

NHS Forth Valley Equality Impact Assessment (EQIA)

Please complete electronically and answer all questions unless instructed otherwise. Once complete please email to FV.EQIA@nhs.scot and we will be in touch shortly.

Section A – What’s being assessed?

1. Title of EQIA being completed i.e., name of policy, project etc.		
NHS Forth Valley Population Health and Care Strategy		
2. What is it? Please select the primary function.		
<input type="checkbox"/> Guidance	<input type="checkbox"/> Policy	<input type="checkbox"/> Project
<input type="checkbox"/> Protocol	<input type="checkbox"/> Service Change	<input checked="" type="checkbox"/> Strategy
<input type="checkbox"/> Other, please detail below...		
3. What is the purpose or objective(s) of the proposed work? Tell us about the main aim(s) of the work and the intended outcome(s).		
<p>Background and Purpose</p> <p>NHS Forth Valley is committed to improving the health and wellbeing of our population. This Strategy outlines our vision, aims and ambitions. Our vision is to become a population health organisation - helping people live longer, healthier lives, reducing inequalities, and delivering high-quality, sustainable services within available resources. It is important to note that the development of our strategy will be informed by our Equality & Inclusion Strategic Framework (2025-2029), with the aim to ensure that delivery of our strategy will positively contribute to the delivery of our Equality Outcome Aims over this period. As this Strategy is a ten-year outline, we will endeavour to align with our future Equality and Inclusion Strategic Frameworks throughout the duration.</p> <p>Aims and Objectives</p> <p>Through the development of the strategy, we aim to:</p> <ul style="list-style-type: none"> • Ensure that our high level aims and objectives explicitly include commitments to equality and inclusion, highlighting the importance of addressing health inequalities among different demographic groups. 		

- Express how our aims and objectives in terms of collaboration and transformation efforts will address the needs of marginalised or easy-to-miss groups.
- Ensure stewardship includes appropriate and fair resource distribution.
- Evaluate how these values are upheld in interactions with diverse populations.
- Ensure dignity and respect are maintained across all services.
- Develop the strategy in collaboration with various partners including organisations representing minority and easy-to-miss groups and assess how local and national plans address equality, ensuring lived experience voices and partnership working.
- By adopting a population health approach, we will improve health for the entire population. This will include evaluating how the approach addresses health inequalities and ensuring plans are inclusive of all demographic groups and protected characteristics.
- Through our strategy engagement activity, we will assess the inclusivity of engagement methods and ensure feedback from diverse groups is considered.
- As a population health organisation we will work with various partners and evaluate how partnerships will address health inequalities and ensure diverse representation in decision-making processes.
- Through work to know our population we will consider demographic changes including aging population and health disparities to assess the specific needs of diverse populations and tailor interventions accordingly.
- Our collaborative work with Community Planning Partnerships will focus on addressing population health and inequalities. We will evaluate whether community planning includes diverse voices and ensure the strategy implementation develops to be inclusive of all community members.
- Through our focus on prevention, we will empower people to manage their own health. We will assess how prevention strategies address health inequalities and ensure access to preventative services for all groups.
- The Strategy will emphasise a community first approach through local services to deliver better health outcomes, reduce inequalities and improve cost-effectiveness.
- This work will involve evaluating how local services address the needs of marginalized groups and ensure equitable access to community-based care.

- We will work with local communities to better understand the reasons why some people do not use certain healthcare services and take action to remove any barriers, making care more inclusive and accessible for all.
- With Value Based Health Care Principles at the heart of the Strategy to prevent ill health, tackle inequalities and achieve best outcomes, we will assess how this approach will address health disparities and ensure equitable resource allocation.

Measurement of Intended Outcomes

Measuring the success of the strategy will involve using Performance Targets to monitor achievements and measure impact. Evaluating how performance targets include measures of equality will ensure success metrics reflect improvements in health equity.

The Population Health and Care Strategy outlines our vision, aims and ambitions for NHS Forth Valley for the next 10 years. It will be supported by detailed implementation plans and annual delivery plans, with regular monitoring and updates to ensure we remain responsive to local and national priorities. As we move forward, we will continue to engage with service users, communities, staff and partners on key service developments and changes. We will regularly monitor progress and adjust these implementation plans to meet changing needs.

As we move from vision to delivery, we will continue to review and assess how our actions support fairer outcomes, especially for the most vulnerable individuals in our communities and those most affected by health inequalities. We will continue to involve and engage our diverse communities, working closely with a wide range of partners to help ensure that services are more accessible and equitable for everyone to use. Individual EQIAs will also be carried out on specific plans to support and inform decision-making, identify potential gaps, influence how resources are allocated and ensure equality and fairness is embedded into service design from the outset.

4. Who will be affected by the proposed work? Please select all that apply.

<input checked="" type="checkbox"/> Colleagues	<input checked="" type="checkbox"/> Patients / Service Users	<input checked="" type="checkbox"/> Family, Friends, Carers
<input checked="" type="checkbox"/> External Stakeholders	<input checked="" type="checkbox"/> Students	<input checked="" type="checkbox"/> Organisation
<input type="checkbox"/> Other, please specify below...		

5. What is the scope of the proposed work?		
<input checked="" type="checkbox"/> NHS Forth Valley/Health and Social Care Partnership Wide	<input checked="" type="checkbox"/> Service / Team Specific	<input checked="" type="checkbox"/> Discipline / Role Specific
<input type="checkbox"/> Other, please specify below... Strategy for future direction for all services – NHS Forth Valley and 2 Health and Social Care Partnerships (in addition to continuing to work closely with our Integrated Joint Board colleagues and relevant third-sector and community stakeholders).		

