

## NHS Greater Glasgow and Clyde Equality Impact Assessment Tool

Equality Impact Assessment is a legal requirement as set out in the Equality Act (2010) and the Equality Act 2010 (Specific Duties)(Scotland) regulations 2012 and may be used as evidence for cases referred for further investigation for compliance issues. Please refer to the EQIA Guidance Document while completing this form. Please note that prior to starting an EQIA all Lead Reviewers are required to attend a Lead Reviewer training session or arrange to meet with a member of the Equality and Human Rights Team to discuss the process. Please contact [CITAdminTeam@ggc.scot.nhs.uk](mailto:CITAdminTeam@ggc.scot.nhs.uk) for further details or call 0141 2014560.

Name of Policy/Service Review/Service Development/Service Redesign/New Service:

NHSGGC Procurement Strategy 2025-28

Is this a: Current Service ☐ Service Development ☐ Service Redesign ☐ New Service ☐ New Policy ☒ Policy Review ☐

Description of the service & rationale for selection for EQIA: (Please state if this is part of a Board-wide service or is locally driven).

*What does the service or policy do/aim to achieve? Please give as much information as you can, remembering that this document will be published in the public domain and should promote transparency.*

The objectives of NHSGGC's Procurement Strategy 2025-28 are to:

1. **Ensure Continuity and Security of Supply**
2. **Deliver Value for Money**
3. **Improve Governance and Compliance**
4. **Corporate Social Responsibility objectives**
5. **Workforce Development**

Since the last GGC Procurement Strategy was published there have been two developments which have changed the national context. One is the creation of the first Public Procurement Strategy for Scotland<sup>i</sup>, published by the Scottish Government in April 2023. The other is the creation of the first NHS Scotland Procurement Strategy<sup>ii</sup> published by National Services Scotland in October 2024. In developing this new GGC Procurement Strategy it is framed to be within the Health Board strategic objectives of Better Care, Better Health, Better Value and Better Workplace as a priority, but must also align with these two new key national strategies and associated objectives.

*Why was this service or policy selected for EQIA? Where does it link to organisational priorities? (If no link, please provide evidence of proportionality, relevance, potential legal risk etc.)*

The strategy requires that an EQIA be conducted due to its wide-reaching scope. Delivering Best Value and supporting delivery of efficiency savings is a key priority for the Board to enable financial sustainability and Procurement plays a significant part in this. GGC has a 'trade spend' of approximately £887m with third party suppliers, and as such, is influenceable by procurement activity.

Who is the lead reviewer and when did they attend Lead reviewer Training? (Please note the lead reviewer must be someone in a position to authorise any actions identified as a result of the EQIA)

Name: Chris Sanderson, Head of Procurement	Date of Lead Reviewer Training: 10/2/2019
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Please list the staff involved in carrying out this EQIA

(Where non-NHS staff are involved e.g. third sector reps or patients, please record their organisation or reason for inclusion):

Colin Neil, Director of Finance  
Dr Noreen Shields, Planning and Development Manager, Equality and Human Rights Team

	<i>Example</i>	Service Evidence Provided	Possible negative impact and Additional Mitigating Action Required
1.	What equalities information is routinely collected from people currently using the service or affected by the policy? If this is a new service proposal what data do you have on proposed service user groups. Please note any barriers to collecting this data in your submitted evidence and an explanation for any	<i>A sexual health service collects service user data covering all 9 protected characteristics to enable them to monitor patterns of use.</i>  NHSGGC's Procurement Strategy is a high level delivery plan that will support service/system to ensure procurement is equitable. The Strategy is based on a understanding of NHSGGC's diverse population and their needs. Strong performance monitoring with national and local suppliers ensures NHSGGC robustly delivers a procurement process that is equitable.	The Strategy and aligned programmes of work will be subject to EQIA and appropriate adjustments made to ensure that procurement does not exacerbate experience of inequality across protected characteristic groups and leave anyone behind.

