Equality and Welsh Language Impact Assessment (EWLIA)

Item 2.3
Appendix 2

If you're leading on a policy, service change or initiative, we recommend that you read our EWLIA Guidance here before completing this form.

Section 1: Title and summary

Title of policy or initiative and a brief description of its aims	An assessment of the potential equality, human rights and Welsh language impact arising from a temporary pause within the Welsh Gender Service surgical pathway The assessment should consider the impact on patients of the decision taken by the JCC to escalate the Welsh Gender Service (WGS) into level 3 escalation resulting in a pause in the surgical referrals from the Welsh Gender Service to providers within NHS England and a pause to surgery for patients currently on the waiting list. The pause is until necessary assurances can be gained on the appropriateness of the high number of clinical referrals by the WGS and the low numbers who proceed through the whole surgical pathway. This is alongside several complaints having been raised about the service to the JCC. The aim of the pause is to commission an independent review to provide assurances around the process to safeguard patients on this pathway to ensure the decision-making re the surgical pathway is supported by best evidence-based practice. The purpose is to identify the likely impacts on individuals awaiting access to gender-affirming surgical interventions, understand whether any protected groups may be disproportionately affected, and set out appropriate actions to mitigate adverse impacts while the pause is in place. The assessment aims to: • Assess the impact of pausing new referrals for surgery. • Assess the impact of pausing surgical assessments and associated decision-making. • Assess the impact of pausing all scheduled surgery, including cancelled or deferred procedures.

	• Identify whether the pause creates or increases barriers for people with protected characteristics or socio-economic disadvantage. • Set out mitigation, communication, and monitoring arrangements to reduce avoidable harm and maintain transparency. **Evidence and data limitations.** At the time of assessment, information is available regarding the nature of the pause and the individuals known to be affected. However, complete demographic information relating to age, ethnicity, disability, socio-economic circumstances and other protected characteristics is not yet available for the full cohort. This assessment therefore identifies likely impacts using currently available information and professional judgement and will be updated as further cohort and demographic data becomes available through the clinical review process. The absence of complete demographic data limits the ability to determine the full extent of any disproportionate impact on particular groups at this stage.

Section 2: Understanding the Potential Impact on Equality

This section is about understanding where the policy or initiative may have a potential impact on the protected characteristic groups. Note briefly what groups could be affected and a short summary of the potential impact on each group. Please note, there may be groups of which there is no impact.

The protected characteristic groups are: Age; Disability; Gender Reassignment; Marriage and Civil Partnership; Pregnancy and Maternity; Race; Religion or Belief; Sex; Sexual Orientation; Carers; Socio-Economic.

Protected Characteristic	Potential Impact	Assessment
Age	Younger and older adults may experience the effects of delay differently, including prolonged distress, changing clinical needs or increased	Potential negative impact. Obtain and review actual age data for people awaiting surgery and those awaiting progression into the surgical

Protected Characteristic	Potential Impact	Assessment
	complexity while awaiting referral, assessment or surgery. The actual age profile of people affected is not yet sufficiently established to determine whether any age group is disproportionately represented.	pathway. Monitor for disproportionate impact and ensure clear communication, review points and escalation where clinical circumstances change. CVUHB have processes to support individuals affected and there is clear signposting for mental health support. Currently there is detail through the Cardiff and the Vale webpage. The Welsh Gender Service Psychology team will be accessible to any individuals impacted by the decision to currently pause the pathway, all local Health Boards have been informed of the decision who are informing local gender services and GP's.
Disability	Disabled people, including people with mental health conditions, neurodivergence, sensory impairments, learning disabilities or mobility needs, may experience increased anxiety, difficulty navigating changes to the pathway, or additional communication and access barriers during the pause. Cohort of patients impacted from current evidence are potentially more likely to have existing mental health needs and may be neurodiverse. This may increase the potential impact of uncertainty, changes to planned care and disruption	Potential negative impact. Mitigation will include reasonable adjustments, accessible and bilingual information, alternative formats, advocacy and support, and clear clinical, safeguarding and wellbeing escalation routes. Affected patients should be offered and directed if appropriate to mental health and wellbeing support and communication should be tailored to individual needs. Disability data should be reviewed as the affected cohort is established, including available information on mental health needs and neurodivergence,

