

## Bridgit Care

# Equality Impact Assessment (EIA)

## Refresh for April 2026

This refreshed version updates the January 2024 Equality Impact Assessment to reflect Bridgit Care's current service model, accessibility work and recent product development. It retains the original focus on co-design, inclusion and practical support for carers, while bringing the document up to date for April 2026.

<b>Last Updated</b>	30/04/2026
<b>Next Update Due</b>	31/10/2026
<b>Original EIA</b>	January 2024 edition authored by Darren Crombie & Beth Mooney
<b>Refresh Basis</b>	2024 EIA, current Bridgit Care main website, carers platform pages, equality and co-design blog pages, and April 2026 service updates

### Purpose of this refresh

- Reflect Bridgit Care's broader multi-channel AI coach model and current equality approach.
- Capture the continuing importance of visiting carers in person as well as engaging digitally.
- Include recent updates on neuroinclusive chat support, multilingual expansion and voice support.
- Set out the action priorities for the next review period from April 2026 to October 2026.

## Contents

- 1. Bridgit Care Co-Design and Accessibility Strategy
- 2. Section 1: Demographic Reach and Engagement
- 3. Section 2: Accessibility and Inclusion
- 4. Section 3: Ensuring Equitable Service Delivery
- 5. Section 4: Continuous Improvement and Action
- 6. Action Priorities: April 2026 to October 2026
- 7. Conclusion
- 8. Source Notes for this refresh

### Key updates since 2024

- Bridgit Care will continue to go out and visit carers through open days, partner events, community venues and local engagement sessions so that in-person insight remains central to service design.
- Chat support has been improved to provide different levels of support based on need, including more accessible interaction styles for people who may benefit from dyslexia-friendly or ADHD-aware communication.
- Multilingual support continues to expand within the app, building on the existing 50+ language offer and helping more carers access support in the format and language that works for them.
- Voice support has seen substantial development, with access being strengthened both within the app and via a phone line, widening access for carers who prefer to speak rather than type.
- Where carers need non-digital resources or offline support, Bridgit recommends local carer services and works in partnership with services that carers can visit or contact by phone.
- Monthly user groups, regular partner feedback and ongoing accessibility review continue to shape the roadmap.

This Equality Impact Assessment is intended to remain a live, practical document. It combines service information, equality analysis and current action priorities so that Bridgit Care can continue to identify barriers early and respond quickly where people are underserved or excluded.

## 1. Bridgit Care Co-Design and Accessibility Strategy

### Introduction

Bridgit Care's mission remains to deliver accessible, inclusive and practical support for unpaid carers and the organisations that support them. Since the previous EIA, Bridgit Care has broadened its offer into a family of AI coaches that help people through a model of Reach, Advice, Coach, Connect and Scale. This refresh considers the equality implications of that broader model and the steps taken to make support easier to access across different needs, communication preferences and levels of digital confidence.

The service continues to combine personalised guidance and self-help, multi-channel contact and check-ins, smart forms and referrals, reporting for partners, and warm handovers to human support where that is the right next step. Equality is therefore considered not only in the digital interface itself, but also in how people are identified, how they stay engaged, and how they are connected to further help.

## Overall equality position

The overall impact remains positive. Bridgit Care's combination of co-design, accessibility review, local partnerships and multi-channel delivery strengthens the likelihood that support can be tailored to different carer circumstances. The main continuing risk is that some carers, especially hidden carers or those facing digital, language or confidence barriers, may still be less likely to engage unless outreach remains active and varied.

## 2. Section 1: Demographic Reach and Engagement

### Demographic reach

Bridgit Care continues to support a broad range of unpaid carers. Older female carers remain an important user group, but the service now also actively supports hidden carers, young carers, employees balancing work and care, and people who may not otherwise find support early. The equality focus is therefore twofold: make the service easy to use for people who are already engaging, and proactively identify people who are missing from traditional pathways.

### Targeted and proactive engagement

Current engagement combines digital routes and direct local work. Bridgit uses awareness campaigns, QR code signposting, website widgets, WhatsApp and SMS activity, community communications, GP messaging, school-based activity and employer engagement to help more carers recognise themselves and find support earlier.

### In-person listening and visiting carers

Bridgit Care will continue to go out and visit carers in person through community visits, carer open days, partner events, local groups and one-to-one conversations. This remains an important equality measure because some carers are more likely to share barriers face to face than through digital channels, and some may not use digital services at all until trust has been built locally.

### User feedback mechanisms

Feedback is gathered through follow-up messages, in-product tools, workshops, monthly user groups, partner discussions and direct conversations with carers and professionals. This creates a more balanced picture of service experience, combining analytics with lived experience and local insight.

