GIG CYMRU NHS WALES | Bwrdd Iechyd Prifysgol Betsi Cadwaladr University Health Board

EQUALITY IMPACT ASSESSMENT FORMS

PARTS A (Screening – Forms 1-4) and

B (Key Findings and Actions – Form 5)

For:	*New residential and nursing care home at Penrhos*
Date form completed:	*9th December 2022* *Reviewed: November 2025*

PARTS A: SCREENING and B: KEY FINDINGS AND ACTIONS

Introduction:

These forms have been designed to enable you to record, and provide evidence of how you have considered the needs of all people (including service users, their carers and our staff) who may be affected by what you are writing or proposing, whether this is:

- a policy, protocol, guideline or other written control document;
- a strategy or other planning document e.g. your annual operating plan;
- any change to the way we deliver services e.g. a service review;
- a decision that is related to any of the above e.g. commissioning a new service or decommissioning an existing service.

Remember, the term 'policy' is used in a very broad sense to include "..all the ways in which an organisation carries out its business" so can include any or all of the above.

Assessing Impact

As part of the preparation for your assessment of impact, consideration should be given to the questions below.

You should also be prepared to consider whether there are possible impacts for subsections of different protected characteristic groups. For example, when considering disability, a visually impaired person will have a completely different experience than a person with a mental health issue.

It is increasingly recognised that discrimination can occur on the basis of more than one ground. People have multiple identities; we all have an age, a gender, a sexual orientation, a belief system and an ethnicity; many people have a religion and / or an impairment as well. The experience of black women, and the barriers they face, will be different to those a white woman faces. The elements of identity cannot be separated because they are not lived or experienced as separate. Think about:-

- ✓ How does your policy or proposal promote equality for people with protected characteristics (Please see the General Equality Duties)?
- ✓ What are the possible negative impacts on people in protected groups and those living in low-income households and how will you put things in place to reduce or remove these?
- ✓ What barriers, if any, do people who share protected characteristics face as a result of your policy or proposal? Can these barriers be reduced or removed?
- ✓ Consider sharing your EqIA wider within BCUHB (and beyond), e.g. ask colleagues to consider unintended impacts.
- ✓ How have you/will you use the information you have obtained from any research or other sources to identify potential (positive or negative) impacts?

Part A Form 1: Preparation

Please answer all questions

1.	What are you assessing i.e. what is the title of the document you are writing or the service review you are undertaking?	The capital business case for the development of a new build (replacement) residential care home and care home with nursing on the Penrhos site
2.	Provide a brief description, including the aims and objectives of what you are assessing.	The proposal is to provide permanent, modern, fit for purpose residential and nursing care accommodation on the Penrhos site. The investment objectives are: • To support the rebalancing of the residential and nursing care market (for the Gwynedd area) by increasing delivery from the public / not for profit sector focused on delivering person centred outcomes for all. • To support the provision of care closer to home by improving the accessibility of residential and nursing care, ensuring provision of services in the Welsh language. • To support sustainability of local residential and nursing care provision through a collaborative, partnership approach which will integrate with the wider spectrum of care delivered from the Penrhos site. • To develop an innovative workforce model that will support the long-term health and social care sector with the potential for application in other areas of North Wales and create opportunities for training through Welsh Language. • To ensure purposefully designed accommodation which will meet the care needs of individuals both now and into the future. • To deliver value for money through the efficient use of resources and delivery of environmentally sensitive accommodation that is carbon neutral. The project benefits / outcomes are: • Securing of nursing provision in local area • Flexible health and care provision (“seamless care” as described in A Healthier Wales)

Part A Form 1: Preparation

Please answer all questions

		• Partnership approach between health and local authority may provide further opportunities for integrated approaches • No-one stays longer than they need to in acute inpatient care. There are no "delayed transfers of care" due to lack of provision of residential and nursing beds • By having public sector provision in nursing – ability to understand more acutely the pressures of sector and ability to support smaller providers • Employment opportunities for local residents • Provide local residents with the right skills for long term employment • Provide school leavers with career aspirations meaningful and long-term employment • Local supply chain is supported and grown • Ability to train and develop medical, nursing and care staff through secondment and shadowing opportunities within the provision • Welsh language skills of all staff will be part of the recruitment policy of Council. • Resilient and more appropriate buildings and infrastructure • The new development will be well integrated into the character of the surrounding area • Providing a modern, accessible working environment that motivates different professional groups to operate collaboratively • Provides a demenstrable vision for service integration • Positive contribution towards decarbonisation / net zero agenda; Accommodation that meets current building recommendations (e.g. HBN / DDA / ventilation / infection prevention) • Meets BREEAM aspirations.
3.	Who is responsible for whatever you are assessing – i.e. who has the authority to agree or approve any changes you identify are necessary?	This Board reports to the West Integrated Health Community (IHC). Any changes identified as part of the EQIA will be considered and agreed by the Project Board (ensuring within overall budget) or escalated to the SRO where appropriate. The Penrhos Project Board will oversee the development of this scheme and the wider Penrhos site. The Senior Reporting Officer is Dylan Owen, Corporate Director – Social Services, Gwynedd Council. Any changes identified as part of the EQIA will be considered and agreed by the Project Board (ensuring within overall budget) or escalated to the SRO where appropriate.

