

The Shrewsbury and Telford Hospital NHS Trust

# Equality and Health Inequality Impact Assessment Form

# Equality and Health Inequality Impact Assessment Form

Managers Name	Ruth Horner	Division & Department	Medicine, Cardiology		
Policy/Service Change or Development	Service change	Outline of proposed policy/service change	Temporary location of echocardiography services on the Telford site		
Implementation Date	12 <sup>th</sup> December 2022	Who does it affect?	Patients awaiting outpatient echocardiography services		
Have you engaged with staff, patients or the public	Yes in progress	Engagement plan attached	<b>Yes</b> [if no, please give reasons]		
Have any areas of negative high impact been identified?	Yes/No	Action Plan attached	Yes/No		

#### For Service Change/Development

Current number of patients likely to be impacted by proposed change/development	1500	Impact on Annual Referrals	▲ ★ x ↓
Number of staff directly impacted	4.2 Wte (6 individuals)	Number of staff indirectly impacted	26 WTE

For any service change or development, please contact the Public Participation team before completing this assessment: <u>sath.engagement@nhs.net</u> 01743 492390

#### **Date Completed:**

Signed by Manager completing the assessment:

For Service changes/developments please forward your completed form to the Public Participation Team sath.engagement@nhs.net. For Policies please forward a copy of the EHIA with your policy, to the Trust's Governance Team .

Protected Characteristic Group	Positive Impact	Negative Impact	Neutral impact	Summary explanation of the main potential positive or adverse impact of your proposal	Main recommendation from your proposal to reduce any key identified adverse impact or to increase the identified positive impact
				Temporary centralisation of	
				outpatient echocardiography	
				services will improve access to	Access requirements will be
Sex	х			the service and reduce waiting	discussed with individual patients
				lists which will have positive	to accommodate their needs
				impact for all. There is no	
				additional impact based on sex.	
				Temporary centralisation of	Access requirements will be
				outpatient echocardiography	discussed with individual patients
				services will improve access to	to accommodate their needs
Gender	v			the service and reduce waiting	
Reassignment	Х			lists which will have positive	
				impact for all. There is no	
				additional impact based on	
				gender reassignment status.	
				Temporary centralisation of	Access requirements will be
				outpatient echocardiography	discussed with individual patients
				services will improve access to	to accommodate their needs
Race	х			the service and reduce waiting	
Nuoc	^			lists which will have positive	
				impact for all. There is no	
				additional impact based on race.	

# For completion of the following tables please see the guidance notes.

Disability	x		Comorbidities are not uncommon when patients have cardiac conditions e.g. diabetes and so this temporary relocation of the service may have a greater impact on people with disabilities. Some patients may need to travel further for their appts. A clinic for Powys patient will take place at RSH weekly and then fortnightly.	Access requirements will be discussed with individual patients to accommodate their needs A clinic for Powys patient will take place at RSH weekly and then fortnightly.
Age	X		This temporary relocation of the service may have a greater impact on older people as they make up a large proportion of the patient list. Some patients may need to travel further for their appts	Information made available around eligibility for patient transport and recovery of expenses if eligible. Public transport is available to the PRH site Access requirements will be discussed with individual patients to accommodate their needs A clinic for Powys patient will take place at RSH weekly and then fortnightly.
Sexual orientation		x	Temporary centralisation of outpatient echocardiography services will improve access to the service and reduce waiting	Access requirements will be discussed with individual patients to accommodate their needs

		lists which will have neutral impact on this group	
Religion or Belief	x	Temporary centralisation of outpatient echocardiography services will improve access to the service and reduce waiting lists which will have neutral impact on this group	Access requirements will be discussed with individual patients to accommodate their needs
Pregnancy and Maternity	x	Temporary centralisation of outpatient echocardiography services will improve access to the service and reduce waiting lists which will have neutral impact on this group	Access requirements will be discussed with individual patients to accommodate their needs
Marriage and Civil Partnership	x	Temporary centralisation of outpatient echocardiography services will improve access to the service and reduce waiting lists which will have neutral impact on this group	Access requirements will be discussed with individual patients to accommodate their needs

		There will be no change for	
Welsh language	x	the small number of patients	
speakers		from Wales who access the	
		service as they will still be	

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Main potential positive or adverse impact for people who experience health inequalities summarised					
				seen on the RSH site in a	
				dedicated list (as currently)	

Please briefly summarise the main potential impact (positive or negative) on people at particular risk of health inequalities (as listed below). Please indicate **Neutral** if your proposal will not impact on patients who experience health inequalities.