Protected Characteristic	Potential Impact	Assessment
	to established pathways for some individuals, and reinforces the need for communication and support to be tailored to individual needs. There is also potential for a greater negative and differential impact if, following individual clinical reassessment, patients with existing mental health needs and/or neurodivergence are disproportionately represented among those who are no longer considered clinically appropriate to proceed through the surgical pathway.	to better understand the nature and scale of any differential impact and identify whether further targeted mitigation is required. JCC will ensure this is provided through the support mechanisms in the Welsh Gender Service Mental health needs or neurodivergence should not in themselves be assumed to indicate that a patient is unsuitable to proceed; any decision must be based on individual clinical assessment and the relevant clinical criteria. An equality assessment should therefore be undertaken using the available baseline information at the outset of the review and repeated once the clinical review is complete. This should compare outcomes across the affected cohort to identify whether patients with disabilities, including mental health conditions and neurodivergence, have been disproportionately affected by the review or its outcomes. Any identified differential or unintended impact should be examined, understood and inform further mitigation or action where required.

Protected Characteristic	Potential Impact	Assessment
Gender Reassignment	This is the primary protected characteristic affected. The impact may be further amplified where Gender Reassignment intersects with disability, race/ethnicity, socio-economic disadvantage or age, and where individuals experience multiple and overlapping forms of disadvantage. Pausing referrals, assessments or surgery may prolong gender dysphoria, delay access to clinically indicated care and adversely affect mental wellbeing. Delays to clinically indicated treatment may also contribute to worsening gender dysphoria, deterioration in mental health, increased distress, crisis presentation or other adverse effects associated with prolonged waiting times. It may also reduce confidence and trust not only in the Welsh Gender Service pathway but in NHS services more generally, with a potential risk that some trans and non-binary people become less likely to seek healthcare when needed.	Significant potential negative impact. Mitigation should include clear and timely individual communication to those directly impacted with clear transparent rationale, including regular updates about the review at regular intervals and timescales. In the communication detail reference should include the reason for re assessing the pathway including the need to ensure this provides assurances this is safe evidence based effective and clinically appropriate. Those who have had surgery cancelled at very short notice will be reviewed first and if the decision is for this to proceed appropriate every attempt will be made to ensure preservation of the pathway position. Clinical prioritisation and escalation arrangements; and active engagement and communication with service-user representatives, support groups and relevant networks will be ongoing throughout the pause. JCC has written to all Health Board Medical Directors across Wales to ensure awareness of the pause and associated arrangements. It was requested through the

Protected Characteristic	Potential Impact	Assessment
		Health Boards information should be shared with Local Gender teams and GP's. Patinet advocacy bodies such as Llais have also been notified to ensure consistent support, communication and awareness of the potential impact on affected patients. Assurance will continue to be sought from the Health Boards on how Medical Directors are linking with local gender teams and primary care and wider services to maintain confidence and support of the patinet cohort and access to care.
Marriage and Civil Partnership	No specific differential impact has currently been identified on the basis of marriage or civil partnership. Partners may nevertheless experience indirect practical or emotional effects where an individual's care plan is changed.	Neutral at present. Keep under review as more information about the affected cohort and support needs becomes available.
Pregnancy and Maternity	Delays to assessment or surgery may affect wider reproductive planning, fertility preservation discussions or the timing of treatment decisions for some individuals.	Potential negative impact where delays affect time-sensitive choices. It is recognised that many affected patients have already been on the surgical pathway for a significant period and that existing waiting times are lengthy. The current pause is intended to be limited in duration and, for patients