Section B – how have you involved people?

1. Tell us about how you involved people in the development of your proposed work?
<p>A Strategy Steering Group was formed to lead the development of the Strategy and support engagement with staff, partners and other stakeholders. The group included senior leaders such as the Medical Director, Director of Public Health, Acting Director of Strategic Planning and Performance, Child Health Commissioner, and Head of Communications. Staff-side representatives also took part, along with colleagues from both Health and Social Care Partnerships (H&SCPs), Primary Care, Human Resources, the Quality Team, and the Corporate Governance Team.</p> <p>A comprehensive engagement plan was prepared, with further engagement planned for a 6 week period during May and June 2025, which built on previous engagement processes. This included patients, people in local communities (including hard to reach groups), staff, advisory groups, professional groups, community planning partners, third sector via 3rd sector interface organisations and carers. A variety of engagement methods were used to obtain feedback from the people who live and work in Forth Valley, ensuring engagement methods are inclusive to reflect feedback from diverse groups to inform the final strategy.</p> <p>Our approach to engagement on the Strategy is informed by the NHS Forth Valley Participation & Engagement Framework 2025-2028 which was approved by the Board in March 2025.</p> <p>A Task and Finish Group was established to support the development of the strategy and the engagement plan. This included a selection of Executive Members and Non-Executive Members of the NHS Board, the Acting Director of Strategic Planning and Performance, and the Head of Planning.</p>

All draft strategy documents and engagement plans have been and will continue to be discussed by the Strategic Planning Performance and Resources Committee (SSPRC). All documents and engagement plans have been and will continue to be approved by the NHS Board.

2. Provide a summary of your findings.

Background – Initial Research and Evidence Gathering

We undertook a period of initial research to help us review the information we already held or could access in order to help build a better picture of our local population and their health and care needs. We conducted extensive review of population and organisation data, including exploring current strategic workstreams to ensure our Strategy aligned with existing organisation aims and objectives. A summary of this can be found below:

Assessment of Population Needs

Scottish Burden of Disease (SBOD) Forecasting Briefing: NHS Forth Valley reviewed the Scottish Burden of Disease (SBOD) Forecasting Briefing (November 2022) to understand how demographic changes over the next 20 years may affect Scotland's disease burden. Although the analysis was at a national level, its insights on trends, assumptions, and drivers were relevant locally. The review highlighted two key points:

- Preventative measures and early interventions are crucial to avoid the projected rise in disease burden.
- Health inequalities are expected to widen unless proactive mitigations are implemented.



sbod-forecasting-b
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Forth Valley Population Health Strategic Needs Assessment: NHS Forth Valley conducted a strategic needs assessment (December 2024), focusing on: forecasted disease burden - by condition, age group, and local authority; health inequalities - particularly those driven by socioeconomic factors and rising extreme poverty; and population projections to 2043 - highlighting the impact of an ageing population.

The assessment emphasised the implications for: service planning; care provision; workforce requirements; targeting deprivation; and preventative, upstream interventions. The recommendations for NHS Forth Valley were:

- Adopt a population health approach integrating prevention, cross-sector collaboration, and data-driven planning.
- Prioritise resources for areas with the greatest health inequalities and highest projected disease burden.



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Healthcare Strategy.

Equality and Inclusion Strategic Framework 2025-2028

Our Equality and Inclusion Strategic Framework (2025-2029) outlines our approach to working collaboratively with people, staff and partners to build a more inclusive NHS Forth Valley. It reflects our dedication to creating an organisation where everyone feels respected, safe, and supported. By listening to those we serve and work alongside, we can better understand and address their diverse needs and drive meaningful change. We are taking deliberate steps to address inequalities and promote an inclusive environment across all levels of our organisation, breaking down barriers and ensuring that every voice is heard and valued.

Participation and Engagement Strategic Framework 2025-2028

In 2025 we published a Participation and Engagement Strategic Framework. This confirms the commitment to listen to and work with staff, primary care colleagues, carers, partner organisations including the third sector, and local communities to improve the way local health services are designed and delivered.

Effective engagement and participation are important to help identify potential issues and areas for improvement. We also know that by working together we can address some of the challenges we face, achieve better outcomes and improve the experience of people who use our services. This Strategic Framework outlines our approach to engagement based on national standards for community engagement as well relevant legislative requirements to help ensure best practice.

Phase 1 – Initial Engagement Process (April 2022- April 2025)

Over the past three years, NHS Forth Valley and the two local Health and Social Care Partnerships (Falkirk and Clackmannanshire and Stirling) have engaged widely with communities, staff, and partners to understand what matters most to people when using health services and what is important to help improve people's own health and wellbeing. This work was also informed by national engagement led by the Scottish Government.

Strategy Engagement Plan (April 2025): This was developed to outline the communication actions required to support the launch and dissemination of the new Population Health and Care Strategy across Forth Valley, including our staff our partners and local communities. This included internal groups and external stakeholders, service users, carers, public and media. A wide range of channels and formats were used in the engagement plan to ensure broad and inclusive outreach.

Phase 2 – Additional Engagement Process (1 May 2025 to 15 June 2025)

In May and June 2025, we shared the draft Forth Valley Population Health and Care Strategy with people across Forth Valley and gathered detailed feedback. This included:

- Patient and staff surveys.
- Awareness and engagement events.
- Feedback from care opinion and complaints.
- Meetings and workshops.