Groups who face health inequalities	Positive Impact	Negative Impact	Neutral impact	Summary explanation of the main potential positive or adverse impact of your proposal	Main recommendation from your proposal to reduce any key identified adverse impact or to increase the identified positive impact
Looked after children and young people			х	Adult only service	N/A
<b>Carers of patients:</b> unpaid, family members.		x		Temporary centralisation of outpatient echocardiography services will improve access to the service and reduce waiting lists which will have a positive impact for all, but the some individuals there maybe a requirement to travel further causing a negative impact for some	Information made available around eligibility for patient transport and recovery of expenses if eligible. Public transport is available to the PRH site Access requirements will be discussed with individual patients to accommodate their needs
Veterans, Reservists and families of veterans			х	Temporary centralisation of outpatient echocardiography services will improve access to the service and reduce waiting lists which will have neutral impact on this group	Access requirements will be discussed with individual patients to accommodate their needs

Groups who face health inequalities	Positive Impact	Negative Impact	Neutral impact	Summary explanation of the main potential positive or adverse impact of your proposal	Main recommendation from your proposal to reduce any key identified adverse impact or to increase the identified positive impact
<b>Homeless people.</b> People on the street; staying temporarily with friends /family; in hostels or B&Bs.		x		Temporary centralisation of outpatient echocardiography services will improve access to the service and reduce waiting lists but may involve additional travel to attend their appointment so there may be a negative impact for homeless people.	Appts would be booked in line with public transport availability. Potential to recover expense would be discussed with individuals Information made available around patient transport, recovery of expenses if eligible. Public transport available to PRH site Access requirements will be discussed with individual patients to accommodate their needs
People involved in the criminal justice system: offenders in prison/on probation, ex-offenders.			x	Stoke Heath is closer to PRH and likely they would use this service as PRH is main cardiology site There are no implications for prisoners in custody as this is a pre-booked outpatient service	Access requirements will be discussed with individual patients to accommodate their needs
People with addictions and/or substance misuse issues			x	As with all patients, individual needs will be assessed as per current practice to accommodate their needs	Information made available around eligibility for patient transport and recovery of expenses if eligible. Public transport is available to the PRH site Access requirements will be discussed with individual patients to accommodate their needs

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Groups who face health inequalities	Positive Impact	Negative Impact	Neutral impact	Summary explanation of the main potential positive or adverse impact of your proposal	Main recommendation from your proposal to reduce any key identified adverse impact or to increase the identified positive impact
People or families on a low income		x		Temporary centralisation of outpatient echocardiography services will improve access to the service and reduce waiting lists which will have a positive impact for all, but the requirement to travel further may cause a negative impact for some people on low incomes	Information made available around eligibility for patient transport and recovery of expenses if eligible. Public transport is available to the PRH site Access requirements will be discussed with individual patients to accommodate their needs
People with poor literacy or health Literacy: (e.g. poor understanding of health services poor language skills).		x		Patients may not understand the need to attend alternative site	Speak to patient access to ensure temporary change of site is made clear in patient letters and conversations. Where necessary, alternatives can be considered
People living in deprived areas		x		Temporary centralisation of outpatient echocardiography services will improve access to the service and reduce waiting lists which will have a positive impact for all, but the requirement to travel further may cause a negative impact for some people on low incomes or living in deprived areas	Information made available around eligibility for patient transport and recovery of expenses if eligible. Public transport is available to the PRH site Access requirements will be discussed with individual patients to accommodate their needs
People living in remote, rural and island locations		x		Temporary centralisation of outpatient echocardiography services will improve access to the service and reduce waiting lists which will have a	Information made available around patient transport, recovery of expenses if eligible. Public transport available to PRH site

