

Digital Health Equity Policy

Our commitment to the Equity Charter's 10 Principles

DOCUMENT OWNER

Dr. Nisha Zahid, PharmD, RPh,
Compliance Officer

STATUS

Approved

VERSION

1.0

EFFECTIVE DATE

3 July 2026

NEXT REVIEW

3 July 2027

1. Introduction

HealthOrbit AI Ltd is a UK based clinical AI company. Our products support NHS clinicians with ambient voice documentation and patient access automation, and are used across primary care, community mental health and, internationally, acute hospital settings.

We recognise that digital health tools are not neutral. Bias in data, design and decision making can create unequal outcomes, particularly for underserved communities. This policy sets out how HealthOrbit approaches equity across our organisation, our products and our services, structured against the ten principles of the Equity Charter.



Ambient Scribe in use during a primary care consultation.

2. Signatory status

HealthOrbit AI Ltd is a signatory of the Equity Charter, an independent, volunteer led movement advocating for equity in digital health, hosted by Health Innovation Network Kent, Surrey and Sussex. HealthOrbit joined as an organisational signatory on 3 July 2026.

3. Governance and ownership

This policy is owned by Dr. Nisha Zahid, PharmD, RPh, Compliance Officer. It is reviewed annually, alongside our other governance policies, and updated sooner if there is a material change to our workforce, products or regulatory environment.

4. Our commitments against the ten principles

Each principle below reflects HealthOrbit's current maturity: established practice, or a commitment we are actively building towards.

STATUS ACROSS THE TEN PRINCIPLES

Established



10/10

PRINCIPLE 1 OF 10

Individual responsibility

“Each of us commits to standing up for equity.”

Every HealthOrbit employee and contractor is expected to challenge bias where they see it and to consider equity in day to day decisions, from product design to customer support. This expectation is set out at induction and reinforced through our company code of conduct.



PRINCIPLE 2 OF 10

Leadership and teams

“Leaders, teams and organisations champion equity.”

This policy is sponsored by HealthOrbit's Director, Jobin Jose, and CEO, Rakesh Kaipenchery. Equity sits alongside clinical safety, data protection and information security as a standing leadership responsibility, not a separate or optional workstream.



PRINCIPLE 3 OF 10

Policy

“Equity embedded into policy and practice.”

This document is HealthOrbit's practical statement of that principle. It sits alongside our clinical safety (DCB0129/DCB0160), data protection (GDPR, DSPT) and information security (ISO 27001, Cyber Essentials Plus) policies, and is reviewed on the same annual cycle.



PRINCIPLE 4 OF 10

Strategy and transformation

“Equity at the centre of digital strategy and transformation.”

Equity is a design input into HealthOrbit’s product strategy. Ambient Scribe is built to support clinicians and patients across a range of care settings, including primary care and community mental health, where digital transformation has historically lagged acute settings.



Workforce

“Digital teams represent the wider workforce and communities they serve.”

HealthOrbit operates a workforce diversity and inclusion monitoring process as part of its HR and governance framework. Since January 2025, we collect voluntary data on age, sex/gender, ethnicity, disability status, nationality/right to work and employment type, alongside recruitment, promotion and retention trends. Senior management and the HR/compliance function review this data quarterly, assessing representation, recruitment outcomes, progression and retention for disparities requiring corrective action. Findings are discussed at management governance meetings, with actions tracked; individual data is kept confidential and reported only in aggregate.



PRINCIPLE 6 OF 10

Research and innovation

“Equity embedded in research and innovation.”

HealthOrbit follows a structured AI validation and fairness assessment process aligned with the NHS England AI and Data Ethics Framework, DTAC, and recognised responsible AI practices. Models are tested across multiple clinical specialties and consultation types using anonymised real-world and synthetic scenarios, with outputs compared against clinician-reviewed reference documentation and manually reviewed by qualified clinicians for accuracy, completeness and safety, including testing for demographic variation across age, sex and clinical presentation where representative data is available. We assess clinical accuracy, documentation completeness, hallucination rate, coding accuracy, safety observations and consistency across demographic groups, before every production release, during major upgrades, and after any significant change to foundation models or prompting strategies. Identified bias or performance variation is logged in our quality management process, investigated by product, engineering and clinical safety teams, and corrected before deployment.



PRINCIPLE 7 OF 10

Product design

“Digital products and services are designed equitably.”

Product decisions are informed by clinician feedback from live deployments across different care settings, and reviewed through our DCB0129 clinical safety process before release, so that usability and safety are considered for the full range of users rather than a single reference environment.



PRINCIPLE 8 OF 10

Procurement and contracting

“Ethical procurement and contracting promotes equity.”

HealthOrbit is a Living Wage Foundation accredited employer, and has operated a Responsible Procurement and Supplier Code of Conduct Policy since January 2025. It requires suppliers to demonstrate appropriate standards on legal and regulatory compliance, information and cyber security, UK GDPR, ethical AI and responsible technology practices, Modern Slavery Act compliance, equality, diversity and inclusion, environmental sustainability, business continuity, anti-bribery and confidential information handling. New suppliers undergo proportionate due diligence before onboarding, with enhanced review for higher-risk suppliers, and compliance is reviewed periodically as part of contract management and renewal.



Data and AI

“Equity in the use of data and design of algorithms.”

Patient data is handled under our DCB0129/DCB0160 clinical safety framework and DSPT and GDPR controls. AI quality and bias monitoring is embedded in our post-deployment governance, reviewing documentation and coding accuracy, hallucination frequency, clinical omissions, correction/edit rates, clinician feedback and performance consistency across specialties and demographics where representative data allows. Monitoring is jointly owned by our Clinical Safety Officer, Product and Engineering teams, and reviewed continuously, after major releases, and at scheduled quarterly AI governance reviews. Any potential bias, safety concern or performance degradation is logged, root-caused, risk-assessed, corrected and re-tested before closure, with significant findings escalated through our DCB0129 clinical risk management process.



PRINCIPLE 10 OF 10

Health outcomes

“Equitable health and wellbeing outcomes for underserved communities.”

HealthOrbit's live deployments include primary care (Haxby Group Practice, around 90,000 patients) and community mental health (Navigo Health and Social Care CIC), settings that often carry higher administrative burden and lower historical investment in digital tools. Reducing documentation time in these settings is central to how we see this principle applying to our work.



5. Review and accountability

This policy will be reviewed annually by HealthOrbit's Compliance Officer, and sooner if there is a material change to our workforce, products, or regulatory environment. Questions or feedback on this policy can be directed to our Data Protection Officer at dpo@healthorbit.ai.

APPROVED FOR PUBLICATION

Name	Dr. Nisha Zahid, PharmD, RPh
Title	Compliance Officer
Date	3 July 2026