity	Anyone who is identified as pregnant, will have a few priority slots available – if none are available there will be midwife slots available.	Alex Smith	Complete
Allow easy updating of personal information and preferred names in the system.	Gender reassignment	Patients will be able to update their information when the need arises. This will need to be approved by the admin team, however checks will be taken to ensure it is the service user who has asked for details to be changed.	Alex Smith	30 September 2024
Alternative Booking Methods: In person and over the telephone.	Age/Carers/digital inclusion	We will still be allowing service users to book appointments in person or over the telephone, however we will encourage them to learn and use a dedicated training service.	Alex Smith	Complete
To help socio-economically there will be sign posting to charities who	Socio-economic/deprivation/digital inclusion/Age	Where we identify that individuals do not have access to devices, we will sign post them to the relevant VCSE organisation	Alex Smith	Complete

can provide digital equipment and internet access.		that can help them procure devices for free.		
Ensure the system is accessible via smartphones as well as computers.	Socio-economic/deprivation/digital inclusion	The website will be user friendly on computers and smartphones. We will be potentially looking to develop an app that will make it easier to book, however this is not in scope at the moment.	Alex Smith	30 September 2024
Provide free internet access points in public libraries and community centres.	Digital inclusion	Where we identify that individuals do not have access to devices or the internet, we will sign post them to libraries and community centres, along with VCSE organisations that may be able to help them.	Alex Smith	Complete
Ensure staff are aware and trained to be using the new system, so they are able to help any service user queries.	Digital Inclusion	All staff will be trained full on the system and will understand how it works, along with this we will have a dedicated staff member who will be the SME and will provide dedicated training and support to service users.	Alex Smith	Complete
Further engagement is planned post implementation to monitor ongoing impact and adapt accordingly.	All	This is to be implemented following the roll out of the new services and will occur at 3, 6,9 and 12 months	Alex Smith	TBC
Carers who find it difficult managing multiple appointment online, can have different accounts for their dependents linked to one log in.	Carers/Digital Inclusion	This will be rolled out at the start of the project, ensuring that carers do not have a hard managing multiple dependents.	Alex Smith	30 September 2024
Does the risk team need to made aware of the about risks and	No, the actions do not need to be placed onto the risk register.			

actions in place for the Corporate Risk register?	
If yes, please advise when this will be done.	Not applicable.
How will these mitigating actions be monitored?	<p>Several actions have been identified, which will require monitoring to ensure they have been completed. A bi-weekly review of the actions will be undertaken to ensure we are on track for completion.</p> <p>Once we are live we will be gathering feedback from all of our service users over a one year period: This will consist of Month 3, 6, 9 and 12.</p> <p>A follow up Equality Impact Assessment will be conducted following 12 months to understand if we have been able to address the negative impacts and if there any further changes.</p>

Equality Impact Assessment check list

The following Equality Impact Assessment checklist is designed to help you design your project and ensure that your project has addressed all the necessary aspects required by the Integrated Care Board. Use it as a tool to confirm that all relevant elements have been completed, where applicable, before submitting your project for committee approval. While not all projects will require every aspect, this checklist aims to cover as many considerations as possible.

1. Project Proposal Development

- Define Objectives and Scope
 - ✓ Outline the project's goals, scope, and expected outcomes.
 - ✓ Specify the service or product being procured or developed.
 - ✓ Stakeholder Identification: Identify key stakeholders, including patients, healthcare providers, and partner organisations.

2. Preliminary Assessments

- Needs Assessment (if applicable)
 - ✓ Conduct a thorough needs assessment to justify the project.
 - ✓ Gather data and evidence supporting the need for the service or product.

3. Governance and Compliance

- Equality Impact Assessment
 - ✓ Assess the potential impact on different demographic groups, ensuring compliance with the Equality Act 2010.
 - ✓ Undertake data collection and any engagement required
 - ✓ Document any potential inequalities and propose mitigation strategies (high risks should be added to the corporate risk register).
- Data Protection Impact Assessment (DPIA)
 - ✓ Evaluate how personal data will be handled, stored, and protected.
 - ✓ Ensure compliance with the General Data Protection Regulation (GDPR) and Data Protection Act 2018.
 - ✓ Identify and mitigate any data privacy risks.
- Quality Impact Assessment (QIA)
 - ✓ Assess the potential impact on the quality of care and service delivery.
 - ✓ Identify risks to patient safety, clinical outcomes, and patient experience.
 - ✓ Propose mitigation strategies for any identified risks.

