Equality & Health Impact Assessment for

My Contribution Policy (v2.3)

| 1. | For service change, provide the title of the Project Outline Document or Business Case and Reference Number | |
|----|--|--|
| 2. | Name of Corporate Directorate and title of lead member of staff, including contact details | People and Organisational Development Lisa Whiteman – Organisational Development Manager 02920 104255 |
| 3. | Objectives of strategy/ policy/ plan/ procedure/ service | All non-medical and non-dental staff working in Public Health Wales have a consistent and structured approach to performance management and appraisals, linking their role directly to team, business and organisational plans and strategy. |
| 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 list of stakeholders and how stakeholders have engaged in the development stages comments from those involved in the designing and development stages | Staff groups – ESR UK Core Skills Training Framework |

| | Population pyramids are available from Public Health Wales Observatory and the 'Shaping Our Future Wellbeing' Strategy provides an overview of health need. | |
|----|--|--|
| 5. | Who will be affected by the strategy/ policy/ plan/ procedure/ service | All non-medical/dental staff other than those who manage non-medical/dental staff. |

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'. Specific alignment with the 7 goals of the Well-being of Future Generations (Wales) Act 2015 is included against the relevant sections.

| How will the strategy, policy, plan, procedure and/or service impact on:- | Potential positive and/or negative impacts | Recommendations for improvement/ mitigation | Action taken by Clinical Board / Corporate Directorate. Make reference to where the mitigation is included in the document, as appropriate |
|--|--|---|---|
| 6.1 Age For most purposes, the main categories are: • under 18; • between 18 and 65; and • over 65 | There should be no positive or negative impact on any specific age groups | | |
| 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, longterm medical conditions such as diabetes | There should be no positive or negative impact on any colleague with a disability – adjustments should and would be made as recommended within any assessment. | | |
| 6.3 People of different genders: Consider men, women, people undergoing gender reassignment | There should be no positive or negative impact on any gender or | | |

| How will the strategy, policy, | Potential positive and/or negative | Recommendations for | Action taken by Clinical Board / |
|---|-------------------------------------|-------------------------|----------------------------------|
| plan, procedure and/or service | impacts | improvement/ mitigation | Corporate Directorate. |
| impact on:- | | | Make reference to where the |
| | | | mitigation is included in the |
| | | | document, as appropriate |
| NB Gender-reassignment is | person undergoing gender | | |
| anyone who proposes to, starts, | reassignment | | |
| 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 | | | |
| | | | |
| 6.4 People who are married or | There should be no positive or | | |
| who have a civil partner. | negative impact on anyone who is | | |
| | married or has a civil partner | | |
| 6.5 Women who are expecting a | | | |
| baby, who are on a break from | There should be no positive or | | |
| work after having a baby, or | negative impact on any woman | | |
| who are breastfeeding. They | who is expecting a baby/on | | |
| are protected for 26 weeks after having a baby whether or not | maternity leave after having a | | |
| they are on maternity leave. | baby or breastfeeding. | | |
| | | | |
| 6.6 People of a different race, | There should be no positive or | | |
| nationality, colour, culture or | negative impact on anyone on the | | |
| ethnic origin including non- | basis of nationality, race, colour, | | |
| English speakers, | culture or ethnic origin. | | |

| How will the strategy, policy, | Potential positive and/or negative | Recommendations for | Action taken by Clinical Board / |
|---|--|---|--|
| plan, procedure and/or service impact on:- | impacts | improvement/ mitigation | Corporate Directorate. Make reference to where the mitigation is included in the document, as appropriate |
| gypsies/travellers, migrant workers | | | |
| 6.7 People with a religion or belief or with no religion or belief. 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 | | |
| 6.8 People who are attracted to other people of: the opposite sex (heterosexual); the same sex (lesbian or gay); both sexes (bisexual) | There should be no positive or negative impact on anyone on the basis of sexual attraction. | | |
| 6.9 People who communicate using the Welsh language in terms of correspondence, information leaflets, or service plans and design Well-being Goal – A Wales of | The policy, guidance and toolkits are available in English only. Colleagues who wish to conduct their appraisal in Welsh may do so if their manager is also a Welsh | Update the policy with any further guidance/direction as set out by the Welsh Language Commissioner. Produce policy and associated | |
| vibrant culture and thriving Welsh language | speaker. | documents into Welsh in line with organisational plans. | |

| How will the strategy, policy, plan, procedure and/or service impact on:- | Potential positive and/or negative impacts | Recommendations for improvement/ mitigation | Action taken by Clinical Board / Corporate Directorate. Make reference to where the mitigation is included in the document, as appropriate |
|--|---|---|---|
| 6.10 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 | There should be no positive or negative impact on anyone in any income related group | | |
| 6.11 People according to where they live: Consider people living in areas known to exhibit poor economic and/or health indicators, people unable to access services and facilities | There should be no positive or negative impact on anyone according to where they live | | |
| 6.12 Consider any other groups and risk factors relevant to this strategy, policy, plan, procedure and/or service | None | | |

7. HIA / How will the strategy, policy, plan, procedure and/or service impact on the health and well-being of our population and help address inequalities in health?