Part A Form 1: Preparation

Please answer all questions

		The EQIA will be submitted as part of the Outline Business Case (OBC) and will follow approval governance routes within Gwynedd Council and Betsi Cadwaladr University Health Board.
4.	Is the Policy related to, or influenced by, other Policies or areas of work?	The business case links with multiple local and national strategies and policies: ▪ **The Wellbeing and Future Generations (Wales) Act 2015**. ▪ **Social Services and Wellbeing (Wales) Act 2014** ▪ **A Healthier Wales, 2018** The plan encourages Health Boards to be 'fit for the future' and to respond quickly to challenges and opportunities. There is an opportunity to develop a new model, and a new service at Penrhos, with more space to expand on what is already provided. ▪ **BCUHB Three-year plan 2025-2028** The new home in Penrhos will deliver the care closer to home agenda and expanding expertise and knowledge in the locality. ▪ **Rebalancing Care and Support (Welsh Government White paper)** ▪ **Decarbonising Social Care in Wales**
5.	Who are the key Stakeholders i.e. who will be affected by your document or proposals? Has a plan for engagement been agreed?	The key stakeholders are: • Older people and their families • Carers • Wider public • Penrhos residents • Polish community • Social Care Wales • HIW • CIW • Care Forum Wales • Welsh Government • GC Adult services leads, managers and staff

Part A Form 1: Preparation

Please answer all questions

		• BCU Community Services leads, managers and staff • Continuing Healthcare Team • Community Health Council • Community and Town Council • Local Members • Welsh Ambulance Services Trust (WAST) • Police • Fire service • Transport providers • Voluntary sector • Community Resource Team • Gwynedd Planning Dept • RPB • PSB • Older Peoples Commissioners Office • Natural Resources Wales • Public Health Wales • Coleg Llandrillo Menai • Byw'n Iach • Dementia Go • Alzheimer's • Clwyd Alyn • LGBTQ+ An Engagement Plan is currently being considered and drafted by the Stakeholder Sub-group.

Part A Form 1: Preparation

Please answer all questions

6.	What might help or hinder the success of whatever you are doing, for example communication, training etc.?	If the project capital funding is not fully approved by WG this will hinder the progress of the scheme. If the build tenders are returned with a total cost much higher than the approved funding level this could also put the project at risk. Workforce recruitment will also be key to the success of the project. A specific sub-group has been established to progress the nursing and carer workforce model and staff training needs to address potential recruitment difficulties (in a semi-rural area) and to ensure care can be offered and delivered as much as possible in the Welsh Language. Communication on a local and regional level will be crucial to raise awareness, engender support and help the success of the proposed care home on the Penrhos site. An engagement plan is being drafted by the Penrhos Stakeholder Comms & Engagement Group. A communications campaign will be organised by Clwyd Alyn's Communications Department in conjunction with Gwynedd Council Communications Team and BCUHB Communications Team.
7.	Think about and capture the positive aspects of your policy that help to promote and advance equality by reducing inequality or disadvantage.	The provision of a care home providing both nursing and residential care in the Pwllheli area will improve local access to nursing and residential care for older people, preventing the need to travel a long way from home. The proposal is assessed to have a positive impact across all the protected characteristic groups and a significant positive impact on two protected characteristic groups, in particular: - Age (Older People including those with dementia) - Disability The positive aspects of this business case that help to promote and advance equality are:

Part A Form 1: Preparation

Please answer all questions

		• It will support the rebalancing of the residential and nursing care market in Gwynedd by increasing delivery from the public / not for profit sector focusing on delivering person centred outcomes for all. • It will support the provision of care closer to home by improving the accessibility of residential and nursing care. • To support sustainability of local residential and nursing care provision through a collaborative, partnership approach which will integrate with the wider spectrum of care delivered from the Penrhos site • To develop an innovative workforce model that will support the long-term health and social care needs of older people with the potential for application in other areas of North Wales • To ensure purposefully designed accommodation which will meet the care needs of older people / individuals both now and into the future

Part A Form 2: Record of potential Impacts - protected characteristics and other groups

Please answer all questions

Please complete the next section to show how this policy / proposal could have an impact (positive or negative) on the protected groups listed in the Equality Act 2010. It is important to note any opportunities you have identified that could advance or promote equality of opportunity. This includes identifying what we can do to remove barriers and improve participation for people who are under-represented or suffer disproportionate disadvantage.

Lack of evidence is not a reason for *not assessing equality impacts*. Please highlight any gaps in evidence that you have identified and explain how/if you intend to fill these gaps.

Remember to ask yourself this: If we do what we are proposing to do, in the way we are proposing to do it, will people who belong to one or more of each of the following groups be affected differently, compared to people who don't belong to those groups? For example, will they experience different outcomes, simply by reason of belonging to that/those group(s). And if so, will any different outcome put them at a disadvantage?