Protected Characteristic	Potential Impact	Assessment
		who are reassessed and deemed clinically appropriate to proceed, the surgical pathway will go ahead. The additional delay attributable specifically to the pause is therefore expected to be minimal in the context of the overall pathway. However, individual circumstances may change during this period, including pregnancy or plans relating to pregnancy and fertility, which may affect the timing or appropriateness of treatment. Mitigation should therefore include access to appropriate clinical advice, individual review and clear escalation routes where circumstances change or where a delay could affect time-sensitive reproductive or maternity-related choices.
Race/Ethnicity	People from minority ethnic communities may experience additional barriers if information is not culturally appropriate, accessible through trusted routes or available with interpretation/translation where required. The ethnicity profile of the affected cohort is not yet sufficiently established to assess differential impact.	Potential negative impact. Review actual ethnicity data when available and provide culturally sensitive, bilingual and accessible communication, interpretation and translation as required. Targeted engagement should be considered if the data identifies disproportionate impact.
Religion or Belief	Some individuals may require sensitive communication that	Neutral to potential negative impact if communication is

Protected Characteristic	Potential Impact	Assessment
	recognises religion or belief, personal circumstances, family relationships and support networks while decisions are paused.	not person-centred. Respect individual preferences, privacy and confidentiality and keep any differential impact under review. Given the significant public interest in this area, including coverage through social and wider media, there is potential for this to have an additional negative impact on the wellbeing of affected individuals, including increased anxiety, distress or uncertainty. Timely, clear and factual communication should therefore be provided to affected patients to ensure they have accurate information about the pause, the review and what this means for their individual care, helping to mitigate the potential impact of speculation, misinformation or wider media coverage. Clear communication strategies are in place and any misinformation which is brought to the attention of the JCC will be challenged and a rebuttal issued.
Sex	The effect of the pause may differ according to the type of surgery sought and individual clinical circumstances. Different surgical pathways may have different sex profiles; however, verified cohort data is required before any conclusion can be drawn	Potential negative impact. Obtain and review actual numbers, not percentages alone, by relevant surgical pathway and sex where appropriate and lawful. Ensure clinical prioritisation is based on individual need and evidence rather than assumptions.

Protected Characteristic	Potential Impact	Assessment
	about differential impact by sex assigned at birth.	
Sexual Orientation	No differential impact is anticipated solely on the basis of sexual orientation; however, some individuals may experience compounded barriers where sexual orientation intersects with gender identity, disability, race, socio-economic disadvantage or other characteristics.	Neutral to potential negative impact where intersectional barriers are present. Communications, engagement and support should be inclusive, confidential and responsive to identified needs.
Carers	Carers, partners, family members and other informal supporters may experience additional emotional, practical or financial pressure while an individual's assessment or surgery is delayed. They may also need clear information about how to support the person affected while maintaining patient confidentiality. The impact may be greater for carers and supporters of patients who, following individual clinical reassessment, are no longer considered clinically appropriate to proceed with planned surgery, particularly where a surgery date had already been arranged. This may result in additional emotional distress and practical or financial consequences for the patient and those supporting them, including where arrangements have already	Potential negative indirect impact. Include carers and supporters in communication and support arrangements where appropriate and with the individual's consent; signpost to support services and monitor practical or wellbeing impacts.

Protected Characteristic	Potential Impact	Assessment
	been made around the anticipated surgery and recovery period. Appropriate information, support and signposting should therefore be available to patients and, where appropriate and with the patient's consent, their carers or supporters. The impact on carers should also be considered as part of the equality assessment undertaken following completion of the clinical review.	
Socio-Economical	The pause may create or worsen financial pressures, for example where individuals have already incurred travel, accommodation or other costs connected with planned appointments or surgery, or where delays create additional travel or time-off-work costs.	Potential negative impact, particularly for people already experiencing socio-economic disadvantage. Work with the provider to ensure affected individuals are told about any reimbursement arrangements for eligible costs and are signposted to appropriate practical and financial support. Monitor whether financial barriers are affecting access or engagement.

Public Sector Equality Duty (Equality Act 2010)

In considering the temporary pause to elements of the Welsh Gender Service surgical pathway, the JCC has had due regard to its duties under Section 149 of the Equality Act 2010. Particular consideration has been given to the impact on people with the protected characteristic of Gender Reassignment, as this assessment identifies this group as being most directly affected by the proposed pause.

