

## Equality & Health Impact Assessment for *Learning and Development Policy*

### Part 1

Please answer all questions:-

1.	For service change, provide the title of the Project Outline Document or Business Case and Reference Number	
2.	Name of Clinical Board / Corporate Directorate and title of lead member of staff, including contact details	<p>People and Organisational Development</p> <p>Kelly McFadyen Learning and Development Manager  <a href="mailto:Kelly.McFadyen@wales.nhs.uk">Kelly.McFadyen@wales.nhs.uk</a></p>
3.	Objectives of strategy/ policy/ plan/ procedure/ service	<p>All staff working within Public Health Wales (including volunteers, temporary staff and those on honorary contracts) are required to demonstrate essential knowledge and skills set out either in law or those which have been mandated either by Welsh Government, the NHS in Wales or by Public Health Wales itself. This policy sets out what that training is, the legislative/regulatory framework it sits in, how to access learning and responsibilities and ensures all staff have a consistent and structured approach to accessing time (with or without funding) for further development activity.</p>
4.	<p>Evidence and background information considered. For example</p> <ul style="list-style-type: none"> <li>• population data</li> </ul>	<p>Staff groups – ESR            UK Core Skills Training Framework            Welsh Language Standards 2018</p>

	<ul style="list-style-type: none"> <li>• staff and service users data, as applicable</li> <li>• needs assessment</li> <li>• engagement and involvement findings</li> <li>• research</li> <li>• good practice guidelines</li> <li>• participant knowledge</li> <li>• list of stakeholders and how stakeholders have engaged in the development stages</li> <li>• comments from those involved in the designing and development stages</li> </ul> <p>Population pyramids are available from Public Health Wales Observatory and the 'Shaping Our Future Wellbeing' Strategy provides an overview of health need.</p>	<p>National Training Framework – Violence Against Women, Domestic Abuse and Sexual Violence (2015) Act          Good Work – A Dementia Learning &amp; Development Framework for Wales</p> <p>Staff data          All-Wales L&amp;D Managers Group input          Staff Survey 2019          Current policies          Staff Networks (Women, Carers, LGBT, Disability, Men, Welsh, REACH)          Work How It Works Best          Our Conversation</p>
5.	<p>Who will be affected by the strategy/ policy/ plan/ procedure/ service</p> <p>Consider staff as well as the population that the project/change may affect to different degrees.</p>	<p>All staff, including volunteers, temporary staff and those on honorary contracts</p>

## 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'.

<b>How will the strategy, policy, plan, procedure and/or service impact on:-</b>	<b>Potential positive and/or negative impacts (unintended consequences) Opportunities or gaps</b>	<b>Action taken by Directorate.</b> Make reference to where the mitigation is included in the document, as appropriate <b>This column is to be updated in future reviews</b>	<b>Recommendations for improvement/ mitigation/ identified gaps or opportunities</b>
<b>6.1 Age</b> For most purposes, the main categories are: <ul style="list-style-type: none"> <li>• under 18;</li> <li>• between 18 and 65; and</li> <li>• over 65</li> </ul>	There should be no positive or negative impact on any specific age groups as the policy will be applied consistently to all staff and each case reviewed and assessed on its own merit. Trade Union partners raised a concern that colleagues nearing retirement who access funded learning may be put off from	The policy (pre-approval) will be amended to reflect the need for Assistant Director of Organisational Development and Assistant Director of Finance input prior to pursuing recovery.  However, all managers should consider the relevance of and how essential learning is for an individual or group to	

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	applying (and as a result become de-skilled) or may be more likely to be affected by monies being recovered if they retire within a given timescales.	be able to carry out their responsibilities and balance the organisation's ability to receive a return on investment.	
<b>6.2 Persons with a disability as defined in the Equality Act 2010</b> Those with physical impairments, learning disability, sensory loss or impairment, mental health conditions, long-term medical conditions such as diabetes	Persons with learning disabilities may be affected and anyone using assistive technology for sight and/or hearing loss Persons on long-term sickness may be 'out of compliance' in reporting  Managers should give fair consideration to any additional time or funding needed to participate in	Where identified, the technology should be tested at national level. Subject matter experts exist in the organisation and can run 121 coaching sessions if e-learning is unsuitable – if other delivery methods exist (such as workbook or classroom), they can be deployed Exception	

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	<p>(including travel to and from) any learning event.</p> <p>5.9% of staff in Public Health Wales have disclosed a disability (the number of those with agreed flexible full time working patterns is unknown)</p>	<p>reporting in the directorate</p> <p>Reasonable or tailored adjustments should be considered by the manager (with support from the People and Organisational Development team where needed) in line with normal practise. Individuals should not unreasonably be refused time off or financial support for learning on the basis of a reasonable adjustment being required. Managers should consider accessible learning</p>	