The sort of information/evidence that may help you decide whether particular groups are affected, and if so whether it is likely to be a positive or negative impact, could include (but is not limited to) the following:-

- population data
- information from EqIAs completed in other organisations
- staff and service users data, as applicable
- needs assessments
- engagement and involvement findings and how stakeholders have engaged in the development stages
- research and other reports e.g. Equality & Human Rights Commission, Office for National Statistics
- concerns and incidents
- patient experience feedback
- good practice guidelines
- participant (you and your colleagues) knowledge

Part A

Form 2: Record of potential Impacts - protected characteristics and other groups

Please answer all questions

Protected characteristic or group	Will people in each of these protected characteristic groups be impacted by what is being proposed? If so is it positive or negative? (tick appropriate below) *for further direction on how to complete this section please click here training vid p13-18)*	Reasons for your decision (including evidence that has led you to decide this) A good starting point is the EHRC publication: "Is Wales Fairer (2018)?" You can also visit their website here	How will you reduce or remove any negative Impacts that you have identified?
	Guidance for Completion *In the columns to the left – and for each characteristic and each section here and below – make an assessment of how you believe people in this protected group may be affected by your policy or proposal, using information available to you and the views and expertise of those taking part in the assessment. This is your judgement based upon information available to you, including relevance and proportionality. If you answered 'Yes', you need to indicate if the potential impact will be positive or negative.* ***Please note it can be both e.g. a service moving to virtual clinics: disability (in the section below) re mobility issues could be positive, but for sensory issues a potential negative impact. Both would need to be considered and recorded.*** *The information that helps to inform the assessment should be listed in this column.* ***Please provide evidence for all answers.***		

Part A

Form 2: Record of potential Impacts - protected characteristics and other groups

Please answer all questions

	Hint/tip: do not say: "not applicable", "no impact" or "regardless of…". If you have identified 'no impact' please explain clearly how you came to this decision. **NB: For all protected characteristics please ensure you consider issues around confidentiality, dignity and respect.** **For the definitions of each characteristic please click here**					
	Yes	**No**	**(+ve)**	**(-ve)**		
Age	✓		✓		It is assessed that there will be a high positive impact from this development on older people and people with dementia. The new care home on the Penrhos site will provide purpose-built, dementia friendly facilities for older people with residential, nursing and dementia care needs. The purpose designed facilities will provide a homely environment, with care delivered by appropriately skilled and trained staff. This will ensure that local people and their families can access care close to home (reducing the need to travel). Evidence includes: *8 essential features – Age Friendly Communities (WHO) – not sure what we need to include to cover this, stats from the benchmarking report?* benchmarking-the-situation-of-older-people-in-wales.pdf (gov.wales)	No negative impacts have been identified

Part A

Form 2: Record of potential Impacts - protected characteristics and other groups

Please answer all questions

Population numbers and percentages, all persons by age groups, Gwynedd UA, 2017

		%
All ages	123,742	
0 to 15 years	20,820	16.8
16 to 64 years	74,951	60.6
65 years and over	27,971	22.6
85 years and over	4,024	3.3

Source: StatsWales (WG) using 2017 MYE (ONS)

Population projections, persons aged 18 years and over, by age group, Gwynedd, 2015 to 2035

	2015	2020	2025	2030	2035
18 to 24	15,070	14,370	14,070	14,430	13,820
25 to 34	13,480	16,500	18,110	17,110	17,210
35 to 44	12,820	11,870	12,960	15,940	17,550
45 to 54	16,100	14,820	12,680	11,750	12,840
55 to 64	14,980	15,930	16,220	15,020	12,980
65 to 69	8,180	6,870	7,280	7,830	7,630
70 to 74	6,520	7,450	6,280	6,690	7,240
75 to 79	4,880	5,700	6,580	5,580	6,000
80 to 84	3,860	3,980	4,760	5,550	4,760
85 and over	3,870	4,420	5,030	6,150	7,560
Total population aged 18 and over	**99,780**	**101,910**	**103,960**	**106,050**	**107,570**

Source: Welsh Government Statistical Unit (Daffodil)
Figures may not sum due to rounding. Crown copyright 2014

Part A

Form 2: Record of potential Impacts - protected characteristics and other groups

Please answer all questions

Current Status for the population of Gwynedd

Demography

In Gwynedd, 3% of the population are aged 85 years and over.

The population of Gwynedd aged 65 to 84 years is expected to grow by 18% from 23,600 in 2016 to 25,700 in 2036.

The population of Gwynedd aged 85 years and over is expected to increase by 118%, from 4,000 in 2016 to 7,600 in 2036.

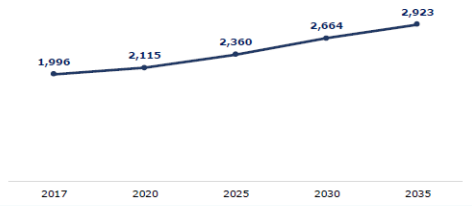
Source: Daffodil (WG)

Dementia

The number of people aged 65 years and over in Gwynedd with demetia is predicted to increase to just over 2,900 in 2035.

Number of people aged 65 years and over predicted to have dementia, Gwynedd UA, 2017 to 2035

Source: Daffodil (WG)



0.8% (202) of Dwyfor's practice population are registered as having dementia.