### Co-design with carers, charities and professionals

Working with carer charities, local authorities, occupational therapists, carer assessment advisers, support staff and other professionals remains central to design and deployment. Feedback is logged, discussed and prioritised within development cycles and regional deployment planning so that the service continues to evolve in response to what carers and practitioners actually need.

### Assessment

This section indicates a positive equality impact. The mix of digital engagement, local partnership working and continued in-person visits reduces the risk of design bias and improves the chance of reaching groups that might otherwise remain invisible. Continued effort is still required to identify carers who do not use digital channels, do not self-identify as carers, or face competing pressures that reduce engagement.

## 3. Section 2: Accessibility and Inclusion

## Access and participation barriers

Carers may face barriers relating to disability, neurodivergence, language, literacy, digital exclusion, low confidence, time poverty, transport, stress and the intensity of the caring role itself. Equality work must therefore consider both formal accessibility requirements and the practical realities of how carers engage with support while balancing other demands.

## Accessible multi-channel delivery

Support is available through web, WhatsApp, SMS, email and live chat or referral widgets. Recent development has also strengthened voice support within the app and via a phone line, creating another route for people who prefer spoken interaction to typed conversation. Bridgit remains a digital service, so where carers need non-digital resources or offline support we recommend that they speak to their local carer service.

## Accessible design features

Bridgit Care's accessibility approach includes screen reader compatibility, keyboard navigation, speech recognition compatibility, zoom, colour and contrast adjustments, clear layouts, simple text and subtitled videos. Accessibility work is focused on making the digital experience itself easier to use across different needs and devices.

## Neuroinclusive and personalised chat support

Recent improvements in chat support provide different levels of support based on need. This includes clearer structure, shorter sentences, more guided prompts and pacing that can better support people who may benefit from dyslexia-friendly or ADHD-aware communication. The intention is not to label people, but to reduce cognitive load and make it easier for more carers to complete journeys in a way that feels manageable.

## Language and cultural inclusion

Multilingual support already extends across more than 50 languages, and expansion within the app continues. This reduces language barriers and supports carers from diverse communities, while local signposting and culturally sensitive content help make support more relevant and useful.

## Targeted inclusion work

Building on earlier partnership work with local communities, minority groups and young carers, Bridgit Care continues to use both partner intelligence and direct engagement to test whether specific communities are underrepresented or encountering additional barriers. This includes listening to community feedback rather than assuming that digital availability alone guarantees inclusion.

## Assessment

This section indicates a strong positive equality impact. Multi-channel access, accessible design, voice options, language expansion and more adaptable chat journeys reduce barriers linked to disability, literacy, language and digital confidence. The main ongoing risk is uneven awareness or uptake across communities, which is why in-person engagement and regular testing remain important.

## 4. Section 3: Ensuring Equitable Service Delivery

### Stakeholder engagement in the EIA process

The EIA continues to draw on carers, charities, local authorities, professionals and internal teams. Monthly user groups, regular forums and direct partner feedback create a structured route for equality issues to be raised, tested and acted upon.

### **Equitable service delivery model**

- Reach - connect through any suitable channel and identify people earlier through both campaigns and local partnership work.
- Advice - provide consistent, personalised guidance that is available whenever the user needs support.
- Coach - offer regular check-ins, wellbeing monitoring and encouragement so that users remain supported over time.
- Connect - make referrals and warm handovers to human support where that is the right next step.
- Scale - give partners analytics, insight and workflow tools that help frontline services respond sooner and more consistently.

### **Human escalation and safeguarding**

Where needs are more complex or immediate, Bridgit supports warm referrals, escalation to human support and action on safeguarding or burnout concerns. This helps ensure the digital offer supplements rather than replaces frontline care, and that people who need more direct intervention are not left unsupported.

### **Consistency, personalisation and local relevance**

Support is designed to be consistent in quality while flexible in delivery. Guidance can draw on local data sources, local resources and partner priorities, helping carers receive support that is both standardised and locally meaningful. This balance supports equity because people can receive a dependable level of support without losing local relevance.

### **Professional team support**

Partner-facing tools, user insights, direct chat with AI coaches, integration options and workflow support help organisations understand needs earlier and deliver more joined-up support. This can improve equality by reducing administrative friction and helping teams follow up more effectively.

### **Local partnership support for non-digital needs**

Bridgit Care recognises that equitable service delivery does not mean digital-only delivery. Bridgit does not directly provide alternative non-digital formats. Where carers need non-digital resources or offline support, we recommend that they speak to their local carer service. This is why Bridgit aims to work in partnership with local, real-world services that carers can visit and contact by phone or in person as well.