The questionnaire included the following questions:

- Does the draft Population Health and Care Strategy for Forth Valley address what is most important to you? If it does not, please tell us why.
- How can you help to deliver the priorities and ambitions set out the Strategy? Please give us your suggestions.
- Is there anything else that you think would help improve the health and wellbeing of local people?
- Is there anything else you would like to tell us before we finalise our Health and Care Strategy?

All responses were reviewed and carefully considered to help inform the development of the final Strategy. Feedback reinforced earlier themes, highlighting the importance of ill health prevention, timely access to services, clear communication, patient-centred care, strong partnerships and well co-ordinated services.

A number of themes emerged from the engagement. These main themes included:

- **Taking a population health approach and focussing on prevention:** there was strong support for a population health approach focused on prevention, early intervention, and reducing health inequalities. Key themes included understanding local health needs, promoting self-management and encouraging healthy lifestyle choices. Prevention accounted for 24% of all feedback.
- **Strategy document:** 17% of feedback focused on the strategy document itself, highlighting suggestions around format, clarity, use of infographics, level of detail, feasibility, timescales, funding, and service sustainability.
- **Partnership working:** 10% of feedback focused on partnership working, with calls for improved integration, joint working across services and sectors and better coordination of care.
- **Mental Health:** Feedback highlighted the need for reform in mental health services, with emphasis on addressing psychological trauma and supporting neurodiversity.
- **Primary and community care:** The response included strengthening primary and community care, recognising the vital role of GPs and multi-disciplinary teams, promoting prevention and social prescribing and adopting a “home first” approach.
- **Access:** Improving access to services was important, including quicker, easier and more local access to emergency, planned, primary care, and imaging services, leading to faster treatment and better outcomes.
- **Suggested areas for focus:** These included long waiting times, reform of mental health services, infrastructure challenges, opportunities to improve digital systems and specific service-level challenges not covered in this high-level strategy.

- **Communication:** Clearer communication and greater involvement in care decisions, along with improved co-ordination across services were seen as important.
- **Infrastructure:** Feedback included better use of data and digital systems to understand population needs, expand access to digital systems (e.g. online booking), use digital solutions to support self-help and improve system integration. Physical infrastructure concerns such as transport, parking and developing service capacity in line with population growth and increasing demand were also highlighted, along with making use of green spaces.
- **Equality & inclusion:** Key issues included tackling inequalities related to deprivation, child poverty and ensuring services meet the needs of people with protected characteristics.
- **Workforce:** Themes included fostering a positive organisational culture, ensuring workforce sustainability, strengthening primary and community care workforce, supporting health education and prevention, promoting respect for everyone and practicing person-centred care.
- **Person-centred care:** Emphasis was placed on treating people as individuals, with respect and compassion at the heart of care delivery.
- **National issues:** Broader societal challenges were recognised, with calls for national co-ordination, NHS reform and expansion of national screening programmes.

Review of the National Frameworks – national direction of travel for the next 10 years (June 2025)

The SG published two key documents on 17 June 2025:

- Scotland's Population Health Framework 2025-2035
- Health & Social Care Service Renewal Framework 2025-2035

These two key national documents outline future care improvements. These have been reviewed and used to inform the draft Forth Valley Population Health and Care Strategy. Amendments were made to reflect the essential elements from these documents.

3. Did you make any changes to your proposed work as a result of this feedback or evidence?

Updates to the draft Forth Valley Population Health and Care Strategy (July to September 2025)

It is important that the Strategy reflects the expressed needs of people living in Forth Valley. We have listened to the feedback from the engagement and used it to shape our Population Health and Care Strategy for 2025–2035. We summarised the key themes from the feedback and how this was used to shape the draft Strategy (attached). This document shows the changes that were made to the draft Strategy document in response to the feedback and evidence received. This summary document will be published on our website and available on request from our Planning Team. As a population health organisation, we will keep listening and working with local people, staff and partners as we plan and make improvements.



Engagement
Summary Strategy C

Section C – what's the impact of your work?

When looking at the impact of our work on equality groups, the Equality Act 2010 asks us to consider how our work will help to:

- Eliminate unlawful discrimination, harassment and victimisation;
- Advance equality of opportunity between different groups;
- Foster good relations between different groups.

This doesn't need to be complicated. With your work in mind, consider the ways in which it may have a positive, negative or neutral impact on different groups. For example:

- **Positive** – does your work reduce discrimination or stigma, promote participation and involvement, improve access or increase tolerance?
- **Neutral** – does your work have no impact on this specific group
- **Negative** – although it may be unintentional, does your work discriminate against particular groups, add barriers to access or put people at a disadvantage / make their lives worse?

Please refer to NHS FV EQIA Checklist for further support and guidance.

