Equality & Health Impact Assessment for

Purchasing Card Procedure and Guidance

Part 1

Please answer all questions:-

1.	For service change, provide the title of the Project Outline Document or Business Case and Reference Number	Purchasing Card Procedure and Guidance
2.	Name of Clinical Board / Corporate Directorate and title of lead member of staff, including contact details	Operations and Finance Directorate Huw George, Deputy Chief Executive and Executive Director of Operations and Finance Email: Huw.George2@wales.nhs.uk
3.	Objectives of procedure	The procedure will ensure that the Trust has clear guidance in place for the issuing, usage and governance of Purchasing Cards.
4.	Evidence and background information considered. For example • population data • staff and service users data, as applicable • needs assessment • engagement and involvement findings • research • good practice guidelines • participant knowledge	All Health Boards and Trusts in Wales have similar procedures in place. Similar procedures from Health Boards have been reviewed in the process of updating this procedure to ensure some consistency. The requirements set out in the Standing Financial Instructions (SFIs) have been considered to ensure the detail in this procedure aligns with the SFIs.

	- list of stakeholders and how stakeholders have engaged in the development stages - comments from those involved in the designing and development stages Population pyramids are available from Public Health Wales Observatory and the 'Shaping Our Future Wellbeing' Strategy provides an overview of health need.	A significant piece of work was carried out in 2023 to review purchasing card expenditure across the Trust. The findings of this review have been fed into the process of updating this procedure to ensure guidance is more explicit in what instances and what type of expenditure purchasing cards can be used for. Comments have been sought from members of the Finance Division who are involved in administering Purchasing Cards.
5.	Who will be affected by the procedure Consider staff as well as the population that the project/change may affect to different degrees.	The procedure is to be used by the Finance Division and Purchasing Cardholders across Public Health Wales.

Part 2- Equality and Welsh language

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

Questions in this section relate to the impact on people on the basis of their 'protected characteristics'.

How will the strategy, policy, plan, procedure and/or service impact on:-	Potential positive and/or negative impacts (unintended consequences) Opportunities or gaps	Action taken by Directorate. Make reference to where the mitigation is included in the document, as appropriate **This column is to be updated in future reviews**	Recommendations for improvement/ mitigation/ identified gaps or opportunities
6.1 Age For most purposes, the main categories are: • under 18; • between 18 and 65; and • over 65	The procedure is to be used by all staff.	None required	
6.2 Persons with a disability as defined in the Equality Act 2010 Those with physical impairments, learning disability, sensory loss or impairment, mental health conditions, long-term	Positive – the procedure is to be used by all staff. Whilst the contents of the procedure does not have a negative impact on persons with a disability, as with all written control	Public Health Wales does have provision for the production of documents that are accessible to persons with disabilities. Large print, Braille or audio versions could be provided on request.	

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medical conditions such as diabetes	documents there may be a negative impact due to the format of the control document that is available. Documents are published on the intranet in pdf format. Visual impairment – not all accessibility software accepts pdf format and therefore an alternative format may be required. Learning disability - The documents may also not be understood by those who have difficulty deciphering or reading the written word, for example, dyslexia. Therefore,	The Board Secretary/ Head of Corporate Governance is available to provide advice and assistance in applying the policy and procedure.	

How will the strategy, policy, plan, procedure and/or service impact on:-	Potential positive and/or negative impacts (unintended consequences) Opportunities or gaps	Action taken by Directorate. Make reference to where the mitigation is included in the document, as appropriate **This column is to be updated in future reviews**	Recommendations for improvement/ mitigation/ identified gaps or opportunities
	further explanation and support may be required.		
6.3 People of different genders: Consider men, women, people undergoing gender reassignment **NB** Gender-reassignment is anyone who proposes to, starts, is going through or who has completed a process to change his or her gender with or without going through any medical procedures. Sometimes referred to as Trans or Transgender	Positive – the procedure is to be used by all staff.	None Required	
6.4 People who are married or who have a civil partner.	Positive – the procedure is to be used by all staff.	None Required	