	protected characteristic data omitted.			
		<i>Example</i>	Service Evidence Provided	Possible negative impact and Additional Mitigating Action Required
2.	<p>Please provide details of how data captured has been/will be used to inform policy content or service design.</p> <p>Your evidence should show which of the 3 parts of the General Duty have been considered (tick relevant boxes).</p> <p>1) Remove discrimination, harassment and victimisation <input checked="" type="checkbox"/></p> <p>2) Promote equality of opportunity <input checked="" type="checkbox"/></p> <p>3) Foster good relations between protected characteristics. <input type="checkbox"/></p>	<p><i>A physical activity programme for people with long term conditions reviewed service user data and found very low uptake by BME (Black and Minority Ethnic) people. Engagement activity found promotional material for the interventions was not representative. As a result an adapted range of materials were introduced with ongoing monitoring of uptake. (Due regard promoting equality of opportunity)</i></p>	<p>NHSGGC's Procurement Strategy takes cognisance of the population of NHSGGC. This includes an approach that ensures a proportionate approach of national and local suppliers and community benefits clauses. Each year, a commercial workplan of strategic sourcing activity takes place which combines national contract implementation activity and local contracting activity that ensures NHS GGC is maximising the potential of national contract pricing and competitive tendering of local requirements on a prioritised basis. This includes close collaboration with the 'Centre of Expertise' organisation: NSS National Procurement. Systems are in place (e.g. Ward Product Management Service, Pharmacy Distribution Centre and Good Distribution Practice, prioritised multi-year equipment replacement plan; refreshed approach to Key Supplier Management; Improving Purchase to Pay processes; Procurement environmental sustainability champions) which ensure continuity and security of supply to meet the needs of NHSGGC's diverse population.</p>	<p>Work programmes will be subject to EQIA as appropriate</p>

	4) Not applicable <input type="checkbox"/>		<p>Sustainability is a key tenet. For example, the 'Warp-It' software funded by Scottish Government offers a recycle / re-use scheme which acquires surplus furniture and other hospital equipment and offers it for re-use instead of buying new and in 2022 NHSGGC became the first Board to commit to the Supplier Development Programme, which is a commitment of Boards as 'Anchor' organisations. We have fully implemented Scottish Procurement Policy Note SPPN 1/2024 – Fair Work First<sup>iii</sup> into our Procurement processes and have provided staff with associated guidance material.</p> <p>Annual targets with the Sustainability &amp; Value Programme Board are agreed covering recurring savings, non-recurring savings and cost avoidance, to monitor and report progress on these targets and to achieve required savings to contribute to the achievement of the Board's financial plan.</p>	
		<i>Example</i>	Service Evidence Provided	Possible negative impact and Additional Mitigating Action Required
3.	<p>How have you applied learning from research evidence about the experience of equality groups to the service or Policy?</p> <p>Your evidence should show which of the 3 parts of the General Duty have been</p>	<p><i>Looked after and accommodated care services reviewed a range of research evidence to help promote a more inclusive care environment. Research suggested that young LGBT+ people had a disproportionately difficult time through</i></p>	<p>Learning from research evidence has informed the Procurement Strategy. This includes strategic sourcing activity each year which combines national contract implementation activity and local contracting activity that ensures NHS GGC is maximising the potential of national contract pricing and competitive tendering of local requirements on a prioritised basis.</p>	None