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		options when discussing development with all staff. Whilst not responsible for offerings outside of the organisation, learning events run within PHW should, as far as is practicable, take into account varying working patterns.	
<b>6.3 People of different genders:</b> Consider men, women, people undergoing gender reassignment  <b>NB</b> Gender-reassignment is anyone who proposes to, starts, is going through or who has completed a process to change his or	However, 91% of part time staff in Public Health Wales are female which may make access to courses and learning more challenging than for full time staff.  There should be no positive or negative impact on any gender or person	Managers should consider accessible learning options when discussing development with all staff. Whilst not responsible for offerings outside of the organisation, learning events run within PHW should, as far as is	

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her gender with or without going through any medical procedures. Sometimes referred to as Trans or Transgender	undergoing gender reassignment.	practicable, take into account varying working patterns.	
<b>6.4 People who are married or who have a civil partner.</b>	There should be no positive or negative impact on anyone who is married or has a civil partner.		
<b>6.5 Women who are expecting a baby, who are on a break from work after having a baby, or who are breastfeeding.</b>	Women on maternity leave may be 'out of compliance' on statutory courses for the duration of their leave.  Colleagues currently on maternity or other parental leave may not be aware of courses/development opportunities that may require registration during their leave period and/or	Individuals should be compliant at all times and steps can be taken to ensure training due during a period of leave is completed before it starts. Individuals may also opt to use KIT days to complete/attend training and/or managers can provide exception reporting.	

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	could be accessed using KIT days.	Managers within PHW should ensure all staff on maternity/other parental leave receive notification of relevant courses in line with agreed development plans and broader communication agreements.	
<b>6.6 People of a different race, nationality, colour, culture or ethnic origin including non-English speakers, gypsies/travellers, migrant workers</b>	<p>There should be no positive or negative impact on anyone on the basis of nationality, race, colour, culture or ethnic origin.</p> <p>Non-English speakers will be unable to access the e-learning and alternative methods will be sought, however Public Health</p>	<p>All posts within Public Health Wales and hosted organisations require English speakers (or bilingual English/Welsh speakers). The OD and Engagement team will monitor the demand for and provision of training in the medium of Welsh.</p>	



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	Wales are committed to offering opportunities to complete health and safety related training in Welsh where reasonable and practicable to do so.		
<b>6.7 People with a religion or belief or with no religion or belief.</b> The term 'religion' includes a religious or philosophical belief	There should be no positive or negative impact on anyone on the basis of religious belief/no religious belief.  Colleagues observing Ramadan may wish to defer learning/development activities until after the fasting period if this suits their requirements.	Managers and the wider organisation should not unreasonably refuse the deferral of learning neither should anyone deferring learning experience any detriment e.g. during appraisals or interviews/assessments.	

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<b>6.8 People who are attracted to other people of:</b> <ul style="list-style-type: none"> <li>• the opposite sex (heterosexual);</li> <li>• the same sex (lesbian or gay);</li> <li>• both sexes (bisexual)</li> </ul>	There should be no positive or negative impact on anyone on the basis of sexual attraction.		
<b>6.9 People according to their income related group:</b> Consider people on low income, economically inactive, unemployed/workless, people who are unable to work due to ill-health	There should be no positive or negative impact on anyone in any income related group. Questions have been raised over the ability of lower-income colleagues being able to pay back funding should they leave the organisation. However, assumptions about disposable income/ability to pay costs should not be made based on salary alone	Cases for recovery of costs will be handled on an individual basis and approved by both the Assistant Director of OD and the Assistant Director of Finance. There is currently no process or system to support the analysis or reporting of learning and development requests by band/salary group.	

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<b>6.10 People according to where they live:</b> Consider people living in areas known to exhibit poor economic and/or health indicators, people unable to access services and facilities	<p>There should be no positive or negative impact on anyone according to where they live. As much as is possible, courses arranged/commissioned corporately are delivered virtually or run in various locations across Wales.</p> <p>Some colleagues may require additional time off for travel and this shouldn't lead to applications being refused. The vast majority of corporately-run courses take place virtually or in PHW sites.</p>		

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<b>6.11 Consider any other groups and risk factors relevant to this strategy, policy, plan, procedure and/or service</b>	None.		
<b>6.12 Welsh Language</b>			
<b>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:</b> (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)			
<b>Opportunities for persons to use the Welsh language</b>	Welsh speakers will be given the opportunity to access health and safety related training in Welsh where reasonable and practicable to do so.  The policy, guidance and toolkits are available in English only.	Ongoing monitoring of the demand for and provision of training in Welsh.  Update the policy with any further	

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		guidance/direction as set out by the Welsh Language Commissioner.  Produce policy and associated documents into Welsh in line with organisational plans.	
<b>Treating the Welsh language no less favourably than the English language</b>	<p>Welsh speakers will be given the opportunity to access health and safety related training in Welsh where reasonable and practicable to do so.</p> <p>The policy, guidance and toolkits are available in English only.</p>	<p>Ongoing monitoring of the demand for and provision of training in Welsh.</p> <p>Update the policy with any further guidance/direction as set out by the Welsh Language Commissioner.</p> <p>Produce policy and associated documents</p>	

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		into Welsh in line with organisational plans.	

