

Equality Impact Assessment (Stage 1)

This is a legal document as set out in the Equality Act (2010) and the Equality Act 2010 (Specific Duties) (Scotland) regulations 2012 and may be used as evidence for cases referred for further investigation for compliance issues.

Completing this form helps you to decide whether or not to complete to a full (Stage 2) EQIA.

Consideration of the impacts using evidence and public/patient feedback is necessary.

Question 1: Title of Policy, Strategy, Redesign or Plan

Sustainable Vaccination Venues – Kirkcaldy Area

Question 2a: Lead Assessor’s details

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Question 2b: Is there a specific group dedicated to this work? If yes, what is the title of this group?

No

Question 3: Detail the main aim(s) of the Policy, Strategy, Redesign or Plan. Please describe the specific objectives and desired outcomes for this work.

Aim	<p>To provide a sustainable venue in the Kirkcaldy area for an Immunisation Clinic. The present site at M&S, High Street, Kirkcaldy has raised issues for staff and public which include:</p> <ul style="list-style-type: none"> • Parking restrictions for the disabled, elderly and general population. • Health and safety issues to both staff and public due to water leakages, electrical faults, general security and fabric of building. • Landlord exploring possibility sale of building to bring the retails space back to the High Street. <p><i>Landlord accepts the disrepair of the venue and takes full responsibility for upkeep but only short term solutions are viable due to the potential of a sale.</i></p> <p>The proposed venue in Templehall Church, Kirkcaldy will give NHS Fife:</p> <ul style="list-style-type: none"> • Value for money. • Venue which is more fit for purpose in terms of size, quality, layout, appearance, secure vaccination storage.
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Police Scotland has advised and made recommendations of “security risks” for vaccines which, with input from Estates, can be brought up to security standards at a reasonable cost.

Question 4: Identifying the Impacts in brief

Consider any potential Impacts whether positive and/or negative including **social and economic impacts** and human rights. Please note, in brief, what these may be, if any. **Please do not leave any sections blank.**

Relevant Protected Characteristics	Impacts negative and positive Social / Economic Human Rights
<p>Age - <i>think: children and young people, adults, older age etc.</i></p>	<p>As the Vaccination programme provides a service to the population of 50+ years, with the majority being 75+ years, accessibility has been considered as one of the main priorities. This venue provides accessible transport links by public transport to the venue. Bus stops located within walking distance to building. Side street parking at venue and in close proximity to 2 large car parks. Venue on one level with disabled access for disabled and prams etc. Therefore there are no negative impacts identified, it is anticipated that this change will improve accessibility for the above mentioned groups</p>
<p>Disability – <i>think: mental health, physical disability, learning disability, deaf, hard of hearing, sight loss etc.</i></p>	<p>Venue is on one level and has accessibility for all groups. Accessible toilet on premises including baby changing facilities.</p> <p>Information will be communicated in appropriate formats.</p> <p>Hearing loop will be in place and BSL interpretation can be made available on request for appointment.</p>
<p>Race and Ethnicity – <i>Note: Race = “a category of humankind that shares certain distinctive physical traits” e.g. Black, Asian, White, Arab</i></p> <p><i>Ethnicity = “large groups of people classed according to common racial, national, tribal, religious, linguistic or cultural origin/background”</i> <i>Think: White Gypsy Travellers, Black African, Asian Pakistani, White Romanian, Black Scottish, mixed or multiple ethnic groups.</i></p>	<p>NHS website information will also be translated into various languages to ensure capture of those whose preferred language is not English.</p> <p>Gypsy travelers will be communicated of venue change through appropriate communication to Traveler Site Managers and local pharmacies will also be contacted to potentially display flyers illustrating this change.</p>

<p>Sex – <i>think: male and/or female, intersex, Gender-Based Violence</i></p>	<p>Sex not expected to impact accessibility and change of venue.</p>
<p>Sexual Orientation - <i>think: lesbian, gay, bisexual, pansexual, asexual, etc.</i></p>	<p>Data not collected for this group and is not expected to impact accessibility and change of venue</p>
<p>Religion and Belief - <i>Note: Religion refers to any religion, including a lack of religion. Belief refers to any religious or philosophical belief including a lack of belief.</i> <i>Think: Christian, Muslim, Buddhist, Atheist, etc.</i></p>	<p>NHS Chaplains consulted for any impact on religion. It was agreed there will be no issue or any impact to the public and if required any feedback given to this Service regarding any issues will be fed-back to the Immunisations team.</p>
<p>Gender Reassignment – <i>Note: transitioning pre and post transition regardless of Gender Recognition Certificate</i> <i>Think: transgender, gender fluidity, nonbinary, agender, etc.</i></p>	<p>No anticipated impact on this group by this vaccination programme or venue.</p>
<p>Pregnancy and Maternity – <i>Note: Pregnancy is the condition of being pregnant or expecting a baby. Maternity refers to the period after birth.</i> <i>Think: workforce maternity leave, public breast feeding, etc.</i></p>	<p>No anticipated impact on this group by this vaccination programme. Venue on one level with disabled access for prams etc. Therefore there are no negative impacts identified, it is anticipated that this change will improve accessibility for these groups</p>
<p>Marriage and Civil Partnership – <i>Note: Marriage is the union between a man and a woman or between a same-sex couple. Same-sex couples can also have their relationships legally recognised as a civil partnership.</i> <i>Think: workforce, inpatients visiting rights, etc.</i></p>	<p>Data is not collected for this group - there are no expected impacts to this group on accessibility and change of venue.</p>