4. Engagement

- Stakeholder Engagement Plan
 - ✓ Develop a plan for engaging with stakeholders throughout the project lifecycle.
 - ✓ Include mechanisms for feedback.
 - ✓ Involve people and communities in the decision-making process.
 - ✓ Ensure their views and experiences are considered in project development.

5. Financial and Resource Planning

- Cost-Benefit Analysis – as a result of the Equality Impact Assessment (if applicable)
 - ✓ Conduct a financial analysis, including cost estimates, funding sources, and return on investment.
 - ✓ Evaluate the project's financial viability and sustainability.

- Resource Allocation
 - Identify required resources (staff, technology, facilities) and plan for their allocation.

6. Risk Assessment and Management

- Risk Register
 - ✓ Develop a risk register to identify, assess, and manage potential risks.
 - ✓ Include risks related to clinical safety, financial sustainability, project delivery, and reputational impact.

7. Regulatory and Legal Compliance

- Regulatory Approval
 - ✓ Identify any necessary regulatory approvals and ensure compliance.
 - ✓ For medical devices or pharmaceuticals, ensure compliance with MHRA regulations.

8. Implementation Planning

- Project Plan
 - ✓ Develop a detailed project plan, including timelines, milestones, and key deliverables.
 - ✓ Define roles and responsibilities within the project team.

9. Approval and Authorisation

- Internal Review and Approval
 - ✓ Submit the project proposal, including all assessments and documentation, for internal review.
 - ✓ Obtain necessary approvals from relevant committees, such as the Clinical Governance Committee, Finance Committee, and the ICB Board.
- External Review and Approvals (if required)
 - ✓ Seek approval from external bodies if the project requires it (e.g., NHS England, CQC).

10. Monitoring and Evaluation

- Monitoring Plan
 - ✓ Develop a plan for monitoring project implementation and performance.
 - ✓ Include key performance indicators (KPIs) and reporting mechanisms.
- Evaluation and Reporting
 - ✓ Plan for evaluating the project's outcomes and impact.
 - ✓ Establish a timeline and methodology for the final evaluation.

11. Communication and Reporting

- Communication Plan
 - ✓ Develop a communication plan for informing stakeholders about project progress and outcomes.
 - ✓ Include strategies for managing public relations and media engagement.

Glossary

The table below provides a definition of some of the words used within this document to help clarify meanings and ensure understanding.

Term	Definition
Equality	Ensuring that all individuals have the same rights, opportunities, and access to resources, regardless of their background or characteristics such as race, gender, or disability etc.
Diversity	Recognises that everyone is different in a variety of visible and non-visible ways, and that those differences are to be recognised, respected, valued, promoted and celebrated.
Inclusion	The practice of creating fair environments where all individuals feel valued, respected, and able to fully participate, regardless of their differences.
Discrimination	The unfair treatment of individuals or groups based on protected characteristics such as race, gender, age, disability, or sexual orientation.
Direct discrimination	The act of treating someone less favourably than others because of a protected characteristic.
Indirect discrimination	When a policy, practice, or rule that applies to everyone has a disproportionate negative impact on a particular group with a protected characteristic, even if it was not intended to discriminate.
Inequalities	The disparities or differences in access, experience and outcomes between different groups or individuals, often based on characteristics like race, gender, or socioeconomic status.
Mitigated/mitigation	Actions taken to reduce/minimise the negative impact of a risk, issue, or a problem.
Joint Strategic Needs Assessment (JSNA)	An assessment carried out for the current and future health and social care needs of the local community..
Analysing/analysis	The process of examining data and information to understand patterns, relationships, or underlying causes, which allows you to draw conclusions.
Remuneration	The compensation or payment given to an individual for work or services provided, which may include salary, wages, bonuses, and other benefits.
Harassment	Behaviour towards an individual which violates a person's dignity or creates an intimidating, hostile, degrading, or offensive environment for them.
Victimisation	Treating someone unfairly as a result of being involved with a discrimination or harassment complaint.
Engagement	The process of seeking and considering the views, opinions, and feedback of stakeholders or the public before making decisions or implementing changes.
Intersectionality	Different aspects of a person's identity, such as race, gender, class, sexuality, and disability, intersect and interact to create a unique individual. People can be impacted by more than one protected characteristic.

Blank Page

For more information on Equality Impact Assessments or any queries related to them or the information in this document please contact the Equality, Diversity and Inclusion Team on equality@selondonics.nhs.uk.