### 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
None.	N/A

**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
<b>7.2 Lifestyles</b> <ul style="list-style-type: none"> <li>• Diet/nutrition/breastfeeding</li> <li>• Physical activity</li> <li>• Use of alcohol, cigarettes, e-cigarettes</li> <li>• Use of substances, non-prescribed drugs, abuse of prescription medication</li> <li>• Social media use</li> <li>• Sexual activity</li> <li>• Risk-taking activity i.e. gambling, addictive behaviour</li> </ul>	There should be no positive or negative impact on anyone experiencing health inequalities.			

<p><b>7.3 Social and community influences on health</b></p> <ul style="list-style-type: none"> <li>• Adverse childhood experiences</li> <li>• Citizen power and influence</li> <li>• Community cohesion, identity, local pride</li> <li>• Community resilience</li> <li>• Domestic violence</li> <li>• Family relationships</li> <li>• Language, cultural and spirituality</li> <li>• Neighbourliness</li> <li>• Social exclusion i.e. homelessness</li> <li>• Parenting and infant attachment</li> <li>• Peer pressure</li> <li>• Racism</li> <li>• Sense of belonging</li> <li>• Social isolation/loneliness</li> <li>• Social capital/support/networks</li> <li>• Third sector &amp; volunteering</li> </ul>	<p>The requirement to complete statutory and mandatory should not impact on an individual's ability to improve/maintain a healthy lifestyle – some topics will encourage health improvement (e.g. manual handling)</p> <p>There should be no positive or negative impact on anyone in terms of their employment status.</p>			
<p><b>7.4 Mental Wellbeing</b></p> <ul style="list-style-type: none"> <li>• Does this proposal support sense of control?</li> <li>• Does it enable participation in community and economic life?</li> <li>• Does it impact on emotional wellbeing and resilience?</li> </ul>	<p>There should be no positive or negative impact on anyone in terms of their wellbeing.</p>			
<p><b>7.5 Living/ environmental conditions affecting health</b></p> <ul style="list-style-type: none"> <li>• Air quality</li> </ul>	<p>There should be no positive or negative impact on anyone in</p>			



<ul style="list-style-type: none"> <li>• Attractiveness/access/availability/quality of area, green and blue space, natural space.</li> <li>• Health &amp; safety, community, individual, public/private space</li> <li>• Housing, quality/tenure/indoor environment</li> <li>• Light/noise/odours, pollution</li> <li>• Quality &amp; safety of play areas (formal/informal)</li> <li>• Road safety</li> <li>• Urban/rural built &amp; natural environment</li> <li>• Waste and recycling</li> <li>• Water quality</li> </ul>	<p>terms of their living/ environmental conditions affecting health.</p>			
<p><b>7.6 Economic conditions affecting health</b></p> <ul style="list-style-type: none"> <li>• Unemployment</li> <li>• Income, poverty (incl. food and fuel)</li> <li>• Economic inactivity</li> <li>• Personal and household debt</li> <li>• Type of employment i.e. permanent/temp, full/part time</li> <li>• Workplace conditions i.e. environment culture, H&amp;S</li> </ul>	<p>There should be no positive or negative impact on anyone in terms of their economic conditions effecting health.</p>			
<p><b>7.7 Access and quality of services</b></p> <ul style="list-style-type: none"> <li>• Careers advice</li> <li>• Education and training</li> <li>• Information technology, internet access, digital services</li> <li>• Leisure services</li> <li>• Medical and health services</li> <li>• Other caring services i.e. social care; Third Sector, youth services, child care</li> <li>• Public amenities i.e. village halls, libraries, community hub</li> <li>• Shops and commercial services</li> <li>• Transport including parking, public transport, active travel</li> </ul>	<p>There should be no positive or negative impact on anyone in terms of their access to services and quality of services accessed.</p>			

<p><b>7.8 Macro-economic, environmental and sustainability factors</b></p> <ul style="list-style-type: none"> <li>• Biodiversity</li> <li>• Climate change/carbon reduction/flooding/heatwave</li> <li>• Cost of living i.e. food, rent, transport and house prices</li> <li>• Economic development including trade</li> <li>• Government policies i.e. Sustainable Development principle (integration; collaboration; involvement; long term thinking; and prevention)</li> <li>• Gross Domestic Product</li> <li>• Regeneration</li> </ul>	<p>There should be no positive or negative impact on anyone in terms of macro-economic, environmental and sustainability factors.</p>			
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**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		

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**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).**