Groups who face health inequalities	Positive Impact	Negative Impact	Neutral impact	Summary explanation of the main potential positive or adverse impact of your proposal	Main recommendation from your proposal to reduce any key identified adverse impact or to increase the identified positive impact
				positive impact for all, but the requirement to travel further may cause a negative impact for some people living in rural areas	Access requires will be discussed with individual patients to accommodate their needs A clinic for Powys patient will take place at RSH weekly and then fortnightly.
Refugees, asylum seekers or those experiencing modern slavery		x		Patients may not understand the need to attended alternative site	Speak to patient access to ensure temporary change of site is made clear and alternatives considered
Other groups experiencing health inequalities (please describe)		x		Needs would be discussed with individuals as it arises as is current practice	Access requirements will be discussed with individual patients to accommodate their needs

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# EHIA Action Plan

Manager's Name	Ruth Horner		Division/Departme	ent	Medicine Division	
Negative Impact identified	Group(s) affected	Action/Mitigation	Involvement [Who/How?]	How will actions and proposals be monitored to ensure their success?	Timescale	Completed [Date]
Patients may not understand the need to attended alternative site	Refugees, asylum seekers or those experiencing modern slavery	Speak to patient access to ensure temporary change of site is made clear and alternatives considered	Patient access team Cardiorespiratory admin and clinical team	Patient feedback	Up to 31/3/23	
Comorbidities are not uncommon when patents have cardiac conditions i.e diabetes	Disability	Access requirements will be discussed with individual patients to accommodate their needs	Patient access team Cardiorespiratory admin and clinical team	Patient feedback	Up to 31/3/23	
Potentially older group of patients who will need to travel for their appts	Age	Information made available around eligibility for patient transport and recovery of expenses if eligible. Public transport is available to the PRH site Access requirements will be discussed with individual patients to accommodate their needs	Patient access team Cardiorespiratory admin and clinical team Trust website	Patient feedback	Up to 31/3/23	

All patients individuals needs will be assessed as per current practice to accommodate their needs	Carers of patients: unpaid, family members. Veterans, Reservists and families of veterans Homeless people. People on the street; staying temporarily with friends /family; in hostels or B&Bs. People or families on a low income People living in deprived areas People living in remote, rural and island locations	Information made available around eligibility for patient transport and recovery of expenses if eligible. Public transport is available to the PRH site Access requirements will be discussed with individual patients to accommodate their needs	Patient access team Cardiorespiratory admin and clinical team Trust website	Patient feedback	Up to 31/3/23	
Patients may not understand the need to attended alternative site	People with poor literacy or health Literacy: (e.g. poor understanding of health services poor language skills).	Speak to patient access to ensure temporary change of site is made clear and alternatives considered	Patient access team Cardiorespiratory admin and clinical team	Patient feedback	Up to 31/3/23	

Needs would be discussed with individuals as it arises as is current practice	Other groups experiencing health inequalities (please describe)	Access requirements will be discussed with individual patients to accommodate their needs	Patient access team Cardiorespiratory admin and clinical team	Patient feedback	Up to 31/3/23	

Date of next review: .....

# **Equality Impact Assessment**

### 1.0 Legal requirement for an Equality and Health Inequality Impact Assessment.

**1.1** The Equality Act (2010) requires public authorities to conduct an Impact Assessment upon their current or draft policies, practices, functions and services on equality grounds. The Equality and Health Inequality Impact Assessment will consider the impact on all areas of diversity, i.e. gender, transgender, disability, race, sexual orientation, age, religious belief, marriage and civil partnership and pregnancy. [In addition the Trust requires that the impact on groups facing health inequalities, and in the case of Welsh patients, the impact of distance on language spoken, be considered]

# 2.0 An Equality and Health Inequality Impact Assessment.

**2.1** The Equality and Health Inequality Impact Assessment is an assessment of the effect of current, intended or draft policies, programmes or services for any adverse, negative or detrimental outcomes for individuals from diverse backgrounds. Additionally it provides the structure to implement actions to eradicate any adverse, negative or detrimental outcomes, issues or inequalities.

**2.2** The purpose of the impact assessment specifically to the NHS is to improve our services by ensuring that we do not discriminate and that the promotion of equality is achieved for both patients and employees.