Dementia

People aged 30-64 predicted to have early onset dementia, and people aged 65 and over predicted to have dementia, by age and gender, projected to 2035

Show next five years

Dementia - all people Show by gender	**2017**	**2020**	**2025**	**2030**	**2035**
People aged 30-39 with early onset dementia	1	1	1	1	1
People aged 40-49 with early onset dementia	3	3	3	3	3
People aged 50-59 with early onset dementia	16	16	15	13	12
People aged 60-64 with early onset dementia	12	12	13	13	11
Total population aged 30-64 with early onset dementia	**32**	**32**	**32**	**30**	**28**
People aged 65-69 with dementia	94	86	91	98	95
People aged 70-74 with dementia	198	205	172	183	199
People aged 75-79 with dementia	296	333	383	326	350
People aged 80-84 with dementia	457	474	566	657	565
People aged 85 and over with dementia	950	1,017	1,148	1,400	1,715
Total population aged 65 and over with dementia	**1,996**	**2,115**	**2,360**	**2,664**	**2,923**

Figures may not sum due to rounding

Copyright 2014

Part A Form 2: Record of potential Impacts - protected characteristics and other groups

Please answer all questions

Disability	✓		✓		It is assessed that the new care home will have a high, positive impact on older people with disabilities, as it will meet all statutory and DDA regulations ensuring full accessibility. The improved, purpose built, dementia friendly environment and signage within the new care home will also impact people positively. Older people with a disability will have the same access to the new care home facilities as everyone else. Evidence includes: **Number of people registered as having a learning disability, by age group, Gwynedd, 2018-19** Under 16 years: 81 16-64 years: 514 65+: 71 Total: 666 **Number & percentage of people of working age who report having a disability, Wales & Betsi Cadwaladr UHB unitary authorities, 2013**	No negative impacts have been identified

Part A

Form 2: Record of potential Impacts - protected characteristics and other groups

Please answer all questions

	Number	Percentage
Wales	409,900	22.5
Isle of Anglesey	8,000	20.4
Gwynedd	12,300	17.5
Conwy	12,600	20.3
Denbighshire	13,000	24.7
Flintshire	15,700	17.3
Wrexham	14,300	17.6

Source: Office for National Statistics

Persons with learning disabilities*, by accommodation type, Betsi Cadwaladr UHB unitary authorities, 2015/16

	Total community placements	Health service accommodation (inc. hospitals/hostels etc.)	Local authority residential accommodation (staffed or unstaffed)	Private or voluntary residential accommodation (staffed or unstaffed)	Other accommodation	Total placements
Isle of Anglesey	274	3	6	29	0	312
Gwynedd	614	3	21	41	20	699
Conwy	540	18	2	69	27	656
Denbighshire	469	10	2	64	3	548
Flintshire	685	0	0	52	0	737
Wrexham	455	12	1	55	14	537

Source: StatsWales (WG)

* The register of people with learning disabilities is a voluntary register, and therefore may be an underestimate the total number of people with learning disabilities

Gender Reassignment	✓		✓		It is assessed that the proposal will have no differentiated impact on older people who have undergone a gender reassignment. The care home will be provided for people according to their individual needs and regardless of gender reassignment.	No negative impacts have been identified

Please answer all questions

					All toilets and changing facilities will be gender neutral and will include a neutral (non-gender specific) colour scheme Evidence includes: Data on gender reassignment is not routinely collected. The section below is taken from a 2009 report from the Office of National Statistics, entitled 'Trans Data Position Paper', which defines transgender as an 'umbrella term referring to individuals whose gender identity or gender expression falls outside of the stereotypical gender norms'. Currently, there are huge inconsistencies in population estimates of both transsexual people and the less clearly defined trans community. The Home Office 'Report of the interdepartmental working group on transsexual people' based on research from the Netherlands and Scotland, estimates that there are between 1,300 and 2,000 male to female and between 250 and 400 female to male transsexual people in the UK. However, Press for Change estimate the figures at around 5,000 post-operative transsexual people. Further, GIRES claims there are 6,200 people who have transitioned to a new gender role via medical intervention and approximately 2,335 full Gender Recognition Certificates have been issued to February 2009. The figures are more diverse when looking at the trans community in the UK, where estimates range from 65,000 to 300,000. To put this in context, the former figure is close to the population of Inverness, while the latter is similar to the population of Cardiff (51,000 and 305,000 respectively). The variation above demonstrates that it is important to find accurate measures of the trans population at local and national levels. The absence of official estimates makes it difficult to ascertain the level of discrimination, inequality or social exclusion faced by the trans community.	

Part A

Form 2: Record of potential Impacts - protected characteristics and other groups

Please answer all questions

Pregnancy and maternity	✓		✓		It is assessed that there will be a positive impact on this group as there will be a baby changing room available within the care home plus facilities to support those breastfeeding their babies (including for staff and visitors) and these will be fully accessible. The ethos of the care home – through staff and visitors - will be to promote intergenerational links wherever possible. Evidence includes:	No negative impacts identified

General fertility rate (GFR)*, Gwynedd and Wales, 2005-2014

	Gwynedd		Wales	
	Number of live births	GFR* (95% CI)	Number of live births	GFR* (95% CI)
2005	1,263	56 (53 to 59)	32,590	56 (55 to 57)
2006	1,332	59 (56 to 62)	33,623	57 (57 to 58)
2007	1,254	56 (53 to 59)	34,392	59 (58 to 59)
2008	1,276	57 (54 to 60)	35,644	61 (60 to 61)
2009	1,338	60 (56 to 63)	34,938	60 (59 to 60)
2010	1,272	57 (54 to 60)	35,945	62 (61 to 62)
2011	1,319	60 (56 to 63)	35,604	61 (61 to 62)
2012	1,327	60 (57 to 63)	35,238	61 (61 to 62)
2013	1,229	56 (53 to 60)	33,742	59 (58 to 60)
2014	1,175	54 (51 to 58)	33,541	59 (58 to 60)