Questions in this section relate to the impact on the overall health of individual people and on the impact on our population. Specific alignment with the 7 goals of the Well-being of Future Generations (Wales) Act 2015 is included against the relevant sections.

| How will the strategy, policy, plan, procedure and/or service impact on:- | Potential positive and/or negative impacts and any particular groups affected | Recommendations for improvement/ mitigation | Action taken by Clinical Board / Corporate Directorate Make reference to where the mitigation is included in the document, as appropriate |
|--|--|---|---|
| 7.1 People being able to access the service offered: Consider access for those living in areas of deprivation and/or those experiencing health inequalities Well-being Goal - A more equal Wales | There should be no positive or negative impact on anyone experiencing health inequalities | | |
| 7.2 People being able to improve /maintain healthy lifestyles: Consider the impact on healthy lifestyles, including healthy eating, being active, no smoking /smoking cessation, reducing the harm caused by alcohol and /or non-prescribed drugs plus access to services that support disease | A space has been created on the My Contribution form to capture any discussion and actions around an individual's wellbeing or health. | | |

| How will the strategy, policy, plan, procedure and/or service impact on:- | Potential positive and/or negative impacts and any particular groups affected | Recommendations for improvement/ mitigation | Action taken by Clinical Board / Corporate Directorate Make reference to where the mitigation is included in the document, as appropriate |
|--|--|---|---|
| prevention (eg immunisation and vaccination, falls prevention). Also consider impact on access to supportive services including smoking cessation services, weight management services etc Well-being Goal – A healthier Wales | | | |
| 7.3 People in terms of their income and employment status: Consider the impact on the availability and accessibility of work, paid/ unpaid employment, wage levels, job security, working conditions Well-being Goal – A prosperous Wales | There should be no positive or negative impact on anyone in terms of their employment status | | |
| 7.4 People in terms of their use of the physical environment: | There should be no positive or negative impact on anyone in | | |

| How will the strategy, policy, plan, procedure and/or service impact on:- | Potential positive and/or negative impacts and any particular groups affected | Recommendations for improvement/ mitigation | Action taken by Clinical Board / Corporate Directorate Make reference to where the mitigation is included in the document, as appropriate |
|---|--|---|---|
| Consider the impact on the availability and accessibility of transport, healthy food, leisure activities, green spaces; of the design of the built environment on the physical and mental health of patients, staff and visitors; on air quality, exposure to pollutants; safety of neighbourhoods, exposure to crime; road safety and preventing injuries/accidents; quality and safety of play areas and open spaces Well-being Goal – A resilient | terms of their physical environment | | |
| 7.5 People in terms of social and community influences on their health: Consider the impact on family organisation and roles; social support and social networks; neighbourliness and sense of belonging; social isolation; peer | There should be no positive or negative impact on anyone in terms of social and community influences | | |

| How will the strategy, policy, plan, procedure and/or service impact on:- | Potential positive and/or negative impacts and any particular groups affected | Recommendations for improvement/ mitigation | Action taken by Clinical Board / Corporate Directorate Make reference to where the mitigation is included in the document, as appropriate |
|---|---|---|---|
| pressure; community identity; | | | |
| cultural and spiritual ethos | | | |
| Well-being Goal – A Wales of | | | |
| cohesive communities | | | |
| 7.6 People in terms of macro- | There should be no positive or | | |
| economic, environmental and | negative impact on anyone in | | |
| sustainability factors: Consider | terms of any macro economic, | | |
| the impact of government | environmental and sustainability | | |
| policies; gross domestic product; | factors | | |
| economic development; | | | |
| biological diversity; climate | | | |
| Well-being Goal – A globally | | | |
| responsible Wales | | | |

Please answer question 8.1 following the completion of the EHIA and complete the action plan

| 8.1 Please summarise the potential positive and/or | None |
|--|------|
| negative impacts of the strategy, policy, plan or | |
| service | |
| | |
| | |

Action Plan for Mitigation / Improvement and Implementation

| | Action | Lead | Timescale | Action taken by Clinical Board / Corporate Directorate |
|--|--------|------|-----------|--|
| 8.2 What are the key actions identified as a result of completing the EHIA? | None | | | |
| 8.3 Is a more comprehensive Equalities Impact Assessment or Health Impact Assessment required? | No | | | |
| This means thinking about relevance and proportionality to the Equality Act and asking: is the impact significant enough that a more formal and full consultation is required? | | | | |

| | Action | Lead | Timescale | Action taken by Clinical Board / Corporate Directorate |
|--|--------|------|-----------|--|
| 8.4 What are the next steps? | | | | Co. person of the control of the con |
| 8.4 What are the next steps? Some suggestions:- Decide whether the strategy, policy, plan, procedure and/or service proposal: continues unchanged as there are no significant negative impacts adjusts to account for the negative impacts continues despite potential for adverse impact or missed opportunities to advance equality (set out the justifications for doing so) stops. Have your strategy, policy, plan, procedure and/or | | | | Corporate Directorate |
| service proposal approved Publish your report of this impact assessment Monitor and review | | | | |