Groups	Positive	Neutral	Negative	Comments
People of different Ages	x			<p>Overview: We know that age can have an impact on an individual's experience of health. Our strategy is expected to have a positive impact on people of all ages by taking a life-course approach, recognising the specific health needs and challenges experienced at different stages of life. Through development of our Equality and Inclusion Strategic Framework, we know from engagement and evidence that different age groups can experience barriers to inclusion and discrimination, and the aims of this Strategy would seek to reduce such experiences through tailored services, preventative programmes and education and awareness. In addition, local engagement and national evidence both highlight that age-related disparities persist, and this Strategy seeks to address them through targeted, inclusive, and equitable health services.</p> <p>Example:</p>

			<p>We acknowledge that within Forth Valley, we have an aging population and this Strategy and associated workstreams will help to address the resulting increase in complex health needs and multiple comorbidities/health issues that our aging population will experience, including frailty, loneliness poor mental health. It will also be mindful of ensuring additional barriers are not introduced, such as digital exclusion, with active input to mitigate against this and increase accessibility to services.</p> <p>It is important to highlight the importance that the Board places on childhood and the known impact this will have on the long-term health and wellbeing of each individual within our population. This is why dedicated strategy focussing on children and young people is being developed.</p>
People with a Disability	x		<p>Overview:</p> <p>We anticipate a positive impact on people with a disability as our Equality and Inclusion Strategy takes into consideration the varying needs and experiences of disabled people. This includes promoting and striving for better access, better understanding and increased awareness. Evidence and engagement highlight the barriers disabled people face, including physical access issues, communication challenges, digital exclusion and lack of consistent adjustments. This strategy commits to embedding inclusive design, addressing systemic barriers, and ensuring that services are person-centred, responsive, and accessible to all.</p> <p>Example:</p> <p>We acknowledge that not just within Forth Valley, but nationally across Scotland, people with disabilities are more likely to suffer from poorer health outcomes and experience higher levels of poverty, unemployment and social isolation. This Strategy and associated workstreams will help to address these inequalities by promoting better awareness of these additional barriers, considering the wider factors of influence such as travel, housing and employment.</p>
Trans and Non-Binary People	x		<p>Overview:</p> <p>We anticipate a positive impact on trans and non-binary people as our Strategy will be informed by our Equality and Inclusion Strategic Framework to</p>

			<p>account for varying needs and experiences of trans and non-binary people. This Strategy supports a more inclusive approach to healthcare by recognising the specific barriers faced by trans and non-binary people, including experiences of discrimination, misgendering, and a lack of culturally competent care. Through inclusive policy, training and practice, it aims to build staff confidence, reduce stigma, and ensure trans and non-binary individuals feel respected, safe and able to access care without fear of prejudice.</p> <p>Example: We acknowledge that not just locally, but nationally, transgender and non-binary individuals report poor experiences with accessing healthcare, such as not feeling heard or understood, and this can result in barriers that prevent essential healthcare. This, coupled with the higher instances of poor mental health and poverty, result in health inequalities that must be addressed. This Strategy and associated workstreams will help to address these inequalities by creating a more inclusive NHS to ensure trans and non-binary individuals feel safe and supported, with respectful and person-centred healthcare interactions.</p>
People who are Pregnant or on Maternity Leave	x		<p>Overview: We anticipate a positive impact on people who are pregnant or on maternity leave as our Strategy will be informed by our Equality and Inclusion Strategic Framework to account for their varying needs and experiences. This will include support for pregnant individuals and new mothers accessing healthcare services in a person-centred way.</p> <p>Example: We acknowledge the importance of maternal health and are committed to reducing inequalities in pregnancy and maternity outcomes, particularly for marginalised groups, as we know pregnancy can increase the likelihood of living in poverty or experiencing abuse. This Strategy and associated workstreams will help to address these inequalities by ensuring a preventative and person-centred approach underpins service delivery, including early intervention and culturally appropriate maternity care. The Strategy also supports equitable access to healthcare, flexible pathways, and workplace policies that consider</p>

				the needs of pregnant individuals and new parents.
People who are Married or in a Civil Partnership	x			<p>Overview: We anticipate a positive impact on people who are married or in a civil partnership as our Strategy will account for their varying needs and experiences, ensuring that relationship status does not result in differential access to services or support. It reflects a rights-based approach to inclusion and commits to fair treatment across family-related healthcare and workplace policies. This includes upholding protections for all couples, regardless of marital or civil partnership status, in line with our Equality and Inclusion Strategic Framework.</p> <p>Example: We acknowledge that marital or civil partnership status can influence a person's experience of health and have cultural significances that must be accounted for. We know that individuals who are divorced, separated or widowed are more likely to experience poverty and socio-economic barriers, as are those from the LGBTQ+ community or adults who are cohabiting. This Strategy and associated workstreams will help to address these inequalities by ensuring a commitment to equal workplace benefits and protections for all marital statuses by ensuring equal treatment particularly in family related healthcare services.</p>
People from different Ethnic Backgrounds	x			<p>Overview: We anticipate a positive impact on people from different ethnic backgrounds as our Strategy will help to tackle the disproportionate health inequalities experienced by some ethnic minority groups and seek to actively reduce these through targeted action. It is informed by our Equality and Inclusion Strategic Framework and aligns with national priorities to embed anti-racist approaches, address systemic barriers, and improve racial equity in both healthcare access and employment.</p> <p>Example: We acknowledge that not just locally, but nationally, people from minority ethnic backgrounds are more likely to experience poor health and more likely to suffer from endocrine or cardiac-related illnesses, many of which can be</p>