Eliminating discrimination, harassment and victimisation: The pause is not intended to disadvantage people on the basis of any protected characteristic. However, the assessment recognises that people with the protected characteristic of Gender Reassignment are likely to be disproportionately affected. The identified mitigations are intended to minimise the risk of discriminatory outcomes.

Advancing equality of opportunity: The assessment recognises that delays may create additional barriers for trans and non-binary people and for those who also experience disadvantage because of disability, socio-economic factors, race or other characteristics. Mitigating actions are intended to reduce disadvantage, ensure equitable access to information and support, and monitor whether further action is required.

Fostering good relations: The assessment recognises that the pause may affect confidence and trust among affected individuals and communities. Clear, respectful and transparent communication, engagement with service users and representative organisations, and ongoing review of impacts are intended to promote understanding and maintain constructive relationships during the period of the pause.

Now, based on the above, select whether your policy or initiative would have a positive, neutral or negative impact on the protected characteristics identified. Then place each group under the relevant categories:

Positive impact	Neutral impact	Negative impact
The overall impact identified from the pause itself on the protected characteristics is negative. The overarching quality benefit is the pause, and the review of the pathway will provide assurance that assessment and referral pathways are safe clinically appropriate and evidence based.	Marriage and Civil Partnership; Religion or Belief where individual preferences are respected and communication remains person-centred.	Gender Reassignment; Disability; Age; Pregnancy and Maternity; Race/Ethnicity; Sex; Sexual Orientation where intersectional barriers are present; Carers and Socio-Economic factors where delays increase practical, financial or wellbeing pressures.

Section 3: Strengthening or mitigating the identified impact on Equality

Consider what actions need to be taken to strengthen any positive impact of your policy/initiative (Green), or what actions are needed to avoid or mitigate any negative impact (Red). If no action is required (i.e. groups fall under neutral or no impact), you should leave blank. Please seek support by emailing CTM.Equality.WelshLanguageImpact@wales.nhs.uk if necessary.

Actions to be taken	Completion date	Responsible person

This EWLIA will remain live throughout the urgent clinical review and will be updated as verified cohort, demographic and pathway information becomes available. It will be reviewed following receipt of clinical review findings, material changes to the pause, significant incidents, emerging equality concerns, or the availability of new cohort or demographic data. Actions to avoid or mitigate identified negative impacts include: • Establish and maintain an accurate cohort of people affected by the pause, including those awaiting surgery and those awaiting progression into the surgical pathway. Analyse protected-characteristic and socio-economic data where available and lawful, using absolute numbers alongside percentages where this improves understanding of impact and proportionality. • Undertake an equality assessment at the outset of the clinical review, using the available baseline cohort and protected-characteristic information, and undertake a further equality assessment following completion of the review. The post-review assessment should examine the outcomes of the review across protected-characteristic groups, including those who are considered appropriate to proceed and those who are not, to identify whether the review or resulting decisions have inadvertently or disproportionately adversely impacted any group. Any differential impact identified should be examined, understood and used to inform further mitigation or action where required. • Publish and maintain clear information explaining the reason for the pause, which parts of the pathway are affected, what is known and not yet known, review arrangements/timescales where available, support routes and escalation arrangements. • Cardiff and Vale UHB, as provider, to communicate directly with affected	Ongoing throughout the pause and urgent clinical review; update at agreed review points and whenever material new evidence becomes available.	JCC / Cardiff and Vale UHB, with named leads to be confirmed for each action. Cardiff and the Vale/ JCC JCC JCC/ Cardiff and the Vale