### **Assessment**

This section indicates a positive equality impact. The service model supports equity when digital tools, human escalation and local partnership working are used together. Continued monitoring is required to ensure that no group receives a lower standard of support because of communication preference, disability or access route.

## **5. Section 4: Continuous Improvement and Action**

### **Staff training and awareness**

All team members are inducted with an emphasis on the social mission, co-design, accessibility, inclusive language and the importance of understanding the different contexts carers live in. This includes awareness of digital confidence, sensory and cognitive accessibility, and when human support is more appropriate.

### Review and update procedures

The EIA remains a live document and is reviewed at least every six months. Accessibility issues, partner feedback and product suggestions are logged in development and deployment systems and prioritised by likely impact on users. This helps Bridgit Care respond dynamically rather than waiting for problems to become embedded.

### Proactive response to identified needs

Recent and current priorities include improvements to chat support, multilingual expansion, voice support, community outreach, accessibility assurance and better tools for partner teams. Where carers or professionals highlight barriers, Bridgit Care seeks to test, refine and re-deploy changes rather than relying on one-off consultation.

### Assessment

This section indicates a positive and iterative equality approach. The roadmap is shaped by ongoing evidence, feedback and co-design, which reduces the risk that accessibility or inclusion issues remain unresolved for long periods of time.

## 6. Action Priorities: April 2026 to October 2026

The following priorities are intended to guide the next review period. Together they reflect a proactive approach to equality, combining practical service improvements with continued listening and outreach.

Priority	What this means in practice	Equality focus
<b>Continue visiting carers and local groups</b>	Maintain face-to-face visits, open days, partner sessions and community testing alongside digital engagement, and keep strong links with local carer services for carers who need phone or in-person support.	Reduces exclusion for hidden carers, digitally excluded carers and people who need trusted local human support as well as digital help.
<b>Develop neuroinclusive chat pathways</b>	Continue refining pacing, structure and prompts so support is easier to follow and complete.	Helps people who may benefit from dyslexia-friendly, ADHD-aware or lower-cognitive-load interactions.
<b>Expand multilingual support in app</b>	Extend translated journeys, content and local signposting across more of the app experience.	Improves access for carers whose first language is not English and supports more equitable self-service.
<b>Strengthen voice access</b>	Continue rollout and refinement of in-app voice support and phone-line access for carers who prefer spoken interaction.	Supports visually impaired carers, low-literacy users, digitally excluded users and those who prefer to speak rather than type.

Priority	What this means in practice	Equality focus
<b>Maintain accessibility assurance</b>	Continue review against accessibility standards, user testing and external validation where appropriate.	Improves quality and consistency for users with disability-related access needs across devices, formats and journeys.
<b>Improve reach to hidden and underrepresented carers</b>	Use partner feedback, analytics, campaigns and local engagement to spot where awareness or uptake is lower.	Helps address inequality linked to age, ethnicity, caring context, employment and geography.

## Overall action assessment

The action plan is focused on prevention as well as response. Its strongest features are the continued commitment to visiting carers, the move towards more adaptable communication styles, the growth of voice and language access, and the role of local partner services in supporting carers who need non-digital help.

## 7. Conclusion

Bridgit Care's April 2026 EIA demonstrates a continued and strengthening commitment to equality, inclusion and co-design. The current approach combines digital scale with local partnership, in-person listening, accessible design, multilingual support, neuroinclusive chat, growing voice options and clear links to local services where non-digital help is needed. The overall equality impact of the service remains positive, with the strongest results arising when carers can choose the channel, pace and route that suits them best.

Bridgit Care will continue to review this assessment, act on feedback and keep inclusion at the centre of service design and delivery so that the platform remains a supportive and empowering resource for all carers.

## 8. Source Notes for this refresh

This refresh draws on the January 2024 Equality Impact Assessment and a review of current Bridgit Care materials available at the time of drafting. It also incorporates April 2026 service updates provided during the refresh request, including the emphasis on continued in-person visits to carers, differentiated chat support, multilingual expansion, voice support and the role of local carer services in supporting non-digital needs.

- Bridgit Care Equality Impact Assessment (January 2024 edition).
- Bridgit Care main website overview and five-step AI coach model.
- Bridgit Care carers platform pages describing the current app experience and support journeys.
- Accessibility Statement for Bridgit Digital Support Tool.
- Developed with Carers & Professionals.
- Caring About Equality: How Bridgit Care Is Closing the Gaps for Unpaid Carers.