			linked to an increased incidence of poverty, cultural and language barriers and discrimination that is more prevalent amongst members of minority ethnic groups. This Strategy and associated workstreams will help to address these inequalities by ensuring the development of our Anti-Racism Plan supports the delivery of these objectives across the organisation and our wider community.
People with Religious or Protected Beliefs	x		<p>Overview: We anticipate a positive impact on people with religious or protected beliefs, accounting for their varying needs and experiences. Our Strategy is informed by our Equality and Inclusion Strategic Framework, which recognises the importance of respecting and accommodating diverse religious beliefs and practices. The Strategy promotes culturally sensitive care and inclusive environments across NHS Forth Valley, ensuring that services are delivered in ways that uphold dignity, recognise spiritual and cultural needs, and support equitable access for people of all faiths and none.</p> <p>Example: We acknowledge that not just locally, but nationally, different faiths may have specific requirements and practices that impact upon experience of health. For example, diet, cultural sensitivities and end-of-life practices can influence the way in which an individual experiences health and engages with healthcare. This Strategy and associated workstreams will direct linkage to relevant supporting policies to assess equity of access to services for those from different religions or faiths and accommodating religious beliefs in healthcare settings, acknowledging and responding to potential discrimination that may contribute to poorer health outcomes.</p>
Men and / or Women	x		<p>Overview: We anticipate a positive impact on men and women as our Strategy will encourage gender equality, allowing everyone's voice to be heard to ensure they feel safe and experience validity of concerns and support. It will also include delivery and evaluation of specialised Women's and Men's Health Services, which recognise the need to address gender-related barriers and support equitable access to healthcare and workplace opportunities.</p>

			<p>Example:</p> <p>We acknowledge that not just locally, but nationally, a person's sex can influence their experience of health. Men are more likely to experience poor mental health and avoidance of accessing essential healthcare, whilst also more likely to have hazardous health behaviours such as drinking and smoking. Women are more likely to experience poorer socio-economic outcomes as a result of employment-related interruptions or barriers such as maternity leave, caring responsibilities and menopause. This Strategy and associated workstreams will seek to address these inequalities through the continued development and evaluation of targeted services, including Women's and Men's Health programmes, to meet diverse health and wellbeing needs.</p>
A person's sexual orientation	x		<p>Overview:</p> <p>We anticipate a positive impact relating to sexual orientation as our Strategy's outcomes will direct actions and workstreams that aim to eliminate discrimination and promote LGBTQ+ inclusion in patient care and the workplace, with training support to achieve these aims, recognising the varying needs and experiences of different sexual orientations. This Strategy will support targeted training and foster safe, welcoming environments for patients and staff of all sexual orientations.</p> <p>Example:</p> <p>We acknowledge that not just locally, but nationally, members of the LGBTQ+ community are more likely to experience poor mental health, be subjected to discrimination, and/or to live in poverty. This Strategy and associated workstreams will seek to address the subsequent impact on health by ensuring a focus on reducing health inequalities, and improving access to inclusive, respectful, and non-discriminatory services.</p>
People who work with us	x		<p>Overview:</p> <p>We anticipate a positive impact on our workforce as our Strategy will reflect the diverse needs and experiences of our staff. Inclusive workplaces ensure staff feel valued, supported, and empowered to progress in their careers. The development of our culture is a key enabler of our strategy creating the conditions for staff to fully</p>

			<p>engage in our strategic ambitions. It will promote fairness in career development, strengthen leadership accountability, and prioritise workforce wellbeing.</p> <p>Example: We acknowledge that many of our workforce also make up our local community and will have varying experiences of health and wellness, that may be further impacted by the protected characteristic group(s) they belong to. This Strategy and associated workstreams will seek to recognise the health inequalities of our workforce, providing training in key areas such as cultural competence, neurodiversity and anti-racism—all shaped by lived experience—that underpin efforts to build equity and confidence across our organisation.</p>
People who are Carers or Care Experienced	x		<p>Overview: We anticipate a positive impact on people who are Carers or Care Experienced as our Strategy recognises the disproportionate challenges they may face in accessing health, education, employment and support services. Guided by our Equality and Inclusion Strategic Framework, we will work to ensure more equitable access to services, promote trauma-informed approaches, and embed flexibility to accommodate caring responsibilities.</p> <p>Example: We know Carers and Care Experienced individuals are more likely to experience poor mental health and face additional access barriers when trying to support their own health and wellbeing. The Strategy supports the delivery of inclusive engagement opportunities, enabling the voices of Carers and Care Experienced individuals to shape policy and practice and address this inequality.</p>
People who are socio-economically disadvantaged	x		<p>Overview: We anticipate a positive impact on people who are socio-economically disadvantaged as our Strategy explicitly recognises the links between poverty and poor health outcomes. Informed by the Equality and Inclusion Strategic Framework and Fairer Scotland Duty, the Strategy will support targeted actions to reduce barriers to</p>

			<p>access, promote early intervention, and tackle health inequalities experienced by individuals and communities facing financial hardship. We will also consider the cumulative impact of disadvantage and embed inclusive approaches to address these.</p> <p>Example: Furthermore, we know the additional socio-economic factors that influence health throughout an individual's life-course, including a higher likelihood of mental health-related hospital admissions for those living in more deprived areas locally or experiencing poverty, and will take steps throughout the duration of this Strategy and beyond, to address these inequalities.</p>
People living in poverty	x		<p>Overview: We anticipate a positive impact on people living in poverty as our Strategy aims to reduce health inequalities and remove structural barriers that prevent equitable access to services.</p> <p>Example: We acknowledge that people living in poverty have poorer health outcomes for a number of factors. Informed by national data and local engagement, the Strategy will support targeted approaches to improve outcomes for people experiencing poverty, including enhanced access to preventative care, social support, and community-led initiatives that address the wider determinants of health.</p>
Other, please state... (i.e. Homeless or no fixed abode individuals, Veterans etc.)	x		<p>We anticipate a positive impact on people who may experience marginalisation due to housing instability, veteran status, or other intersecting factors. Our Strategy will seek to embed inclusive, trauma-informed approaches that acknowledge the complex needs of these groups. This includes working in partnership with community services, improving access to healthcare, and recognising the role of safe housing, social connection, and continuity of care in supporting health and wellbeing. Furthermore, we will be operating an ask and act approach as outlined here: ‘Ask and Act’ – advice.scot to help us take preventative signposting and action against homelessness.</p>

Having considered the various groups above, what's the overall difference / impact your work will make?