Question 6: Please include in brief any evidence or relevant information, local or national that has influenced the decisions being made. This could include demographic profiles, audits, publications, and health needs assessments.

This area is central to Kirkcaldy and is easily accessible throughout the area by public transport or car. It is accessible to all age groups and disabilities. NHS Chaplains have been consulted on impact of use of church facilities on other religious groups.

Question 7: Have you consulted with staff, public, service users, children and young people and others to help assess for Impacts?

(Please tick)

Yes	<input checked="" type="checkbox"/>	<input type="checkbox"/>	No	<input type="checkbox"/>
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If yes, **who** was involved and **how** were they involved?

If not, why did you not consult other staff, patients or service users? Do you have feedback, comments/complaints etc that you are using to learn from, what are these and what do they tell you?

Think: Who did you ask? When and how? Did you refer to feedback, comment or complaints etc?

Several Health and Safety concerns have been highlighted, formally and informally, by both staff and public. This has included parking restrictions and high street accessibility, disrepair of the building, lack of adequate heating, building security. Due to the urgency of this change caused by the inadequate current space, no specific public engagement has been undertaken, however the public will be consulted on the new venue in 6 months to ensure safety and equality for all.

Question 10: Which of the following 'Conclusion Options' applies to the results of this Stage 1 EQIA and why? Please detail how and in what way each of the following options applies to your Plan, Strategy, Project, Redesign etc.

Note: This question informs your decision whether a Stage 2 EQIA is necessary or not.

Conclusion Option 1: No further action required

Where no negative impacts or potential for improvement is identified, no further action is required.

No stage 2 EQIA required.

N/A

Conclusion Option 2: Adjustments Made

Potential or actual negative impacts and/or potential for a more positive impact has been identified, therefore appropriate adjustments have been made to mitigate risks and/or make further improvements.

No Stage 2 EQIA required

Any potential negative impacts of this change have been mitigated, as outlined in Q5. It is anticipated that this change will improve accessibility and impact more positively overall.

Conclusion Option 3: Requires Further Adjustments

Potential or actual negative impacts and/or potential for a more positive impact has been identified, but were not successfully made during the Stage 1 EQIA, therefore further adjustments must be made to mitigate risks and/or make further improvements.

Stage 2 EQIA is required to ensure further adjustments are made and appropriate workforce/public/stakeholder engagement has been undertaken.

N/A

Conclusion Option 4: Continue Without Adjustments

Continue with Plan, Project, Strategy, Redesign etc despite a potential or actual negative impact or potential for a more positive impact being identified, but the decision to not make adjustments can be objectively justified.

Stage 2 EQIA is required to fully explore the potential to make adjustments by appropriate workforce/public/stakeholder engagement, or to develop evidence for continuing with the plan without making said adjustments.

N/A

Conclusion Option 5: Stop

Stop the Plan, Project, Strategy, Redesign etc due to a serious risk of negative impact being identified.

Stage 2 EQIA required to fully explore the serious negative impact and engage appropriately

with workforce/public/stakeholders to source solutions to mitigate the serious impact, and where no mitigations found, stop the Plan, Project, Strategy, Redesign etc.

N/A

PLEASE NOTE: ALL LARGE SCALE DEVELOPMENTS, CHANGES, PLANS, POLICIES, BUILDINGS ETC MUST HAVE A STAGE 2 EQIA.


If you have identified that a full EQIA is required then you will need to ensure that you have in place, a working group/ steering group/ oversight group and a means to reasonably address the results of the Stage 1 EQIA and any potential adverse outcomes at your meetings.

For example you can conduct stage 2 and then embed actions into task logs, action plans of sub-groups and identify lead people to take these as actions.

It is a requirement for Stage 2 EQIA's to involve public engagement and participation.

You should make contact with the Participation and Engagement team at fife.participationandengagements@nhs.scot to request community and public representation, and then contact Health Improvement Scotland to discuss further support for participation and engagement.

To be completed by Lead Assessor	
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Signature	N McGuire
Date	28/7/23

To be completed by Equality and Human Rights Lead officer – for quality control purposes	
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Telephone (ext)	29557
Signature	
Date	28/7/23

**Return to Equality and Human Rights Team at
Fife.EqualityandHumanRights@nhs.scot**