Integrated Impact Assessment – Report of results

1. Title of new or revised policy (plan, programme, strategy or practice)

NHS Lothian Public Health Survey 2023

Background and Frequently Asked Questions can be found online here: <u>Lothian Public</u> <u>Health Survey – NHS Lothian | Our Services</u>

2. Briefly describe any public involvement in the development of this policy

This survey is being conducted to gather public experiences and self-perceptions of their health and factors which influence their health. While we did not incorporate public involvement within the development of the survey questionnaire, we ensured that, wherever possible, the survey used existing validated questions which have been tested and extensively used in Scotland and more widely.

3. Is the new or revised policy considered strategic under the <u>Fairer</u> <u>Scotland Duty</u>?

Indirectly. The intelligence which this survey helps to inform will be used to influence and/or inform strategy, policy and practice within NHS Lothian and partners. Importantly it is beyond the scope of this survey to be the only source of intelligence for such work – rather it will form part of a wider intelligence picture.

4. Briefly describe how this policy will help to promote and protect the right to the highest attainable standard of physical and mental health in Lothian (recognising existing health inequalities facing different population groups)?

This survey will contribute towards our understanding of: the demographics and health of the population of NHS Lothian, measures of some of the social determinants of health and the inequalities therein. As such it comprises part of an emergent picture around the population based upon a combination of routinely collected data and surveys, the literature and evidence base and data from other sources – such as audit, *ad hoc* surveys etc.

5. Date when decision was made to implement the policy (final sign off)

NHS Lothian and the University of Edinburgh formed a collaboration to commission and oversee the survey. In April 2022, following an open procurement procedure, the Scottish Centre for Social Research (ScotCen) were awarded the commission to carry out the survey. The survey has then been developed and fieldwork is scheduled to commence in late March 2023.

6. Who was involved in carrying out the Integrated Impact Assessment (IIA)? For example, project and senior leads, facilitators, advisers, report writer and any employee representatives

Philip Conaglen, Lead Consultant in the Population Health Division, NHS Lothian Directorate of Public Health and Health Policy, led the Integrated Impact Assessment. Other contributors were: Research Fellow, University of Edinburgh; Senior Public Health Intelligence Analyst, NHS Lothian; and Public Health Intelligence Analyst, NHS Lothian.

Note:

When considering impacts of the survey on different populations we considered a combination of:

- 1. Accessibility of the survey
- 2. Impacts for respondents in completing the survey
- 3. Strategic and policy impacts of items which were and were not included in the survey

Overall, the intention was to contribute towards filling gaps in our intelligence around the population health of Lothian. It was acknowledged at project outset that a single cross-sectional survey would not be able to fill all such gaps in our knowledge. We also acknowledge that robust observations will not always be able to be made around groups with only small numbers of respondents.

It is our ambition, resources allowing, to run repeat surveys in the future. This will allow comparison over time and will also provide the opportunity to explore other areas which were omitted from this survey due to constraints around survey length and design.

Collecting and analysing equality information is an important way for NHS Lothian to develop our understanding of the needs of the population we serve. However, public authorities should always use a proportionate approach to collecting personal information. Data protection law does not prevent NHS Lothian from collecting and processing personal data, but we must fulfil at least one of the lawful bases under Article 6 of the GDPR. For example, that it is necessary for carrying out statutory functions. Guidance from the Equality and Human Rights Commission is clear that public authorities must make sure that any personal information they collect is necessary to meet their obligations under the public sector equality duty. They should also be clear about how the information will be used and collect the minimum data required to achieve their objective.