Produced by Public Health Wales Observatory, using PHB & MYE (ONS)
*GFR is the number of live births per 1,000 females aged 15-44
CI=Confidence Interval

Part A Form 2: Record of potential Impacts - protected characteristics and other groups

Please answer all questions

<table>
<tr>
<td>Race</td>
<td>✓</td>
<td></td>
<td>✓</td>
<td></td>
<td>It is assessed that the proposal will have no differentiated impact on the quality of services that older people from ethnic minorities are likely to receive. The care home will be provided for all older people based on and tailored to each individual's needs regardless of ethnic minority.

<u>Evidence includes:</u>
<table>
<tr><th></th><th>People who say they are from a white background</th><th>People who say they are from a non-white background</th><th>Percentage of population from a non-white background</th></tr>
<tr><td>Isle of Anglesey</td><td>68,700</td><td>800</td><td>1.1</td></tr>
<tr><td>Gwynedd</td><td>115,400</td><td>5,700</td><td>4.7</td></tr>
<tr><td>Conwy</td><td>112,300</td><td>2,000</td><td>1.8</td></tr>
<tr><td>Denbighshire</td><td>91,900</td><td>2,200</td><td>2.3</td></tr>
<tr><td>Flintshire</td><td>150,000</td><td>3,900</td><td>2.6</td></tr>
<tr><td>Wrexham</td><td>131,800</td><td>4,100</td><td>3.0</td></tr>
</table>
Source: StatsWales (WG)</td>
<td>No negative impacts identified</td>
</tr>
<tr>
<td>Religion, belief and non-belief</td>
<td>✓</td>
<td></td>
<td>✓</td>
<td></td>
<td>It is assessed that this proposal will have no differentiated impact on older people who are of different religions / beliefs / non-belief.

The new care home is provided for all older people based on and tailored to each individual's needs.

There will be access to a quiet room for reflection / prayer and this will be available for all including staff and families.

<u>Evidence includes:</u>

Figure 17: Religious denominations, Betsi Cadwaladr UHB unitary authorities, 2011</td>
<td>No negative impacts have been identified</td>
</tr>
</table>

Part A

Form 2: Record of potential Impacts - protected characteristics and other groups

Please answer all questions

	All categories: Religion	*Christian*	*Buddhist*	*Hindu*	*Jewish*	*Muslim*	*Sikh*	*Other religion*	*No religion*	*Religion not stated*
Isle of Anglesey	69,751	45,400	165	45	40	250	43	257	17,797	5,754
Gwynedd	121,874	72,503	426	238	55	1,378	39	637	36,163	10,435
Conwy	115,228	74,506	347	206	62	583	17	478	30,017	9,012
Denbighshire	93,734	60,129	266	167	32	469	8	345	25,132	7,186
Flintshire	152,506	101,298	344	158	70	482	29	362	38,726	11,037
Wrexham	134,844	85,576	351	504	58	860	87	310	36,927	10,171

Source: Census 2011 (ONS)

Sex	✓		✓		It is assessed that the proposal will have no differentiated impact on older people based on gender. The care home will be provided for all older people based on and tailored to each individual's needs. Where appropriate, consideration will be given to accommodating couples in double rooms, if this is requested. Both BCU and GC adhere to organisational policies regarding gender discrimination and pay to ensure equity. <u>Evidence includes</u>:	No negative impacts have been identified

Part A

Form 2: Record of potential Impacts - protected characteristics and other groups

Please answer all questions

<table>
<tr><td></td><td></td><td></td><td></td><td></td><td>
Population numbers, males and females, by age groups, Gwynedd UA, 2017
<table>
<tr><th></th><th>Males</th><th>Females</th></tr>
<tr><td>All ages</td><td>61,335</td><td>62,407</td></tr>
<tr><td>0 to 15 years</td><td>10,657</td><td>10,163</td></tr>
<tr><td>16 to 64 years</td><td>37,695</td><td>37,256</td></tr>
<tr><td>65 years and over</td><td>12,983</td><td>14,988</td></tr>
<tr><td>85 years and over</td><td>1,364</td><td>2,660</td></tr>
</table>
Source: StatsWales (WG) using 2017 MYE (ONS)
</td><td></td></tr>
<tr><td>Sexual orientation</td><td>✓</td><td></td><td>✓</td><td></td><td>
It is assessed that there will be no differentiated impact on older people based on sexual orientation.

The care home will be provided for all older people based on and tailored to each individual’s needs. It strives to be a non-discriminatory service and is working towards the Children’s Charter.