individuals. Where people contact the JCC, they should be appropriately signposted to the provider for individual information, advice and support. JCC to seek assurance that patients are being kept informed and supported.		Cardiff and the Vale
• Ensure communication arrangements recognise the possibility that affected patients may become aware of developments through media or other public sources before receiving individual correspondence, and provide timely access to accurate information, advice and support.		JCC/ Cardiff and the Vale supported by Local Health Boards/ Local Gender teams and GP's
• Provide direct individual communication where appointments, assessments or surgery are postponed or cancelled, including what this means for the individual's pathway position.		Cardiff and the Vale
• Ensure patients already on the surgical pathway who have been paused are supported and following the review are deemed appropriate for surgery are prioritised on the surgical pathway unless an individual clinical prioritisation decision requires otherwise.		JCC / Cardiff and the Vale
• Maintain clear clinical, safeguarding and wellbeing escalation routes for people whose circumstances materially change during the pause, including provider incident-response arrangements and available helpline/support routes.		Cardiff and the Vale
• Ensure communications are accessible, bilingual and in plain language, with interpretation, translation, reasonable adjustments and alternative formats available as required.		Cardiff and the Vale
• Undertake active engagement with affected individuals, service-user representative groups, advocacy and support organisations, and relevant NHS Wales networks. This should include consideration of NHS Wales Equality Leads and organisational staff networks where appropriate.		JCC / Cardiff and the Vale

• Recognise the potential wider loss of trust in NHS services among trans and non-binary people. Seek assurance on how Medical Directors are linking with primary care and wider services to support continued access to healthcare and reduce the risk of people disengaging from care. • Consider carers and supporters in communication and support arrangements, subject to consent and confidentiality. • Address socio-economic impacts, including ensuring affected people are informed of any provider reimbursement arrangements for eligible costs already incurred and signposted to practical/financial support. • Clarify and accurately describe the source, nature and number of complaints/concerns relied upon in decision-making, distinguishing affected patients from wider public or media concerns. • Review the pause regularly to ensure it remains necessary, objectively justified, proportionate and time-limited. • Monitor for misinformation or inaccurate public reporting that may adversely affect affected patients and, where appropriate, provide timely factual clarification through agreed communication routes.		JCC / All Welsh Health Boards Cardiff and the Vale Cardiff and the Vale JCC/ Cardiff and the Vale JCC/ Cardiff and the Vale/ Local Health Boards

Section 4: Understanding the potential impact on the Welsh Language

This section is about understanding where your policy or initiative is relevant to national legislation and CTM UHB's ambition for the use of Welsh.

Please note whether your policy/initiative could impact the following Welsh language initiatives (it could impact more than one):

Perspective	Likely to have an impact?	Describe potential impact
Cymraeg 2050: A Million Welsh Speakers	No direct differential impact identified at present	The pause does not remove Welsh-language duties. All patient-facing information, updates and support routes should continue to be available bilingually and Welsh should not be treated less favourably. Keep under review as communication arrangements develop.
Welsh Language Standards Regulations 2017	No direct differential impact identified at present	The pause does not remove Welsh-language duties. All patient-facing information, updates and support routes should continue to be available bilingually and Welsh should not be treated less favourably. Keep under review as communication arrangements develop.
More Than Just Words 5-Year Plan	No direct differential impact identified at present	The pause does not remove Welsh-language duties. All patient-facing information, updates and support routes should continue to be available bilingually and Welsh should not be treated less favourably. Keep under review as communication arrangements develop.
Primary Care Services and Welsh language	No direct differential impact identified at present	The pause does not remove Welsh-language duties. All patient-facing information, updates and support routes should continue to be available bilingually and Welsh should not be treated less favourably. Keep under review as communication arrangements develop.

Now, based on above, note whether your policy or initiative would have a positive, neutral or negative impact overall by putting an **X** in the relevant box.

Positive impact	Neutral impact	Negative impact
	X	

Section 5: Strengthening or mitigating the identified impact on the Welsh Language

This section is about ensuring any positive impact on Welsh can be increased, or how any negative impact can be mitigated. This will ensure CTM UHB carries out its business in a way that promotes opportunities to use Welsh and does not treat Welsh less favourably.

Consider what actions need to be taken to increase any positive impact of your policy/initiative (Green), or what actions are needed to avoid or mitigate any negative impact (Red). Please seek support by emailing CTM.Equality.WelshLanguageImpact@wales.nhs.uk if necessary.

Actions to be taken	Completion date	Responsible person
Cardiff and Vale UHB, as provider of the Welsh Gender Service, should continue to provide accessible bilingual information and offer Welsh-language communication and interpretation/translation support where required. JCC should seek assurance that communications relating to the pause meet these requirements.	**Ongoing**	Cardiff and Vale UHB / JCC assurance