This assessment provides a high-level overview of how the Population Health and Care Strategy seeks to improve outcomes for all, with a particular focus on reducing health inequalities and addressing barriers faced by marginalised and underrepresented groups. It reflects our commitment to embedding equality, inclusion, and human rights across strategic priorities and acknowledges that this is the beginning of a continuous process.

As the Strategy progresses, additional EQIAs will be undertaken for specific programmes, policies, and service redesigns, ensuring that detailed and meaningful consideration is given at every stage. We recognise that individuals experience multiple, overlapping factors that can shape access and outcomes, and we are committed to taking an intersectional approach—recognising the complexity of people's lives and tailoring our responses accordingly, while also recognising the impact of these intersectional experiences and the need for inclusive data collection.

While aiming for a positive overall impact, we recognise that some workstreams may have neutral or negative effects. These will be assessed individually, with appropriate actions and mitigations put in place. Equality will remain central to our strategic approach over the next ten-years, supported by robust review, monitoring, and governance processes.

Section D – does your work impact children?

The United Nations Convention on the Rights of the Child (UNCRC) is an international human rights treaty that grants all children and young people a comprehensive set of rights. Examples of these rights include the right to health and education, fair and equal treatment, protection from exploitation and the right to a voice in decisions that affect them. In Scotland, as of 2024 we have a duty to consider how our work will impact children and young people. Further information can be found here: <https://www.unicef.org.uk/what-we-do/un-convention-child-rights/>

Having considered the various UNCRC Rights, what's the overall difference / impact your work will make? Thinking about this will help you to complete the table below. It may be that not all of the UNCRC Rights are applicable.

It's important to remember that although not directly affecting, a service or project may have an impact on the life of a child or young person. For example, if it impacts upon a parent or carer. If you still feel your work does not impact children/young people, please move to section E.

Overview. Having considered the information above and the UNCRC Rights, what's the overall difference / impact your work will make?
<p>As part of this Strategy, a Children's Population Health and Care Strategy is being developed and will align to our overarching objectives and strategic vision.</p> <p>Whilst not all workstreams associated with this Strategy will directly impact children, we acknowledge and recognise the importance of considering the wider implications that exist and the need to ensure the best interests of the child are a key aspect of our considerations when designing, developing and delivering services as part of this ten-year Strategy. We must ensure we do not view the child in isolation, but as a part of the wider family unit, which will be impacted by all of our decisions and approaches so it does not negatively impact an adults parental capacity..</p> <p>We would anticipate that the work associated with the Strategy should have a positive impact on helping to further the Rights of the Child, with our children and young people being considered in everything that we do. We do however acknowledge that the EQIAs of individual workstreams may at times illustrate a restriction in a particular Right and on these occasions, it will be our strategic approach to work together both with our Child Health Commissioner, relevant stakeholders and of course, our children and young people, to address this and provide mitigations.</p>

Summary of Findings from UNCRC Rights Analysis:

- The strategic plan strongly supports the best interests of the child, with a vision and guiding principles that prioritise children's wellbeing, safety, and voice.
- The plan furthers rights to health, education, family guidance, and participation by focusing on early intervention, family-centred support, and involving children and young people in service design.
- Some restrictions may arise due to resource limitations, service gaps, or barriers to access, particularly for children with disabilities, those in poverty, or with complex needs.
- The plan recognises the importance of not viewing the child in isolation, but as part of the wider family and community, and aims to address inequalities and ensure fairness for all groups.
- Ongoing engagement, monitoring, and collaboration with children, families, and stakeholders will be essential to maximise positive impacts and address any potential restrictions on rights as the strategy is implemented.

UNCRC Right	How might your work further this right?	How might your work restrict this right?	Are there any particular groups impacted? i.e. children with disabilities
Best interests of the child	The strategic plan places children's best interests at the centre through inclusive systems and early support.	Limited resources or disjointed services may prevent full realisation of this right.	Children with disabilities, complex needs, or in poverty.
Making rights real	The plan promotes active involvement of children and families in shaping services.	Tokenistic engagement or inaccessible formats may hinder realisation.	Children in care, with communication needs, or from minority backgrounds.
Family guidance as children develop	Family-centred approaches and digital empowerment support parental guidance.	Inconsistent or culturally insensitive support may limit effectiveness.	Families with language barriers or low digital literacy.
Life, survival and development	Early intervention and health support promote	Long waiting times or gaps in services may restrict access.	Premature babies, children with chronic