<u>Evidence includes:</u>

Sexual identity by status, UK, Wales and North Wales unitary authorities, 2014
<table>
<tr><th></th><th>Heterosexual/ Straight</th><th>Gay/Lesbian/ Bisexual</th><th>Don't know/Refusal</th><th>No response</th><th>Other</th></tr>
<tr><td>United Kingdom</td><td>92.8</td><td>1.6</td><td>3.9</td><td>1.4</td><td>0.3</td></tr>
<tr><td>Wales</td><td>93.9</td><td>1.5</td><td>3.0</td><td>1.1</td><td>0.4</td></tr>
<tr><td>Isle of Anglesey</td><td>96.6</td><td>*</td><td>1.7</td><td>0.6</td><td>*</td></tr>
<tr><td>Gwynedd</td><td>96.4</td><td>*</td><td>1.4</td><td>1.3</td><td>*</td></tr>
<tr><td>Conwy and Denbighshire</td><td>90.1</td><td>1.3</td><td>7.2</td><td>1.1</td><td>*</td></tr>
<tr><td>Flintshire and Wrexham</td><td>87.4</td><td>1.0</td><td>9.7</td><td>1.5</td><td>*</td></tr>
</table>
Source: StatsWales (WG)
</td><td>No negative impacts identified</td></tr>
</table>

Part A

Form 2: Record of potential Impacts - protected characteristics and other groups

Please answer all questions

Marriage and civil Partnership (Marital status)	✓		✓		It is assessed that there will be no differentiated impact on older people based on their marital status. The care home will be provided for all older people based on and tailored to each individual's needs. Access to the care home is open and transparent and equal to all without bias or judgement. <u>Evidence includes:</u> **Census 2011 - Marital and civil partnership status, unitary authorities in North Wales – All usual residents aged 16 years and over**	No negative impacts have been identified

	All categories: Marital and civil partnership status	*Single (never married or never registered a same-sex civil partnership)*	*Married*	*In a registered same-sex civil partnership*	*Separated (but still legally married or still legally in a same-sex civil partnership)*	*Divorced or formerly in a same-sex civil partnership which is now legally dissolved*	*Widowed or surviving partner from a same-sex civil partnership*
Isle of Anglesey	57,890	17,245	28,385	90	1,210	5,694	5,266
Gwynedd	100,923	36,781	44,330	140	1,906	9,049	8,717
Conwy	96,102	27,729	46,379	197	2,229	10,215	9,353
Denbighshire	76,781	23,413	36,950	138	1,790	8,043	6,447
Flintshire	123,862	37,581	62,308	167	2,770	11,962	9,074
Wrexham	109,026	35,546	52,154	151	2,179	10,877	8,119

Part A Form 2: Record of potential Impacts - protected characteristics and other groups

Please answer all questions

Socio Economic Disadvantage	✓		✓		It is assessed that the proposal will have a positive impact on those older people who are at a socio economic disadvantage. The care home will deliver residential and nursing care to older people and those with dementia who live locally, in purpose built, modern facilities. This will positively impact older people and their families in deprived areas by providing care closer to home, reducing the need for travel and therefore generating less expense. <u>Evidence includes</u>	

Employment and unemployment (Oct 2021-Sep 2022)

	Gwynedd (Numbers)	Gwynedd (%)	Wales (%)	Great Britain (%)
All People				
Economically Active†	60,800	77.9	75.9	78.4
In Employment†	59,900	76.7	73.4	75.5
Employees†	50,400	65.9	64.5	66.0
Self Employed†	8,800	10.0	8.5	9.2
Unemployed (Model-Based)§	1,700	2.8	3.2	3.7
Males				
Economically Active†	31,600	76.4	79.2	82.2
In Employment†	31,200	75.2	76.3	79.0
Employees†	25,000	62.0	64.4	67.0
Self Employed†	5,800	12.4	11.6	11.8
Unemployed§	!	!	3.6	3.7
Females				
Economically Active†	29,200	79.5	72.6	74.7
In Employment†	28,700	78.3	70.6	72.0
Employees†	25,400	70.2	64.7	65.0
Self Employed†	3,000	7.3	5.5	6.7
Unemployed§	!	!	2.8	3.6

Source: ONS annual population survey
! Estimate is not available since sample size is disclosive (see definitions)
† - numbers are for those aged 16 and over, % are for those aged 16-64
§ - numbers and % are for those aged 16 and over. % is a proportion of economically active

Part A Form 3: Record of Potential Impacts – Human Rights and Welsh Language

Please answer all questions

Human Rights:

Do you think that this policy will have a positive or negative impact on people's human rights? For more information on Human Rights, see our intranet pages at: http://howis.wales.nhs.uk/sitesplus/861/page/42166 and for additional information the Equality and Human Rights Commission (EHRC) Human Rights Treaty Tracker https://humanrightstracker.com.

The Articles (Rights) that may be particularly relevant to consider are:-

- *Article 2 Right to life*
- *Article 3 Prohibition of inhuman or degrading treatment*
- *Article 5 Right to liberty and security*
- *Article 8 Right to respect for family & private life*
- *Article 9 Freedom of thought, conscience & religion*

Please also consider these United Nations Conventions:

UN Convention on the Rights of the Child

UN Convention on the rights of people with disabilities.