How will the strategy, policy, plan, procedure and/or service impact on:-	Potential positive and/or negative impacts (unintended consequences) Opportunities or gaps	Action taken by Directorate. Make reference to where the mitigation is included in the document, as appropriate **This column is to be updated in future reviews**	Recommendations for improvement/ mitigation/ identified gaps or opportunities
6.5 Women who are expecting a baby, who are on a break from work after having a baby, or who are breastfeeding.	Positive – the procedure is to be used by all staff.	None Required	
6.6 People of a different race, nationality, colour, culture or ethnic origin including non-English speakers, gypsies/travellers, migrant workers	Positive – the procedure is to be used by all staff.	None Required	
6.7 People with a religion or belief or with no religion or belief.	Positive – the procedure is to be used by all staff.	None Required	

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The term 'religion' includes a religious or philosophical belief			
6.8 People who are attracted to other people of: • the opposite sex (heterosexual); • the same sex (lesbian or gay); • both sexes (bisexual)	Positive – the procedure is to be used by all staff.	None Required	
6.9 People according to their income related group: Consider people on low income, economically inactive, unemployed/workless, people who are unable to work due to ill-health	Positive – the procedure is to be used by all staff.	None Required	
6.10 People according to where they live:	Positive – the procedure is to be used by all staff.	None Required	

How will the strategy, policy, plan, procedure and/or service impact on:-	Potential positive and/or negative impacts (unintended consequences) Opportunities or gaps	Action taken by Directorate. Make reference to where the mitigation is included in the document, as appropriate **This column is to be updated in future reviews**	Recommendations for improvement/ mitigation/ identified gaps or opportunities
Consider people living in areas known to exhibit poor economic and/or health indicators, people unable to access services and facilities			
6.11 Consider any other groups and risk factors relevant to this strategy, policy, plan, procedure and/or service	Positive – the procedure is to be used by all staff.	None Required	
6.12 Welsh Language			
There are 2 key considerations to be made during the development of a policy, project, programme, service to ensure there are no adverse effects and/or a positive or increased positive effect on: (please note these will continue to be reviewed to ensure Public Health Wales fulfils their duties to comply with one or more standards outlined within the Welsh Language Standards (No 7) Regulations 2018)			
Opportunities for persons to use the Welsh language	Whilst the contents of the procedure do not have a negative impact on persons with a disability, as with all written control	This procedure has been developed with due consideration of the Welsh Language Scheme. This procedure	

How will the strategy, policy, plan, procedure and/or service impact on:-	Potential positive and/or negative impacts (unintended consequences) Opportunities or gaps	Action taken by Directorate. Make reference to where the mitigation is included in the document, as appropriate **This column is to be updated in future reviews**	Recommendations for improvement/ mitigation/ identified gaps or opportunities
	documents there may be a negative impact as existing written control documents are not routinely available in Welsh language. The effects of the policy and procedure under consideration on the Welsh Language will need to be considered on a case by case basis. Specifically: (i) opportunities for persons to use the Welsh language, and (ii) treating the Welsh languages no less favourably than the English language.	may need to be reviewed in the event of Welsh Language Standards being introduced for Public Health Wales.	
Treating the Welsh language no less favourably than the English language	As above	As above	

Part 3 – Health

Questions in this section relate to the impact on the health and wellbeing outcomes of the population **and** specific population groups who could be more impacted than others by a policy/project/proposal.
  The part of the assessment identifies;
  - which specific groups in the population could be impacted more (inequalities)
  - what those potential impacts could be across the wider determinants of health framework?
  - Potential gaps, opportunities to maximise positive H&WB outcomes
  - Recommendations/mitigation to be considered by the decision makers

7. Identification of specific population groups

Use the WHIASU Population Groups checklist as a reference to identify the population groups who could be more impacted than others by a policy/project/proposal. The check list can be found on the PHW Integrated EqHIA guidance pages (requires link to PHW Intranet pages for additional information and resources)

The groups listed have been identified as more susceptible to poorer health and wellbeing outcomes (health inequalities) and therefore it is important to consider them in a HIA assessment. In a HIA, the groups identified, as more sensitive to potential impacts will depend on the characteristics of the local population, the context, and the nature of the proposal itself.