## 3.0 When to conduct an Equality and Health Inequality Impact Assessment.

**3.1** Equality and Health Inequality Impact Assessments should be carried out on the introduction of all new or revised policies, procedures, and protocols and before implementation of any service change/development or the introduction of a new service.

**3.2** In relation to service delivery the Equality and Health Inequality Impact Assessment should be reviewed every three years.

# 4.0 Process of an Equality and Health Inequality Impact Assessment.

**4.1** Equality and Health Inequality Impact Assessments should follow a \*two-stage process as follows:

- Assessment which highlights negative impacts of the change, as well as areas of positive benefit or good practice.
- An Action plan for those areas of high negative impact identified

# **Guidance notes for Equality Impact Assessment Form**

Policy/Service Change or Development What does this EHIA relate to

Outline of proposed policy/service change Please give a brief outline of what is proposed

#### **Implementation date?**

The date the policy was/will be implemented.

#### Who does it affect?

Services users i.e. patients, staff and other stakeholders, or others as appropriate.

#### Have you engaged with staff, patients or the public?

What process for engagement with the groups involved has been undertaken and when? The purpose of the engagement is to outline to the specific groups how the implementation of the policy will affect them and to raise awareness between the groups.

If an Equality and Health Inequality Impact assessment is being carried out in relation to a service change or development, the Trust has a legal duty to engage with its local community and patients groups around the potential change (Section 242).

Under Section 242 of National Health Service Act 2006 (as amended by the Health and Social Care Act 2012), NHS organisations are required to make arrangements to involve and consult patients and the public in:

- Planning of the provision of services;
- The development and consideration of proposals for changes in the way those services are provided, and decisions made by the NHS organisation affecting the operation of services.

The duty applies if implementation of the proposal, or a decision (if made), would have impact on -

- a) The manner in which the services are delivered to users of those services, or
- b) The range of health services available to those users.

For further information and advice regarding engaging the public and your duties to engage please contact the Trust Public Participation Team. As good practice all EHIA's should be reviewed by the relevant patient and public groups for assurance, please contact the Public Participation Team for more information <u>sath.engagement@nhs.net</u>

#### **Engagement plan attached**

If you are not attaching an engagement plan, please give reasons. An engagement plan must be attached for all service change/development EHIAs

#### Current number of patients likely to be impacted by proposed change/development

For service change/development please give details of the number of patients using the service (or part of the service) being considered at the current time.

#### **Annual Referrals**

Please give the number of referrals expected in the next 12 months, and indicate if this is likely to increase, stay the same or decrease in the future.

This information is important to give context and will enable better understanding of the potential impact of proposed changes on the public.

#### Number of staff impacted

Please give number of staff directly and indirectly impacted by the proposed change.

#### How to complete the high/low, positive/negative impacts table

#### **Positive Impacts**

The policy/service may have a positive impact on any of the equality groups outlined in relation to promoting equal opportunities and equality, improving relations within equality target groups, providing target need services to highlighted groups. An example of this would be if a targeted training programme for black and minority ethnic women had a positive impact on black and minority women, compared with its impact upon white women and all men. It would not, however, necessarily have an adverse impact on white women or men.

#### **Negative Impacts**

The policy/service may have a negative/adverse impact upon any of the equality target groups outlined i.e. disadvantage them in any way. An example of this would be that if an event were to be held in a building with no loop facilities, a negative/adverse impact would occur for attendees with a hearing impairment.

#### **Factor Scores**

Impact				
None	You will need to use your judgement and consultation findings to decide whether there			
Low	is no impact or a high/low impact – whether positive or negative. It is recognised that there may be differences of opinion about a factor score. In this case, it is advised to			
High	consult the relevant EDI lead before settling on a score.			

Any **High** Negative Impact score will illustrate a need to complete an EHIA Action Plan However, it may be useful to complete this even if the negative impact scored low to ensure that a more thorough assessment is carried out. NB: Please retain a copy of the Impact Assessment(s) on your files for audit purposes and address any queries to the relevant **Public Participation or Workforce ED&I Lead.** 