UN Convention on the Elimination of All Forms of Discrimination against Women

Part A Form 3: Record of Potential Impacts – Human Rights and Welsh Language

Please answer all questions

Will people's Human Rights be impacted by what is being proposed? If so is it positive or negative? (tick as appropriate below)				**Which Human Rights do you think are potentially affected**	**Reasons for your decision (including evidence that has led you to decide this)**	**How will you reduce or remove any negative Impacts that you have identified?**
Yes	**No**	**(+ve)**	**(-ve)**			
✓		✓		*Article 3 - Prohibition of inhuman or degrading treatment*	Providing new modern, purpose designed, dementia friendly care home accommodation with single rooms which are appropriately staffed with access to walking routes and an outdoor garden will ensure that older people with care needs and those with dementia are treated with dignity at all times.	Constantly strive to achieve full staffing with appropriate skills

Part A Form 3: Record of Potential Impacts – Human Rights and Welsh Language

Please answer all questions

Welsh Language:

There are 2 key considerations to be made during the development of a policy, project, programme or service to ensure there are no adverse effects and / or a positive or increased positive effect on:

Welsh Language	Will people be impacted by what is being proposed? If so is it positive or negative? (tick appropriate below)				Reasons for your decision (including evidence that has led you to decide this)	How will you reduce or remove any negative Impacts that you have identified?
	Yes	No	(+ve)	(-ve)		
Opportunities for persons to use the Welsh language	-	√	√	-	It is anticipated that the impact of this development will be positive in terms of the Welsh language. The care home will actively support the Welsh Language by increasing the 'active offer' of care delivery through the medium of Welsh within the new home. Most staff working in the care home are likely to be bilingual and older people and their families will have the opportunity to use the Welsh language, as they choose. In those instances where a Welsh speaking member of staff is not available, there will be opportunities to find another Welsh speaking member of staff where required. All signage within the new care home will be bilingual with Welsh first (on top / on the left).	No negative impacts have been identified.

Please answer all questions

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<td>Documentation used in the care home will be provided in the family's language of choice. Braille signage, hearing loops will be available as well as easy read documentation.

<u>Evidence includes</u>:

Persons aged 16 years and over who speak Welsh, 2018-19
<table>
<tr><th></th><th>Number</th><th>%</th></tr>
<tr><td>Wales</td><td>463,670</td><td>18</td></tr>
<tr><td>Betsi Cadwaladr UHB</td><td>187,960</td><td>33</td></tr>
<tr><td>Isle of Anglesey</td><td>30,690</td><td>53</td></tr>
<tr><td>Gwynedd</td><td>68,200</td><td>66</td></tr>
<tr><td>Conwy</td><td>36,320</td><td>37</td></tr>
<tr><td>Denbighshire</td><td>23,420</td><td>30</td></tr>
<tr><td>Flintshire</td><td>13,950</td><td>11</td></tr>
<tr><td>Wrexham</td><td>15,380</td><td>14</td></tr>
</table>
Source: StatsWales (WG) using National Survey for Wales</td>
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</tr>
<tr>
<td>Treating the Welsh language no less favourably than the English language</td>
<td>-</td>
<td>√</td>
<td>√</td>
<td>-</td>
<td>It is anticipated that the Welsh language will have equal parity with the English language and thus treated no less favourably.

Both Gwynedd Council's Welsh Language policy and BCU's Welsh Language policy promote the importance and parity of the Welsh language.</td>
<td>No negative impacts have been identified.</td>
</tr>
</table>

Part A Form 4: Record of Engagement and Consultation

Please answer all questions

Please record here details of any engagement and consultation you have undertaken. This may be with workplace colleagues or trade union representatives, or it may be with stakeholders and other members of the community including groups representing people with protected characteristics. They may have helped to develop your policy / proposal, or helped to identify ways of reducing or removing any negative impacts identified.

We have a legal duty to engage with people with protected characteristics under the Equality Act 2010. This is particularly important when considering proposals for changes in services that could impact upon vulnerable and/or disadvantaged people.

What steps have you taken to engage and consult with people who share protected characteristics and how have you done this? Consider engagement and participatory methods. *for further direction on how to complete this section please click here training vid p13-18)*	A project engagement plan is routinely considered by the Stakeholder / Engagement & Communications Sub-group. This will include a focus on people who share protected characteristics. In brief, the plan will comprise: • Gathering existing engagement info / data • Stakeholder mapping • Working in partnership sharing data • Developing a plan for communications • Devising an initial smart survey to gather views • Information events at regular intervals to share info and gather feedback with public / key stakeholders • Pull together themes from feedback into an engagement report to share with internal and external people • Identify / agree key changes to be made
Have any themes emerged? Describe them here.	Not undertaken yet – to be confirmed at later date
If yes to above, how have their views influenced your work/guided your policy/proposal, or changed your recommendations?	To be confirmed at later date

For further information and help, please contact the Corporate Engagement Team – see their intranet page at:- http://howis.wales.nhs.uk/sitesplus/861/page/44085

Part B Form 5: Summary of Key Findings and Actions

Please answer all questions

1. What has been assessed? (Copy from Form 1) *for further direction on how to complete this section please click here training vid p13-18)*	The capital business case for the development of a new build (replacement) residential care home and care home with nursing at the Penrhos site

2. Brief Aims and Objectives: (Copy from Form 1)	The proposal is to provide permanent, modern, fit for purpose residential and nursing care accommodation on the Penrhos site. The investment objectives are: • To support the rebalancing of the residential and nursing care market (for the Gwynedd area) by increasing delivery from the public / not for profit sector focused on delivering person centred outcomes for all. • To support the provision of care closer to home by improving the accessibility of residential and nursing care, ensuring provision of services in the Welsh language. • To support sustainability of local residential and nursing care provision through a collaborative, partnership approach which will integrate with the wider spectrum of care delivered from the Penrhos site. • To develop an innovative workforce model that will support the long-term health and social care sector with the potential for application in other areas of North Wales and create opportunities for training through Welsh Language. • To ensure purposefully designed accommodation which will meet the care needs of individuals both now and into the future. • To deliver value for money through the efficient use of resources and delivery of environmentally sensitive accommodation that is carbon neutral.