7.1 Groups identified	Rational/explanation

Assessment
Complete the wider determinants framework table below providing rational/evidence where appropriate:

1. Consider how the proposal could impact on the population and specific population groups identified above (positive/negative) for each of the wider determinants (the bullets under each determinant are there as a guide)
2. Record any unintended consequences (negative impacts) and/or gaps identified
3. Record any positive impacts or missed opportunities to maximise positive health and wellbeing outcomes
4. identify and record mitigation/recommendations where appropriate

Please note you may find that not all determinants are relevant to the project/plan however recording N/A is not acceptable a rational or evidence should be explained/referenced

Wider determinant for consideration	Positive impacts or additional opportunities	Unintended consequences or gaps	Population groups affected	Mitigation/recommendations
7.2 Lifestyles • Diet/nutrition/breastfeeding • Physical activity • Use of alcohol, cigarettes, e-cigarettes • Use of substances, non-prescribed drugs, abuse of prescription medication • Social media use • Sexual activity • Risk-taking activity i.e. gambling, addictive behaviour	The procedure is an internal document intended to provide guidance to staff. Therefore, it does not have an impact on the health and wellbeing of the population or addressing inequalities in health.	N/A		
7.3 Social and community influences on health • Adverse childhood experiences • Citizen power and influence • Community cohesion, identity, local pride	As above	As above		

• Community resilience • Domestic violence • Family relationships • Language, cultural and spirituality • Neighbourliness • Social exclusion i.e. homelessness • Parenting and infant attachment • Peer pressure • Racism • Sense of belonging • Social isolation/loneliness • Social capitol/support/networks • Third sector & volunteering				
7.4 Mental Wellbeing • Does this proposal support sense of control? • Does it enable participation in community and economic life? • Does it impact on emotional wellbeing and resilience?	As above	As above		
7.5 Living/ environmental conditions affecting health • Air quality • Attractiveness/access/availability/quality of area, green and blue space, natural space. • Health & safety, community, individual, public/private space • Housing, quality/tenure/indoor environment • Light/noise/odours, pollution • Quality & safety of play areas (formal/informal) • Road safety • Urban/rural built & natural environment • Waste and recycling • Water quality	As above	As above		
7.6 Economic conditions affecting health	As above	As above		

• Unemployment • Income, poverty (incl. food and fuel) • Economic inactivity • Personal and household debt • Type of employment i.e. permanent/temp, full/part time • Workplace conditions i.e. environment culture, H&S				
7.7 Access and quality of services • Careers advice • Education and training • Information technology, internet access, digital services • Leisure services • Medical and health services • Other caring services i.e. social care; Third Sector, youth services, child care • Public amenities i.e. village halls, libraries, community hub • Shops and commercial services Transport including parking, public transport, active travel	As above	As above		
7.8 Macro-economic, environmental and sustainability factors • Biodiversity • Climate change/carbon reduction/flooding/heatwave • Cost of living i.e. food, rent, transport and house prices • Economic development including trade • Government policies i.e. Sustainable Development principle (integration; collaboration; involvement; long term thinking; and prevention) • Gross Domestic Product • Regeneration	As above	As above		

Stage 3
Summary of key findings and actions Please answer question 8.1 following the completion of the EHIA and complete the action plan

Key findings: Impacts/gaps/opportunities	Actions (what is needed and who needs to do) to address the identified mitigation and recommendations	Lead		
The contents of the procedure has no disproportionate impact on the grounds of race, gender, disability, age, sexual orientation, religious belief or Welsh language. The Procedure is applicable to all members of staff equally and is designed to assist Purchasing Cardholders and Finance Division staff in the governance, control and usage of purchasing cards. The Impact Assessment has found that, by introducing the revised policy and procedure, there may be a negative impact on individuals due to: **Persons with a disability as defined in the Equality Act 2010** Whilst the contents of the procedure does not have a negative impact on persons with a disability, as with all written control documents there may be a negative impact due to the format of the control document that is available. Documents are published on the intranet in pdf format.				

Visual impairment – not all accessibility software accepts pdf format and therefore an alternative format may be required. Learning disability - The documents may also not be understood by those who have difficulty deciphering or reading the written word, for example, dyslexia. Therefore further explanation and support may be required. People who communicate using the Welsh language in terms of correspondence, information leaflets, or service plans and design. Existing documents have not been routinely translated into Welsh. The effects of the procedure under consideration on the Welsh Language will need to be considered on a case by case basis. Specifically: (i) opportunities for persons to use the Welsh language, and (ii) treating the Welsh languages no less favourably than the English language.				

Alternatively, if appropriate, please explain the steps taken to consult with and consider the differential impact of the changes on the various protected characteristic groups (part 2) or any specific identified population groups (part 3).