	survival and development.		conditions, and those in deprivation.
Name and nationality	The strategic plan supports this right through inclusive and preventative approaches for all people resident in Forth Valley irrespective of place of birth or personal circumstances.	Challenges like funding and infrastructure may limit full realisation.	Children with complex health and social needs or facing systemic barriers.
Identity	The strategic plan supports this right through inclusive and preventative approaches, recognising the individual person and their healthcare needs.	Challenges like funding and infrastructure may limit full realisation.	Children with complex health and social needs or facing systemic barriers.
Keeping families together	The strategic plan supports this right through inclusive and preventative approaches in accordance with The Promise Scotland.	Challenges in partnership funding and infrastructure may limit full realisation.	Children with complex needs or facing systemic barriers.
Contact with parents across countries	The strategic plan supports this right through inclusive and preventative approaches.	Challenges in confirming who has parental rights for a child	Children with complex needs or facing systemic barriers.
Protection from kidnapping	The strategic plan supports this right through inclusive and preventative approaches.	Challenges like funding and infrastructure may limit full realisation.	Children with complex needs or facing systemic barriers.
Respect for children's views	The strategic plan supports this right through the adoption of engagement processes based on the Lundy Model of child participation.	Challenges like funding and infrastructure may limit full realisation.	Children with complex needs or facing systemic barriers.
Sharing thoughts freely	The strategic plan supports this right through the adoption of engagement processes based on the Lundy Model of child participation.	Challenges like funding and infrastructure may limit full realisation.	Children with complex needs or facing systemic barriers.

Freedom of thought and religion	The strategic plan supports this right through the promotion of cultural competence and culturally safe practice by NHS Forth Valley's workforces	Challenges like funding and infrastructure may limit full realisation.	Children with complex needs or facing systemic barriers.
Freedom of association and peaceful assembly	The strategic plan supports this right through inclusive and preventative approaches.	Challenges like funding and infrastructure may limit full realisation.	Children with complex needs or facing systemic barriers.
Protection of privacy	The strategic plan supports this right through inclusive and preventative approaches in accordance with GDPR (202.	Challenges like funding and infrastructure may limit full realisation.	Children with complex needs or facing systemic barriers.
Access to information	The strategic plan supports this right through the adoption of age appropriate inclusive practice..	Challenges like funding and infrastructure may limit full realisation in a developmentally appropriate manner.	Children with complex needs or facing systemic barriers.
Responsibility of parents	The strategic plan supports this right through inclusive and preventative approaches.	Challenges like funding and infrastructure may limit full realisation e.g. an inability to identify who has legal parental responsibility for a child.	Children with complex needs or facing systemic barriers.
Protection from violence	Creating safe homes, schools, and communities is a guiding principle with an educated workforce preventing and responding to child need.	If trauma-informed care is not fully implemented, children may remain vulnerable.	Children exposed to domestic violence or neglect.
Children without families	The strategic plan supports this right through working in partnership with local authorities to ensure inclusive and preventative approaches.	Challenges like funding and infrastructure may limit full realisation.	Children with complex needs or facing systemic barriers.

Children who are adopted	The strategic plan will operate in the context of The Promise Scotland and NHS Forth Valley's corporate parenting plan which supports this right through inclusive and preventative approaches.	Challenges like funding and infrastructure may limit full realisation.	Children with complex needs or facing systemic barriers.
Refugee children	The strategic plan supports this right through inclusive and preventative approaches as, irrespective of a child's background or situation, prevention and responsive healthcare provision will be available to children with both asylum and refugee status who live in Forth Valley.	Challenges like funding and infrastructure may limit full realisation.	Children with complex needs or facing systemic barriers.
Disabled children	The strategic plan supports this right through inclusive and preventative approaches.	Challenges like funding and infrastructure may limit full realisation.	Children with complex needs or facing systemic barriers.
Enjoyment of the highest attainable standard of health	Goals include improving mental and physical health by promoting timely contact when healthcare support is necessary and reducing unnecessary contact when it is not..	Health inequalities or inaccessible services or ones with long waiting times may limit outcomes.	Disabled children, those with long-term conditions, and from deprived areas.
Review of a child's placement	The strategic plan supports this right through inclusive and preventative approaches.	Challenges like funding and infrastructure may limit full realisation.	Children with complex needs or facing systemic barriers.
Social and economic help	The strategic plan supports this right through inclusive and preventative approaches to remove barriers to healthcare.	Challenges like funding and infrastructure may limit full realisation.	Children with complex needs or facing systemic barriers.
Food, clothing and safe home	The strategic plan supports this right through inclusive and	Challenges like funding and	Children with complex needs or facing systemic barriers.

	preventative approaches operationalised in partnership with third sector colleagues.	infrastructure may limit full realisation.	
Access to education	The strategic plan is structured to support children from birth, transitioning to adulthood promoting a readiness for learning and overall good health to enable engagement with education.	Reactive systems and lack of coordination may hinder educational progress.	Children with additional support needs or in unstable environments.
Aims of education	The strategic plan is structured to support children from birth, transitioning to adulthood promoting a readiness for learning and overall good health to enable engagement with education.	Reactive systems and lack of coordination may hinder educational progress.	Children with additional support needs or in unstable environments.
Minority culture, language and religion	The strategic plan supports this right through inclusive and preventative approaches to service delivery that will include the use of interpretative services and culturally competent practice	Challenges like funding and infrastructure may limit full realisation.	Children with complex needs or facing systemic barriers.
Rest, play, culture, arts	The strategic plan supports this right through inclusive and preventative approaches which will include the use of nursery nurses, play leaders and play & arts therapists to ensure a child's right to play is observed in community and acute healthcare settings.	Challenges like funding and infrastructure may limit full realisation.	Children with complex needs or facing systemic barriers.
Protection from harmful work	The strategic plan supports this right through inclusive and preventative approaches.	Challenges like funding and infrastructure may limit full realisation.	Children with complex needs or facing systemic barriers.