	<p>considered (tick relevant boxes).</p> <p>1) Remove discrimination, harassment and victimisation <input checked="" type="checkbox"/></p> <p>2) Promote equality of opportunity <input checked="" type="checkbox"/></p> <p>3) Foster good relations between protected characteristics <input type="checkbox"/></p> <p>4) Not applicable <input type="checkbox"/></p>	<p><i>exposure to bullying and harassment. As a result staff were trained in LGBT+ issues and were more confident in asking related questions to young people. (Due regard to removing discrimination, harassment and victimisation and fostering good relations).</i></p>	<p>The benefits realisation for the procurement strategy was directly informed by our research and associates with the following corporate objectives:</p> <p>Better Care: Ensure Continuity and Security of Supply</p> <p>Better Value: Deliver Value for Money</p> <p>Better Value: Improve Governance and Compliance</p> <p>Better Health: Corporate Social Responsibility objectives</p> <p>Better workplace: Workforce Development</p>	
		<i>Example</i>	Service Evidence Provided	Possible negative impact and Additional Mitigating Action Required
4.	<p>Can you give details of how you have engaged with equality groups with regard to the service review or policy development? What did this engagement tell you about user experience and how was this information used?</p> <p>Your evidence should show which of the 3 parts of the General Duty have been considered (tick relevant boxes).</p>	<p><i>A money advice service spoke to lone parents (predominantly women) to better understand barriers to accessing the service. Feedback included concerns about waiting times at the drop in service, made more difficult due to child care issues. As a result the service introduced a home visit and telephone service which significantly increased uptake.</i></p>	<p>We engage with local suppliers and national colleagues on a regular basis to ensure procurement is effective, efficient and value for money. To take forward additional programmed initiatives via a Procurement Sustainability &amp; Value team, outside of planned strategic sourcing workplan activity to influence non-contract spend, product choice rationalisation and sustainability initiatives as agreed with GGCs Sustainability &amp; Value Programme Board</p>	None

	<p>1) Remove discrimination, harassment and victimisation <input checked="" type="checkbox"/></p> <p>2) Promote equality of opportunity <input checked="" type="checkbox"/></p> <p>3) Foster good relations between protected characteristics <input type="checkbox"/></p> <p>4) Not applicable <input type="checkbox"/></p>	<p><i>(Due regard to promoting equality of opportunity)</i></p> <p><i>* The Child Poverty (Scotland) Act 2017 requires organisations to take actions to reduce poverty for children in households at risk of low incomes.</i></p>		
		<i>Example</i>	Service Evidence Provided	Possible negative impact and Additional Mitigating Action Required
5.	<p>Is your service physically accessible to everyone? If this is a policy that impacts on movement of service users through areas are there potential barriers that need to be addressed?</p> <p>Your evidence should show which of the 3 parts of the General Duty have been considered (tick relevant boxes).</p>	<p><i>An access audit of an outpatient physiotherapy department found that users were required to negotiate 2 sets of heavy manual pull doors to access the service. A request was placed to have the doors retained by magnets that could deactivate in the event of a fire.</i></p> <p><i>(Due regard to remove discrimination, harassment and victimisation).</i></p>	<p>The strategy promotes equal access and opportunity.</p> <p>.</p>	None

	1) Remove discrimination, harassment and victimisation <input checked="" type="checkbox"/> 2) Promote equality of opportunity <input checked="" type="checkbox"/> 3) Foster good relations between protected characteristics. <input type="checkbox"/> 4) Not applicable <input type="checkbox"/>			
		<i>Example</i>	Service Evidence Provided	Possible negative impact and Additional Mitigating Action Required
6.	<p>How will the service change or policy development ensure it does not discriminate in the way it communicates with service users and staff?</p> <p>Your evidence should show which of the 3 parts of the General Duty have been considered (tick relevant boxes).</p> 1) Remove discrimination, harassment and victimisation <input checked="" type="checkbox"/> 2) Promote equality of opportunity <input checked="" type="checkbox"/>	<p><i>Following a service review, an information video to explain new procedures was hosted on the organisation's YouTube site. This was accompanied by a BSL signer to explain service changes to Deaf service users.</i></p> <p><i>Written materials were offered in other languages and formats.</i></p> <p><i>(Due regard to remove discrimination, harassment and victimisation and promote equality of</i></p>	Engagement with staff as part of this strategy has been in-depth, and broad in scope. Workforce development is a key priority in the 2025-28 strategy and we have benchmarked current activity against workforce development aims.	None

	<p>3) Foster good relations between protected characteristics <input type="checkbox"/></p> <p>4) Not applicable <input type="checkbox"/></p> <p>The British Sign Language (Scotland) Act 2017 aims to raise awareness of British Sign Language and improve access to services for those using the language. Specific attention should be paid in your evidence to show how the service review or policy has taken note of this.</p>	<i>opportunity).</i>		
7	Protected Characteristic	Service Evidence Provided	Possible negative impact and Additional Mitigating Action Required	
(a)	<p>Age</p> <p>Could the service design or policy content have a disproportionate impact on people due to differences in age? (Consider any age cut-offs that exist in the service design or policy content. You will need to objectively justify in the evidence section any segregation on the grounds of age promoted by the policy or included in the service design).</p>	<p>NHSGGC has an ageing population. However, there are disparities in life expectancy when comparing areas of highest and lowest deprivation and women and men.</p>	<p>Key programmes of work associated with the Procurement Strategy will be subject to equality impact assessment and where disproportionate impact on the grounds of Age is identified, reasonable adjustments will be put in place. In this way NHSGGC will ensure transformation in the way we deliver care while ensuring no-one is left behind.</p>	



	<p>Your evidence should show which of the 3 parts of the General Duty have been considered (tick relevant boxes).</p> <p>1) Remove discrimination, harassment and victimisation <input checked="" type="checkbox"/></p> <p>2) Promote equality of opportunity <input checked="" type="checkbox"/></p> <p>3) Foster good relations between protected characteristics. <input type="checkbox"/></p> <p>4) Not applicable <input type="checkbox"/></p>		
(b)	<p><b>Disability</b></p> <p>Could the service design or policy content have a disproportionate impact on people due to the protected characteristic of disability?</p> <p>Your evidence should show which of the 3 parts of the General Duty have been considered (tick relevant boxes).</p> <p>1) Remove discrimination, harassment and victimisation <input checked="" type="checkbox"/></p> <p>2) Promote equality of opportunity <input checked="" type="checkbox"/></p> <p>3) Foster good relations between protected characteristics. <input type="checkbox"/></p> <p>4) Not applicable <input type="checkbox"/></p>	<p>There will be positive impacts resulting from the ongoing commitment to deliver procurement solutions that are equitable.</p>	<p>Key programmes of work associated with the Digital Strategy will be subject to equality impact assessment and where disproportionate impact on the grounds of disability is identified, proportionate adjustments will be put in place. In this way NHSGGC will ensure transformation in the way we deliver care while ensuring no-one is left behind.</p>

	Protected Characteristic	Service Evidence Provided	Possible negative impact and Additional Mitigating Action Required
(c)	<p>Gender Reassignment</p> <p>Could the service change or policy have a disproportionate impact on people with the protected characteristic of gender identity?</p> <p>Your evidence should show which of the 3 parts of the General Duty have been considered (tick relevant boxes).</p> <p>1) Remove discrimination, harassment and victimisation <input type="checkbox"/></p> <p>2) Promote equality of opportunity <input type="checkbox"/></p> <p>3) Foster good relations between protected characteristics <input type="checkbox"/></p> <p>4) Not applicable <input checked="" type="checkbox"/></p>	<p>There is no anticipated impact on employees or service users with the protected characteristic of gender reassignment.</p>	<p>Key programmes of work associated with the Procurement Strategy will be subject to equality impact assessment and where disproportionate impact on the grounds of gender reassignment is identified, proportionate adjustments will be put in place. In this way NHSGGC will ensure transformation in the way we deliver care while ensuring no-one is left behind.</p>
	Protected Characteristic	Service Evidence Provided	Possible negative impact and Additional Mitigating Action Required
(d)	<p>Marriage and Civil Partnership</p> <p>Could the service change or policy have a disproportionate impact on the people with the protected characteristics of Marriage and Civil Partnership?</p>	<p>No anticipated impact on the grounds of marriage and civil partnership.</p>	<p>Key programmes of work associated with the Procurement Strategy will be subject to equality impact assessment and where disproportionate impact on the grounds of gender reassignment is identified,</p>

	<p>Your evidence should show which of the 3 parts of the General Duty have been considered (tick relevant boxes).</p> <p>1) Remove discrimination, harassment and victimisation <input type="checkbox"/></p> <p>2) Promote equality of opportunity <input type="checkbox"/></p> <p>3) Foster good relations between protected characteristics <input type="checkbox"/></p> <p>4) Not applicable <input checked="" type="checkbox"/></p>		<p>proportionate adjustments will be put in place. In this way NHSGGC will ensure transformation in the way we deliver care while ensuring no-one is left behind</p>
(e)	<p>Pregnancy and Maternity</p> <p>Could the service change or policy have a disproportionate impact on the people with the protected characteristics of Pregnancy and Maternity?</p> <p>Your evidence should show which of the 3 parts of the General Duty have been considered (tick relevant boxes).</p> <p>1) Remove discrimination, harassment and victimisation <input type="checkbox"/></p> <p>2) Promote equality of opportunity <input checked="" type="checkbox"/></p>	<p>No anticipated impact on the grounds of pregnancy and maternity.</p>	<p>Key programmes of work associated with the Procurement Strategy will be subject to equality impact assessment and where disproportionate impact on the grounds of gender reassignment is identified, proportionate adjustments will be put in place. In this way NHSGGC will ensure transformation in the way we deliver care while ensuring no-one is left behind</p>

	3) Foster good relations between protected characteristics. <input type="checkbox"/> 4) Not applicable <input type="checkbox"/>		
	Protected Characteristic	Service Evidence Provided	Possible negative impact and Additional Mitigating Action Required
(f)	<p>Race</p> <p>Could the service change or policy have a disproportionate impact on people with the protected characteristics of Race?</p> <p>Your evidence should show which of the 3 parts of the General Duty have been considered (tick relevant boxes).</p> <p>1) Remove discrimination, harassment and victimisation <input checked="" type="checkbox"/></p> <p>2) Promote equality of opportunity <input checked="" type="checkbox"/></p> <p>3) Foster good relations between protected characteristics <input type="checkbox"/></p> <p>4) Not applicable <input type="checkbox"/></p>	There will be positive impacts resulting from the ongoing commitment to deliver procurement solutions that are equitable.	Key programmes of work associated with the Procurement Strategy will be subject to equality impact assessment and where disproportionate impact on the grounds of gender reassignment is identified, proportionate adjustments will be put in place. In this way NHSGGC will ensure transformation in the way we deliver care while ensuring no-one is left behind
(g)	<p>Religion and Belief</p> <p>Could the service change or policy have a disproportionate impact on the people with the protected characteristic of Religion and Belief?</p>	There will be positive impacts resulting from the ongoing commitment to deliver procurement solutions that are equitable.	Key programmes of work associated with the Procurement Strategy will be subject to equality impact assessment and where disproportionate impact on the grounds of gender reassignment is identified, proportionate adjustments will

	<p>Your evidence should show which of the 3 parts of the General Duty have been considered (tick relevant boxes).</p> <p>1) Remove discrimination, harassment and victimisation <input type="checkbox"/></p> <p>2) Promote equality of opportunity <input type="checkbox"/></p> <p>3) Foster good relations between protected characteristics. <input type="checkbox"/></p> <p>4) Not applicable <input checked="" type="checkbox"/></p>		<p>be put in place. In this way NHSGGC will ensure transformation in the way we deliver care while ensuring no-one is left behind</p>
	Protected Characteristic	Service Evidence Provided	Possible negative impact and Additional Mitigating Action Required
(h)	<p>Sex</p> <p>Could the service change or policy have a disproportionate impact on the people with the protected characteristic of Sex?</p> <p>Your evidence should show which of the 3 parts of the General Duty have been considered (tick relevant boxes).</p> <p>1) Remove discrimination, harassment and victimisation <input type="checkbox"/></p> <p>2) Promote equality of opportunity <input type="checkbox"/></p> <p>3) Foster good relations between protected characteristics. <input type="checkbox"/></p> <p>4) Not applicable <input checked="" type="checkbox"/></p>	<p>There will be positive impacts resulting from the ongoing commitment to deliver procurement solutions that are equitable.</p>	<p>Key programmes of work associated with the Procurement Strategy will be subject to equality impact assessment and where disproportionate impact on the grounds of gender reassignment is identified, proportionate adjustments will be put in place. In this way NHSGGC will ensure transformation in the way we deliver care while ensuring no-one is left behind</p>

	<p>(i) Sexual Orientation</p> <p>Could the service change or policy have a disproportionate impact on the people with the protected characteristic of Sexual Orientation?</p> <p>Your evidence should show which of the 3 parts of the General Duty have been considered (tick relevant boxes).</p> <p>1) Remove discrimination, harassment and victimisation <input type="checkbox"/></p> <p>2) Promote equality of opportunity <input type="checkbox"/></p> <p>3) Foster good relations between protected characteristics. <input type="checkbox"/></p> <p>4) Not applicable <input checked="" type="checkbox"/></p>	<p>There will be positive impacts resulting from the ongoing commitment to deliver procurement solutions that are equitable</p>	<p>Key programmes of work associated with the Procurement Strategy will be subject to equality impact assessment and where disproportionate impact on the grounds of gender reassignment is identified, proportionate adjustments will be put in place. In this way NHSGGC will ensure transformation in the way we deliver care while ensuring no-one is left behind</p>
	<p>Protected Characteristic</p>	<p>Service Evidence Provided</p>	<p>Possible negative impact and Additional Mitigating Action Required</p>
	<p>(j) Socio – Economic Status &amp; Social Class</p> <p>Could the proposed service change or policy have a disproportionate impact on people because of their social class or experience of poverty and what mitigating action have you taken/planned?</p> <p>The Fairer Scotland Duty (2018) places a duty on public bodies in Scotland to actively consider how they can reduce inequalities of outcome caused by socioeconomic disadvantage when making <u>strategic</u> decisions. If relevant, you should evidence here what steps have been taken to assess and mitigate risk of</p>	<p>There will be positive impacts resulting from the ongoing commitment to deliver procurement solutions that are equitable</p>	<p>Key programmes of work associated with the Procurement Strategy will be subject to equality impact assessment and where disproportionate impact on the grounds of gender reassignment is identified, proportionate adjustments will be put in place. In this way NHSGGC will ensure transformation in the way we</p>

<p>exacerbating inequality on the ground of socio-economic status. Additional information available here: <a href="https://www.gov.scot/publications/fairer-scotland-duty/guidance-for-public-bodies/pages/1-introduction.aspx">Fairer Scotland Duty: guidance for public bodies - gov.scot (www.gov.scot)</a></p> <p>Seven useful questions to consider when seeking to demonstrate ‘due regard’ in relation to the Duty:</p> <ol style="list-style-type: none"> <li>1. What evidence has been considered in preparing for the decision, and are there any gaps in the evidence?</li> <li>2. What are the voices of people and communities telling us, and how has this been determined (particularly those with lived experience of socio-economic disadvantage)?</li> <li>3. What does the evidence suggest about the actual or likely impacts of different options or measures on inequalities of outcome that are associated with socio-economic disadvantage?</li> <li>4. Are some communities of interest or communities of place more affected by disadvantage in this case than others?</li> <li>5. What does our Duty assessment tell us about socio-economic disadvantage experienced disproportionately according to sex, race, disability and other protected characteristics that we may need to factor into our decisions?</li> <li>6. How has the evidence been weighed up in reaching our final decision?</li> <li>7. What plans are in place to monitor or evaluate the impact of the proposals on inequalities of outcome that are associated with socio-economic disadvantage? ‘Making Fair Financial Decisions’ (EHRC, 2019)<sup>21</sup> provides useful information about the ‘Brown Principles’ which can be used to determine whether due regard has been given. When engaging with communities the National Standards for Community Engagement<sup>22</sup> should be followed.</li> </ol>		<p>deliver care while ensuring no-one is left behind</p>
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	Those engaged with should also be advised subsequently on how their contributions were factored into the final decision.		
(k)	<p>Other marginalised groups</p> <p>How have you considered the specific impact on other groups including homeless people, prisoners and ex-offenders, ex-service personnel, people with addictions, people involved in prostitution, asylum seekers &amp; refugees and travellers?</p>	There will be positive impacts resulting from the ongoing commitment to deliver procurement solutions that are equitable	Key programmes of work associated with the Procurement Strategy will be subject to equality impact assessment and where disproportionate impact on the grounds of gender reassignment is identified, proportionate adjustments will be put in place. In this way NHSGGC will ensure transformation in the way we deliver care while ensuring no-one is left behind
8.	<p>Does the service change or policy development include an element of cost savings? How have you managed this in a way that will not disproportionately impact on protected characteristic groups?</p> <p>Your evidence should show which of the 3 parts of the General Duty have been considered (tick relevant boxes).</p> <p>1) Remove discrimination, harassment and victimisation <input type="checkbox"/></p> <p>2) Promote equality of opportunity <input type="checkbox"/></p>	Financial detail is contained in the procurement strategy as well as a robust governance approach to cost savings.	Key programmes of work associated with the Procurement Strategy will be subject to equality impact assessment and where disproportionate impact on the grounds of gender reassignment is identified, proportionate adjustments will be put in place. In this way NHSGGC will ensure transformation in the way we deliver care while ensuring no-one is left behind



	<p>3) Foster good relations between protected characteristics. <input type="checkbox"/></p> <p>4) Not applicable <input checked="" type="checkbox"/></p>		
		Service Evidence Provided	Possible negative impact and Additional Mitigating Action Required
9.	What investment in learning has been made to prevent discrimination, promote equality of opportunity and foster good relations between protected characteristic groups? As a minimum include recorded completion rates of statutory and mandatory learning programmes (or local equivalent) covering equality, diversity and human rights.	The 2023-28 procurement strategy was developed in collaboration with equality specialists at NHSGGC	Key programmes of work associated with the Procurement Strategy will be subject to equality impact assessment and where disproportionate impact on the grounds of gender reassignment is identified, proportionate adjustments will be put in place. In this way NHSGGC will ensure transformation in the way we

			deliver care while ensuring no-one is left behind
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10. In addition to understanding and responding to legal responsibilities set out in Equality Act (2010), services must pay due regard to ensure a person's human rights are protected in all aspects of health and social care provision. This may be more obvious in some areas than others. For instance, mental health inpatient care or older people's residential care may be considered higher risk in terms of potential human rights breach due to potential removal of liberty, seclusion or application of restraint. However risk may also involve fundamental gaps like not providing access to communication support, not involving patients/service users in decisions relating to their care, making decisions that infringe the rights of carers to participate in society or not respecting someone's right to dignity or privacy.

The Human Rights Act sets out rights in a series of articles – right to Life, right to freedom from torture and inhumane and degrading treatment, freedom from slavery and forced labour, right to liberty and security, right to a fair trial, no punishment without law, right to respect for private and family life, right to freedom of thought, belief and religion, right to freedom of expression, right to freedom of assembly and association, right to marry, right to protection from discrimination.

Please explain in the field below if any risks in relation to the service design or policy were identified which could impact on the human rights of patients, service users or staff.

The procurement strategy advocates equitable processes. Application of equality impact assessments to each aligned development will ensure a transparent process for checking any potential risk to Human Rights Articles.

Please explain in the field below any human rights based approaches undertaken to better understand rights and responsibilities resulting from the service or policy development and what measures have been taken as a result e.g. applying the PANEL Principles to maximise Participation, Accountability, Non-discrimination and Equality, Empowerment and Legality or FAIR\*.

\*

- **Facts:** What is the experience of the individuals involved and what are the important facts to understand?
- **Analyse rights:** Develop an analysis of the human rights at stake
- **Identify responsibilities:** Identify what needs to be done and who is responsible for doing it
- **Review actions:** Make recommendations for action and later recall and evaluate what has happened as a result.

Having completed the EQIA template, please tick which option you (Lead Reviewer) perceive best reflects the findings of the assessment. This can be cross-checked via the Quality Assurance process:

- ☒ Option 1: No major change (where no impact or potential for improvement is found, no action is required)
- ☐ Option 2: Adjust (where a potential or actual negative impact or potential for a more positive impact is found, make changes to mitigate risks or make improvements)
- ☐ Option 3: Continue (where a potential or actual negative impact or potential for a more positive impact is found but a decision not to make a change can be objectively justified, continue without making changes)
- ☐ Option 4: Stop and remove (where a serious risk of negative impact is found, the plans, policies etc. being assessed should be halted until these issues can be addressed)

11. If you believe your service is doing something that ‘stands out’ as an example of good practice - for instance you are routinely collecting patient data on sexual orientation, faith etc. - please use the box below to describe the activity and the benefits this has brought to the service. This information will help others consider opportunities for developments in their own services.

Actions – from the additional mitigating action requirements boxes completed above, please summarise the actions this service will be taking forward.	Date for completion	Who is responsible?(initials)
Key programmes of work will be subject to individual EQIAs	2025-28	Chris Sanderson (Lead)

Ongoing 6 Monthly Review    please write your 6 monthly EQIA review date:

Lead Reviewer:  
EQIA Sign Off:

Name                      Chris Sanderson  
Job Title                Head of Procurement  
Signature  
Date                      28/4/25

Quality Assurance Sign Off:

Name                      Louise Carroll  
Job Title                Planning and Development Manager  
Signature  
Date                      28/4/25



**NHS GREATER GLASGOW AND CLYDE EQUALITY IMPACT ASSESSMENT TOOL**  
**MEETING THE NEEDS OF DIVERSE COMMUNITIES**  
**6 MONTHLY REVIEW SHEET**

Name of Policy/Current Service/Service Development/Service Redesign:

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Please detail activity undertaken with regard to actions highlighted in the original EQIA for this Service/Policy

		Completed	
		Date	Initials
Action:			
Status:			
Action:			
Status:			
Action:			
Status:			
Action:			
Status:			

Please detail any outstanding activity with regard to required actions highlighted in the original EQIA process for this Service/Policy and reason for non-completion

		To be Completed by	
		Date	Initials
Action:			
Reason:			
Action:			
Reason:			

Please detail any new actions required since completing the original EQIA and reasons:

		To be completed by	
		Date	Initials
Action:			
Reason:			
Action:			
Reason:			

Please detail any discontinued actions that were originally planned and reasons:

Action:	
Reason:	
Action:	
Reason:	

Please write your next 6-month review date

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Name of completing officer:

Date submitted:

If you would like to have your 6 month report reviewed by a Quality Assuror please e-mail to: [alastair.low@ggc.scot.nhs.uk](mailto:alastair.low@ggc.scot.nhs.uk)

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<sup>i</sup> <https://www.gov.scot/publications/public-procurement-strategy-scotland-2023-2028/>

<sup>ii</sup> <https://www.nss.nhs.scot/publications/nhsscotland-procurement-strategy-2024-2028/>



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<sup>iii</sup> <https://www.gov.scot/publications/publication-of-updated-fair-work-first-in-procurement-guidance/>