

Tips for relocation of GP practice Equality, Health inequality Impact Assessments (EHIAs)

These notes have been created to support colleagues who are preparing an EHIA for relocation of a GP practice to different premises. NB it is not an exhaustive description of possible EHIA content. The aim is to show that regard is given to equality of access, experience and ensuring any local health-inequalities will not likely be exacerbated by the move.

Statutory frameworks

Equality Act 2010	NHS organisations must have regard to the protected groups when considering proposals which are likely to impact those groups, including the workforce, where appropriate.
Health & Social Care Act 2012 and s. 14Z35 NHS Act 2006	NHS organisations must have regard to the need to reduce inequalities and health inequalities in respect to accessing health services and the outcomes achieved.
s. 14Z54 NHS Act 2006	NHS organisations must involve the group of people for whom the they carry core responsibility and any other persons they consider it appropriate to involve.

Equality Statement

NHS NWL uses Health Inequality Impact Assessments (EHIAs) as tools to show that we understand the likely equalities impact of any proposals, ensure we are not disproportionally disadvantaging groups who share protected characteristics and comply with the Public Sector Equality Duty. EHIAs provide assurance that any changes involved in proposals are planned with due regard to our duties under the Equality Act to eliminate discrimination, advance equality of opportunity, and foster good community relations.

Protected characteristics

The main groups likely to be affected are age (mainly older people), carers, disability (physical, learning and sensory). If everything else (e.g. staff, GPs, types of services) remains the same the move is likely to have neutral/no impact on the other characteristics – however patient involvement might flag issues. Further considerations include people who may be financially challenged, ethnic travellers or experiencing homelessness.

The EHIA should also demonstrate awareness of the local health in-equalities and how the relocation is likely to impact on them.

Patient and other stakeholder involvement

The EHIA will need to provide evidence of involving patients in the development and progression of the proposed plan to move. Any issues flagged should be addressed – particularly if they are related to protected characteristics. Stakeholder engagement should

include neighbouring practices in both the old and new locations, affected staff members and others as appropriate.

Action plan

You'll need an action plan outlining any actions that you need to follow up based on the EHIA to include a communications plan for informing your practice list, suppliers and other stakeholders of your plan to move and provide the new address. This will include notices, left at the current premises, that you have moved with a forwarding address (for patients who may be homeless or sofa surfing with no fixed address) and advice to call 111 if their health need is urgent).

Points to note, guide questions to answer with sound evidence

These are neither exhaustive nor listed in order of importance, but are meant as a guide. Engagement with stakeholders and patients may highlight other issues for your consideration and action. When reviewing your Business Case, the relevant Board will seek assurance of compliance with the Acts listed above. The EHIA should provide sufficient information to give the assurance that your proposal will eliminate discrimination, advance equality of opportunity, foster good community relations and have no adverse impact on existing health inequalities.

- Measurement of distance in miles/km between old and new location
- How far is the new location from the furthest address/post code on your patient list?
- Are there other practices in the vicinity of the new location? Are they aware? Is there a need for additional primary care services?
- What happens in the old location i.e. will the move mean a reduction in primary care provision and will that in turn exacerbate health inequalities in the area?
- Have you received confirmation in writing that neighbouring practices in the old location can absorb new patients who might decide to change registration or need to be newly registered?
- What does it mean for patients living furthest away from the new location? Are there good public transport routes? Is that affordable for patients on low incomes? Is there adequate parking for people with disabilities or carers?
- How will you inform patients with learning disabilities and/or sensory impairments of the move and orientate them to the new premises?
- Are the new premises compliant with disability access?
- What about older patients and home based services? Will those be affected?
- Add patient feedback from the engagement you've done are patients supportive or not?
- What does this mean for PCN boundaries?
- Does the new site have capacity for the number of appointments, administration, reception needed to effectively provide timely services to your list size?
- Is it in a safe environment women, LGBT patients highlight safety as a priority issue when travelling to and from health services, particular in more isolated areas.

Timescale for approval of EHIAs

EHIAs are to be submitted **no less than two weeks prior to when your papers need to be submitted to the relevant Board**, in the event that it is recommended that further work be done to develop them.

Contact <u>michelle.johnson23@nhs.net</u> if you have any queries and to send your completed assessment for review and sign off.