Part B Form 5: Summary of Key Findings and Actions

Please answer all questions

From your assessment findings (Forms 2 and 3):

3a. Could any of the protected groups be negatively affected by your policy or proposal? **Guidance: This is as indicated on form 2 and 3**	Yes	No √
3b. Could the impact of your policy or proposal be discriminatory under equality legislation? **Guidance: If you have completed this form correctly and reduced or mitigated any obstacles, you should be able to answer 'No' to this question.**	Yes	No √
3c. Is your policy or proposal of high significance? **For example, does it mean changes across the whole population or Health Board, or only small numbers in one particular area?** High significance may mean: - The policy requires approval by the Health Board or subcommittee of - The policy involves using additional resources or removing resources. - Is it about a new service or closing of a service? - Are jobs potentially affected? - Does the decision cover the whole of North Wales - Decisions of a strategic nature: In general, strategic decisions will be those which effect how the relevant public body fulfils its intended statutory purpose (its functions in regards to the set of powers and duties that it uses to perform its	Yes	No √

Part B Form 5: Summary of Key Findings and Actions

Please answer all questions

remit) over a significant period of time and will not include routine 'day to day' decisions. GUIDANCE: If you have identified that your policy is of high significance and you have not fully removed all identified negative impacts, you may wish to consider sending your EqIA to the Equality Impact Assessment Scrutiny Group via the Equalities Team/			
4. Did your assessment findings on Forms 2 & 3, coupled with your answers to the 3 questions above indicate that you need to proceed to a Full Impact Assessment?	Yes	No √	
5. If you answered 'no' above, are there any issues to be addressed e.g. reducing any identified minor negative impact?	Yes	√	
6. Are monitoring arrangements in place so that you can measure what actually happens after you	Yes √?	No	
	How is it being monitored?	Once the scheme has been completed and the care home will be operational, current Gwynedd Council monitoring arrangements for care homes will be adopted and adhered to.	

Part B Form 5: Summary of Key Findings and Actions

Please answer all questions

implement your policy or proposal?		24 months after opening, a post project evaluation exercise will be undertaken by the Project Board to assess whether the Project's objectives and outcomes have been met.
	Who is responsible?	Dylan Owen, Corporate Director – Adult Services, Cyngor Gwynedd
	What information is being used?	The care home will collect its own activity / service data and Estates will record building related information in accordance with the Capital Manual. Satisfaction surveys will be conducted with users, their families and staff to gather feedback on the new facilities.
	When will the EqIA be reviewed?	The EQIA will be reviewed at a number of stages following submission of the strategic outline case (SOC) – at outline business case (OBC) stage and full business case (FBC) and then post project implementation (24 months);

7. Where will your policy or proposal be forwarded for approval?	Through internal governance within Gwynedd Council (Cabinet) and BCUHB (West IHC, Exec Team, PFIG, Board) and then Welsh Government.

8. Names of all parties involved in undertaking this Equality Impact Assessment – **please note EqIA should be**	Name	Title/Role
	Christine Rudgley	BCUHB West Area Lead for Operational Improvement
	Meinir Owen	Cyngor Gwynedd Senior Projects Practitioner, Corporate Support Dept

Part B Form 5: Summary of Key Findings and Actions

Please answer all questions

undertaken as a group activity Senior sign off prior to committee approval:	Karen Owen	BCUHB Engagement Officer (West)
	Jane Trowman	BCUHB Assistant Director Care Homes Support & CHC Commissioning
Please Note: The Action Plan below forms an integral part of this Outcome Report		

Action Plan

This template details any actions that are planned following the completion of EqIA including those aimed at reducing or eliminating the effects of potential or actual negative impact identified.

	Proposed Actions **Please document all actions to be taken as a result of this impact assessment here. Be specific and use SMART actions. Please ensure these are built in to the policy, strategy, project or service change.**	Who is responsible for this action?	When will this be done by?
1. If the assessment indicates significant potential negative impact such that you cannot proceed, please give reasons and any alternative action(s) agreed:	None	NA	NA

Part B Form 5: Summary of Key Findings and Actions

Please answer all questions

	Proposed Actions **Please document all actions to be taken as a result of this impact assessment here. Be specific and use SMART actions. Please ensure these are built in to the policy, strategy, project or service change.**	Who is responsible for this action?	When will this be done by?
2. What changes are you proposing to make to your policy or proposal as a result of the EqIA?	None	NA	NA
3a. Where negative impacts on certain groups have been identified, what actions are you taking or are proposed to reduce these impacts? Are these already in place?	Not applicable	NA	NA
3b. Where negative impacts on certain groups have been identified, and you are proceeding without reducing them, describe here why you believe this is justified.	Not applicable	NA	NA
4. Provide details of any actions taken or planned to advance equality of opportunity as a result of this assessment.	None		