7. Relevant evidence collected in the IIA

Population groups / issues	What does the evidence tell us	Source (e.g. published research, consultation & engagement, equality monitoring data)
Data about different equality (protected characteristic) groups and access to the relevant services/ employment opportunities Prompts : Do any groups experience disadvantage/ worse	Age Population surveys for children and adults differ in design and approach in many respects. This programme of work was limited to the Lothian adult population (aged 16 years and over). We are gathering information about the number of children in the household of the adult completing the questionnaire. The survey design aims to ensure a representative number of adult	
Do any groups have different needs from others?	representative number of adult respondents by age – considering factors such as response rates by age. Age of respondent will be a key item used to standardise and/or analyse outputs. The intention is to be able to explore and understand the	
disproportionately low participation in relevant activity/ service? What are the barriers to participation?	characteristics of different age groups. Disability The survey includes measures of self- reported health which includes questions relating to disabilities. These will allow responses to be explored based on self- reported disability.	
	Sex (women and men) The survey gathers information on sex which will be a used to standardise and/or analyse outputs. As below, this survey uses the approach of the Scottish Census informed by NRS commissioned research. That work recommended a binary sex question with additional guidance and notes relating particularly to those with a trans history and who identify as non-binary. The approach used affords those who identify as non- binary to respond under a further	

Population groups / issues	What does the evidence tell us	Source (e.g. published research, consultation & engagement, equality monitoring data)
	question around Trans history, however we do note that this approach taken by the Scottish Census did draw some critique from various commentators. However, unlike the census, none of the questions in the present survey are mandatory. (see footnote 1).	
	Gender reassignment (trans) The survey includes a question around trans history – wording was taken from an identical question used in the recent Scottish Census 2022. Design decisions for this and the Sex question above were based upon reporting from National Records of Scotland around research and assumptions which informed the Census 2022 ¹ . These data will allow responses to be explored by trans history.	
	Pregnancy and maternity The survey includes a question around pregnancy related screening. As a cross-sectional population-wide survey, it was agreed that this is not an effective way to gather information around pregnancy or maternity (which would be more suited to e.g. surveys of a cohort of women using maternity services).	
	Race (colour, nationality, ethnic or national origins) The survey includes a question gathering information around ethnic group. We will explore responses by ethnicity. By nature of a postal invitation survey there is the possibility we may not reach communities with no fixed abode (e.g. potentially some Gypsy / Traveller communities). This will be	

¹ Sex question recommendation report | Scotland's Census (scotlandscensus.gov.uk)

Population groups / issues	What does the evidence tell us	Source (e.g. published research, consultation & engagement, equality monitoring data)
	considered within the analysis and is an example of an area where other approaches (e.g. tailored needs assessment and research) will likely be more useful to inform future policy.	
	Religion or belief Religion or belief are not explored in this survey as we felt the recent census will be better placed to gather more useful evidence around these areas and they are not the focus of the present work. For future surveys we plan to further review the evidence in relation to religion or belief and their relationship to inequalities to inform whether we should collect information about this in future surveys. See section 8 below for limitations.	
	Sexual orientation (gay men, lesbians, heterosexuals and bi-sexuals) This survey is not gathering information around sexual orientation. See section 8 below for limitations.	
Data about people living in poverty and experiencing socio- economic disadvantage	The survey methodology has been designed to obtain a sample of respondents that is representative of the population of Lothian by: age, sex, and Lothian Scottish Index of Multiple Deprivation (SIMD) and representative of each of Lothian's four local authorities along: age, sex, and local authority SIMD quintile. The intention is to gather responses from participants experiencing varying extents of multiple deprivation (which incorporates socio- economic disadvantage as one of its key components). We are also gathering information around respondent's income, education and housing which will provide further	

Population groups / issues	What does the evidence tell us	Source (e.g. published research, consultation & engagement, equality monitoring data)
	intelligence around poverty and socio- economic disadvantage.	
Data about other relevant social determinants of health	The survey gathers information around qualifications and a measure of educational attainment. It also gathers a range of measures around work and employment including unpaid caring responsibilities. We are gathering information around food/energy insecurity and housing arrangements. The selection of these measures of health determinants was informed by a combination of the Marmot 2010 and 2020 ² reporting around inequalities, as well as expert input from local Public Health professionals.	
Good practice guidance (statutory and non-statutory)	The three partners involved drew upon best practice in survey design and public health intelligence to inform this work. The methodology and approaches were assessed and approved through a number of formal routes including: NHS Lothian IT security, NHS Lothian information governance, Formal Research Ethics approval, Caldicott Guardian Approval and Research and Development Review.	
Carbon emissions generated/reduced data	A postal invite encouraging online survey completion was considered the best in a trade-off between environmental impact of survey approach and increasing the probability of an adequate response rate so the survey outputs are meaningful. This includes the availability of paper copies of the survey questionnaire which will be made available to allow access and	

² <u>Fair Society Healthy Lives full report (parliament.uk);</u> <u>Health Equity in England: The Marmot Review 10 Years On - The Health Foundation</u>

Population groups / issues	What does the evidence tell us	Source (e.g. published research, consultation & engagement, equality monitoring data)
	encourage wider participation (e.g. for those without access to the internet).	

8. What possible positive and negative effects/ impacts were identified, and which groups of people will they affect?

Possible equality impacts (how will this proposal help to - Eliminate discrimination & harassment - Advance equality of opportunity - Foster good relations/ tackle prejudice?)	Affected people
In relation to the protected characteristic of marriage and civil partnership, the Equality Act 2010 provides that NHS Lothian only needs to comply with the first need of the public sector equality duty (to have due regard to the need to eliminate unlawful discrimination etc) and only in relation to work. This is because the parts of the Equality Act 2010 covering services and public functions do not apply to this protected characteristic.	
Positive This survey will provide an overview of information around health and wellbeing, the broader determinants of health and inequalities therein. The intention is to set out the extent of inequalities (especially by age, sex, ethnicity and multiple deprivation) across the population. It seeks to provide local-level intelligence around inequalities in the broader determinants of health and links between that and health and wellbeing.	Lothian adult population
Negative As identified above, the survey does not gather information on every protected characteristic under equality legislation. Through the design process the team discussed the trade-offs between length of survey and ability to achieve the objectives outlined above. We intend future work (including future surveys) to add to this evidence base in developing a deeper understanding of	Survey outputs will not be able to make local observations around the relationship between religious group, sexual orientation and marriage/civil

Possible equality impacts (how will this proposal help to - Eliminate discrimination & harassment - Advance equality of opportunity - Foster good relations/ tackle prejudice?)	Affected people
relationships between all protected characteristics and health/wellbeing and inequalities. One such example is the inherent inability of a survey using postal invitations to reach those experiencing homelessness. Various protected characteristics overlap with an increased probability of experiencing homelessness (e.g. young LGBT people are over- represented in this population group ³). We will ensure exploration of the outputs of this survey reflect these limitations and we recognise that a population survey is limited.	partnership and the outcomes of interest nor will it represent those experiencing homelessness.
NHS Lothian recently collected evidence around the health needs of lesbian, gay and bisexual people living in Lothian through an extensive LGBT Health Needs Assessment. This evidence is being used by NHS Lothian, where relevant, to help eliminate discrimination, advance equality and foster good relations. This work will inform analysis and interpretation of the present survey.	
With a number of protected characteristics, the number of respondents in certain groups may be relatively small (e.g. some ethnic groups or those with a trans history) – an assessment will be taken during exploratory data analysis around the best approach for interpreting and reporting any such small numbers. Where small numbers need to be supressed in reporting to ensure confidentiality is protected, descriptive approaches will be used to ensure characteristics are reflected in reporting and analysis.	

Possible socio-economic impacts (how will this proposal help to reduce poverty and socio-economic inequalities?)	Affected people
Positive Improving our local intelligence around socio-economic associations with health/wellbeing and inequalities is a core objective of this work. The intention is to use this as	Lothian adult population

³ Albert Kennedy Trust: https://www.akt.org.uk/Handlers/Download.ashx?IDMF=c0f29272-512a-45e8-9f9b-0b76e477baf1

Possible socio-economic impacts (how will this proposal help to reduce poverty and socio-economic inequalities?)	Affected people
part of our wider intelligence picture (adding to routine data such as Census outputs).	
Negative Nil	Nil

Possible environment and sustainability impacts including climate change emissions	Affected people
Positive A postal invite encouraging online survey completion was considered the best in a trade-off between environmental impact of survey approach and increasing the probability of an adequate response rate so the survey outputs are meaningful. This includes the availability of paper copies of the survey questionnaire which will be made available to allow access and encourage wider participation (e.g. for those without access to the internet).	
Negative The above approach does not remove any climate impact which is inherent in any survey approach but is a pragmatic approach to delivering this work.	

9. What changes have been made to the policy, or action will be taken, to remove or reduce any possible negative impacts or to make sure the policy has a positive impact on particular groups (these should be drawn from 7 – 11 above)

Changes made/ action taken	When (date)	Responsibility (job title)
Accessibility:	2022	Lead Consultant
Including written materials for invitation and encouraging online completion presented potential barriers based on literacy and computer literacy, language, access to the internet etc. We designed in encouragement, for those who need it, to have someone help them complete the questionnaire and have incorporated the option to request a paper questionnaire and/or speak with a telephone service where telephone		

Changes made/ action taken	When (date)	Responsibility (job title)
assistance including translation can be provided.		

10. Are there any negative impacts in section 8 for which there are no identified mitigating actions?

We recognise that given the design of the survey we will not be able to make observations around relationships between religious group, sexual orientation and marriage/civil partnership and the outcomes of interest. We believe the existing evidence base, augmented by the recent Scottish census will provide useful intelligence in these areas.

It is anticipated that the intelligence gained from the survey will be used by NHS Lothian to help meet its non-discrimination and advancing equality duties under equality legislation.

11. Additional Information and Evidence Required

Nil

12. Is any part of this policy to be implement wholly or partly by contractors and if so, how will equality, socio-economic, environmental and sustainability issues be addressed?

This work has been developed and delivered in collaboration with the University of Edinburgh who have commissioned the Scottish Centre for Social Research to collect the data. The invitation to tender and related evaluation process incorporated consideration of additional/community benefits including social, economic and environmental benefits.

This summary document reflects considerations and dialogue between partners while planning and developing this survey.

13. Consider how you will communicate information about this policy to children and young people and those affected by sensory impairment, speech impairment, low level literacy or numeracy, learning difficulties or English as a second language? Please provide a summary of the communications plan.

The analysis plan for the survey is currently in development and the communications plan will be developed following that. It will incorporate considerations around public data and health literacy. The focus of this work is not around children and young people but materials which are developed from it may be used in those spaces.

14. Is this policy likely to result in significant environmental effects, either positive or negative? If yes, it is likely that a <u>Strategic Environmental</u> <u>Assessment</u> (SEA) will be required.

No

15. Is this policy likely to have a significant impact on children and young people? If yes, it is likely that a <u>Children's Rights and Wellbeing Impact</u> <u>Assessment</u> (CRWIA) will be required.

No

16. How will you identify the actual impact of this policy?

The impact of this, and future, survey(s) will ultimately be measured in the utility of the wider intelligence which it/they contributes to and how this is used to help inform and influence policy over time.

17. Sign off by Head of Service

Name Dr Philip Conaglen – Lead Consultant, Population Health Division

Date 23 March 2023

18. Publication

Once your new or revised policy has been agreed

NHS Lothian completed and signed Integrated Impact Assessments should be sent to <u>impactassessments@nhslothian.scot.nhs.uk</u> to be published on the NHS Lothian website

Edinburgh Integration Joint Board/Health and Social Care Partnership

<u>sarah.bryson@edinburgh.gov.uk</u> to be published at <u>www.edinburghhsc.scot/the-ijb/integrated-impact-assessments/</u>