Protection from harmful drugs	The strategic plan supports this right through inclusive and preventative approaches.	Challenges like funding and infrastructure may limit full realisation.	Children with complex needs or facing systemic barriers.
Protection from sexual abuse	The strategic plan supports this right through inclusive and preventative approaches with the workforce competent in recognising and responding to signs of sexual abuse and exploitation.	Challenges like funding and infrastructure may limit full realisation.	Children with complex needs or facing systemic barriers.
Prevention of sale and trafficking	The strategic plan supports this right through inclusive and preventative approaches with the workforce competent in recognising and responding to signs of sexual abuse and exploitation.	Challenges like funding and infrastructure may limit full realisation.	Children with complex needs or facing systemic barriers.
Protection from exploitation	The strategic plan supports this right through inclusive and preventative approaches with the workforce competent in recognising and responding to signs of sexual abuse and exploitation.	Challenges like funding and infrastructure may limit full realisation.	Children with complex needs or facing systemic barriers.
Children in detention	The strategic plan supports this right through inclusive and preventative approaches.	Challenges like funding and infrastructure may limit full realisation.	Children with complex needs or facing systemic barriers.
Protection in war	The strategic plan supports this right through inclusive and preventative approaches.	Challenges like funding and infrastructure may limit full realisation.	Children with complex needs or facing systemic barriers.
Recovery and reintegration	The strategic plan supports this right through inclusive and preventative approaches.	Challenges like funding and infrastructure may limit full realisation.	Children with complex needs or facing systemic barriers.

Section E – anything else?

Is there anything else you want to share with us?

This can be any further details about your work you think will be helpful, or can be any questions or queries you have in relation to Equality and Inclusion? Is there specific support you need from us?

This high-level Equality Impact Assessment (EQIA) has helped to shape this Strategy to ensure that equality has been considered at every step. Our future plans and actions will be designed to deliver meaningful change, supporting those most affected by inequalities and making our services more inclusive.

In addition, we are committed to meeting relevant legal obligations, including those set out in Fairer Scotland Duty (which considers socioeconomic inequalities), Children and Young People (Scotland) Act (2014) and the United Nations Convention on the Rights of the Child (Incorporation) (Scotland) Act (2024).

This Strategy will be supported by more detailed implementation plans, and as we move from vision to delivery, we will continue to review and assess how our actions support fairer outcomes, especially for the most vulnerable individuals in our communities and those most affected by health inequalities.

We will continue to involve and engage our diverse communities, working closely with a wide range of partners to help ensure that services are more accessible and equitable for everyone to use.

Individual EQIAs will also be carried out on specific plans to support and inform decision-making, identify potential gaps, influence how resources are allocated and ensure equality and fairness is embedded into service design from the outset.

Please complete the following details:

Name:	Rachel Tardito	David Munro	Kerry Mackenzie
Role:	Equality, Diversity and Wellbeing Lead	Senior Planning Manager	Acting Director of Strategic Planning and Performance
Department:	Equality, Inclusion and Wellbeing Service	Strategic Planning & Performance	Corporate Governance
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Signature:			

Date:	18/09/2025	18/09/2025	18/09/2025

Please now save this form and send a copy to FV.EQIA@nhs.scot Someone will then be in touch to provide further guidance and support.

Useful Resources:

- Have you checked your document meets current accessibility requirements? Check the Guide for more information. If still unsure, email FV.equality@nhs.scot and we can support.
- You may find this video helpful: [Scottish Government: EQIA - 'IT'S ALL ABOUT PEOPLE' \(youtube.com\)](#)
- Or this guide: [Fairer Scotland and equality impact assessments | NHS Education](#)

Equality, Inclusion and Wellbeing Service Response and Next Steps:

EQIA received, information sufficient and adequate considerations in place to support implementation. As Strategy is a 10-year outline, we acknowledge that additional EQIAs will be undertaken for associated work as required. No negative or adverse impacts identified therefore more detailed actions and mitigations not needed presently. Review date in place. Filed and returned to author.

EQIA Number: FVEQIA-25/033

Appendix – Action Plan

Equality & Diversity Impact Assessment Action Plan

Name of document being EQIA'd: NHS Forth Valley Population Health and Care Strategy

Date	Issue	Action Required	Lead (Name, title, and contact details)	Timescale	Resource Implications	Comments
	Vision: Develop an inclusive vision for the strategy from key stakeholder feedback	The vision will be developed to include commitments to equality and diversity & inclusion highlighting the importance of addressing health disparities among different demographic groups				
	Diverse Partnerships: Ensure strategic partnerships include organisations representing minority groups.	Our strategy engagement phase will ensure that we build on the feedback already				

		received from strategic partners to inform our final strategy for approval.				
	Inclusive Engagement: Use diverse engagement methods to gather feedback from all demographic groups.	Working in collaboration with the team, consider further methods to elicit feedback where we have identified any gaps to ensure we have a complete				
	Equitable Resource Allocation: Ensure stewardship includes equitable distribution of resources.	As we develop our strategy, we will use our Values Based Healthcare approach to develop our Stewardship arrangements to inform and direct appropriate distribution of resources				

	Targeted Health Improvement/Prevention: Develop strategies that address specific needs of vulnerable populations.	As we implement the Strategy, we will assess and develop targeted strategies to meet the needs of specific groups within our population.				
	Performance Metrics: Include measures of equality in performance targets.	The Performance Metrics which we use to assess the effectiveness of our strategy delivery will include specific measures of equality				

Further
Notes:

Signed:

Date: