

The Scottish Ambulance Service
A Special Health Board of NHS Scotland

Scottish Ambulance Service
NHS Scotland

Equality Impact Assessment ScotSTAR Service

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Equality Impact Assessment

Equality Impact Assessment is concerned with anticipating and identifying the equality consequences of particular policy / service initiative and ensuring that as far as possible any negative consequences for a particular group or sector of the community are eliminated, minimised or counterbalanced by other measures.

1. Introduction

ScotSTAR

In 2011 NHS Scotland had three established national specialist transport and retrieval services; the Scottish Neonatal Service (SNTS), the Transport of Critically Ill & Injured Children Service and the Emergency Medical Retrieval Service (EMRS). The Scottish Ambulance Service (SAS) provides the transport for all these services, both road and air.

Following a request from Board Chief Executives to review the current services the National Planning Forum commissioned a review.

The Strategic Vision for ScotSTAR was published in September 2011 highlighting the vision to deliver a flexible and responsive single national specialist transport service for NHS Scotland. In support of the Strategic Vision an Outline Business Case was prepared in October 2011. On the 1st of April 2014 the three teams became the responsibility of the Scottish Ambulance Service and followed the Scottish Ambulance Service governance processes thereafter.

The service is also sensitive to changes with territorial boards where redesign of services can influence the number of specialist retrievals required around the country. There have been two significant strategies in 2016 that will have an influence on the Scottish retrieval service going forward. The Scottish trauma review, where there will be a centralisation of trauma centres in Scotland. And the maternity review, which has stated that the intensive care services will be centralised. Close working with health board partners is essential to ensure patient needs are met.

2. Evidence

Patient data is routinely gathered by ScotSTAR from the teams delivering the service as this provides a comprehensive source of information for the national service. The teams are working towards shared Key Performance indicators and Quality Standards as well as their own clinical standards for each speciality.

3. Key areas

Clinical Coordination

Clinical coordination of all retrievals by ScotSTAR, approx. 2,200 transfers per annum, are undertaken by the clinicians and in partnership with the specialist services desk based in the ambulance control. In addition to this up to 500+ clinical advice calls are received between all of the teams.

Centralised Base with Delivery Nodes

ScotSTAR base at Glasgow Airport is the central base for ScotSTAR as most retrieval patients are brought to Glasgow however, there continues to be neonatal retrieval services within the delivery nodes of the East and North of Scotland.

One Structure for Governance and Performance Management

SAS have been the host Health Board for the national service since 1st April 2014 where performance management comes under the auspices of the SAS Board, and there is a single governance structure aligning all teams. The final stages of transferring staff from the Health Boards to the Scottish Ambulance Service are also underway where arrangements will be concluded by 1st April 2017. This is a legal process and known as the "Transfer of Undertakings (protection of employment) Regulations 2016, TUPE. In addition to this financial budgets will also be transferred to the Scottish Ambulance Service.

Partnership working

Updates have been provided to Partnership throughout the Implementation and there is Partnership representation on the Workforce Group relating to TUPE.

Sharing data

Data collection systems are different for each team due to an alignment to UK data sharing systems. For example neonates use a UK integrated system called Badgernet that said, data is collected and shared from ScotSTAR to allow monitoring of the service within the management team.

4. Recommendations

- Continue consultation with stakeholders throughout the next year to ensure patient needs are being met
- Work collaboratively to implement the Scottish trauma review
- Work collaboratively to implement the Scottish maternity review



Equality Impact: Screening and Assessment Form

Section 1: Policy details - policy is shorthand for any activity of the organisation and could include strategies, criteria, provisions, functions, practices and activities including the delivery of our service.	
a. Name of policy or practice (list also any linked policies or decisions)	ScotSTAR function within the Scottish Ambulance Service
b. Name of department	ScotSTAR
c. Name of Lead	Garry Fraser, General Manager ScotSTAR
d. Equality Impact Assessment Team [names, job roles]	Garry Fraser, General Manager Kate Burley, Deputy General Manager
e. Date of assessment	March 2017
f. Who are the main target groups / who will be affected by the policy?	ScotSTAR function is to retrieve critically ill or injured patients of all ages in Scotland
g. What are the intended outcomes / purpose of the policy?	The aim of the policy is to implement a flexible and responsive single national specialist transport and retrieval service for NHS Scotland, providing safe, effective and person-centred care.
h. Is the policy relevant to the General Duty to eliminate discrimination? advance equality of opportunity? foster good relations?	The service model will deliver the following: <ul style="list-style-type: none"> • Single integrated national service, • Sustainable multidisciplinary workforce, • Centralised clinical coordination for all referrals into the service ensuring effective use of all resources, equipment, transport and workforce • Centralised base for majority of teams providing opportunities for shared working, training, education and shared support services • A world class specialist transport and retrieval service for NHS Scotland.

	This will provide a sustainable workforce fostering good relations with patients, public and staff. This provide excellent patient benefits
<p>If yes to any of the three needs complete all sections of the form (2- 7) If no to all of the three needs provide brief detail as to why this is the case and complete only section 7 If don't know: complete sections 2 and 3 to help assess relevance</p>	Yes

Section 2: Evidence, consultation and involvement

Please list the available evidence used to assess the impact of this policy, including the sources listed below. Please also identify any gaps in evidence and what will be done to address this.

- a. Previous consultation / involvement with community, including individuals or groups or staff as relevant. Please outline details of any involvement / consultation, including dates carried out and protected characteristics

The following five bullet points apply to all protected characteristics;

- There are clear links with the extensive work that was undertaken in 2013 for the new Air Ambulance contract and the public meetings held with the remote and rural communities all over Scotland who rely on the specialist transport and retrieval teams.
- An Implementation Board was established and was in place until 2015 which includes a patient/public representative, key clinical and managerial representatives from all the teams involved and regional planning representatives.
- There is regular engagement with all staff regardless of their role or location they can view the monthly newsletter and highlight reports, minutes, papers from the various project groups, and there is regular face to face contact with the teams. Operational staff are also members of the various governance groups.
- There have also been regular events over the recent years including the official opening of the Glasgow ScotSTAR base where where representatives from health boards, staff, air ambulance, Health Minister, press and public reps such as the

Renfrewshire Access Panel attended to view and comment on the service.			
<ul style="list-style-type: none"> The development of the ScotSTAR annual report also provides an opportunity for an oversight group, chaired by Dr Annie Ingram, to review and ensure ScotSTAR is delivering what it should to the Health Boards and the public. 			
Details of consultations - where, who was involved	Date	Key findings	Protected characteristics
			Age
			Disability
			Gender reassignment
			Gender / sex
			Marriage / civil partnership *
			Pregnancy / maternity
			Race
			Religion / belief
			Sexual orientation
			Cross cutting - e.g. health inequalities - people with poor mental health, low incomes, involved in the criminal justice system, those with poor literacy, are homeless or those who live in rural areas. Other?

	Available evidence
b. Research and relevant information	This is a continuation of a current Health Boards retrieval services for all age groups. They link in with national retrieval services around the UK to ensure best practice
c. Knowledge of policy lead	General Manager for Air Ambulance Service and ScotSTAR
d. Equality monitoring information -- including service and employee information	Some patient and staff demographics are collected within the reporting systems.
e. Feedback from service users, partner or other organisations as relevant	Feedback is gained from patients, parents, carers and referring clinical teams. Feedback and debriefs are undertaken between the clinicians that request the retrieval services and the responding teams. This allows the teams to have continuous learning after every callout. Where possible feedback from relatives and patients is also sought.
f. Other	
g. Are there any gaps in evidence? Please indicate how these will be addressed	No
Gaps identified	
Measure to address these; give brief details. Further research? Consultation? Other	
Note: specific actions relating to these measures can be listed at section 5	

Section 3: Analysis of positive and negative impacts			
Please detail impacts in relation to the three needs specifying where the impact is in relation to a particular need - eliminating discrimination, advancing equality of opportunity and fostering good relations			
Protected characteristics	i. Eliminating discrimination	ii. Advancing equality of opportunity	iii. Fostering good relations
Age			
Positive impacts	The ScotSTAR patient cohort of all ages are some of the most critically ill and injured patients around Scotland that the health service care for and treat. Consequently timely response with the correct medical and clinical teams is essential to ensure good outcomes and a safe transfer for patients. The ScotSTAR retrieval services provide a timely and appropriate response based solely on the clinical need of the patient regardless of age		
Negative impacts			
Opportunities to enhance equality			
Disability			
Positive impacts	The ScotSTAR patient cohort are some of the most critically ill and injured patients around Scotland that the health service care for and treat. Consequently timely response with the correct medical and clinical teams is essential to ensure good outcomes and a safe transfer for patients. The ScotSTAR retrieval services provide a timely and appropriate response based solely on the clinical need of the patient regardless of disability		
Negative impacts	Any recruitment is in line with SAS recruitment procedures. Before this, staff employed by the retrieval service would 'opt in' to the service having achieved appropriate skills in the specialty field. It is not appropriate to recruit staff with a physical disability or those who suffer from travel sickness due to the nature of the work undertaken.		
Opportunities to enhance equality			
Gender reassignment			
Positive impacts	The ScotSTAR patient cohort are some of the most critically ill and injured patients around Scotland that the health service care for and treat. Consequently timely response with the correct medical and clinical teams is essential to ensure good outcomes and a safe transfer for patients. The ScotSTAR retrieval services provide a timely and appropriate response based solely on the clinical need of the patient regardless of gender reassignment		
Negative impacts			

Opportunities to enhance equality	
Gender / sex	
Positive impacts	The ScotSTAR patient cohort are some of the most critically ill and injured patients around Scotland that the health service care for and treat. Consequently timely response with the correct medical and clinical teams is essential to ensure good outcomes and a safe transfer for patients. The ScotSTAR retrieval services provide a timely and appropriate response based solely on the clinical need of the patient regardless of gender
Negative impacts	
Opportunities to enhance equality	
Marriage / civil partnership	
Positive impacts	The ScotSTAR patient cohort are some of the most critically ill and injured patients around Scotland that the health service care for and treat. Consequently timely response with the correct medical and clinical teams is essential to ensure good outcomes and a safe transfer for patients. The ScotSTAR retrieval services provide a timely and appropriate response based solely on the clinical need of the patient regardless of marital / civil partnership status
Negative impacts	
Opportunities to enhance equality	
Pregnancy / maternity	
Positive impacts	The ScotSTAR patient cohort are some of the most critically ill and injured patients around Scotland that the health service care for and treat. Consequently timely response with the correct medical and clinical teams is essential to ensure good outcomes and a safe transfer for patients. The ScotSTAR retrieval services provide a timely and appropriate response based solely on the clinical need of the patient. Women who are pregnant who are patients are transferred by the team if there are significant complications. Pregnant staff undertakes the SAS maternity risk assessment to assess if they are able to work if pregnant due to the higher risk undertaking transfers. This decision is led by the staff member
Negative impacts	
Opportunities to enhance equality	
Race	

Positive impacts	<p>The ScotSTAR patient cohort are some of the most critically ill and injured patients around Scotland that the health service care for and treat. Consequently timely response with the correct medical and clinical teams is essential to ensure good outcomes and a safe transfer for patients. The ScotSTAR retrieval services provide a timely and appropriate response based solely on the clinical need of the patient regardless of race.</p> <p>Language Line Service is in place to assist those patients and carers for whom English is not their first language. Staff also have the use of the multi lingual phrase book which can assist with communication in emergencies where it is not possible to use the telephone service.</p>
Negative impacts	
Opportunities to enhance equality	
Religion / belief	
Positive impacts	<p>The ScotSTAR patient cohort are some of the most critically ill and injured patients around Scotland that the health service care for and treat. Consequently timely response with the correct medical and clinical teams is essential to ensure good outcomes and a safe transfer for patients. The ScotSTAR retrieval services provide a timely and appropriate response based solely on the clinical need of the patient regardless of religion or beliefs</p>
Negative impacts	
Opportunities to enhance equality	
Sexual orientation	
Positive impacts	<p>The ScotSTAR patient cohort are some of the most critically ill and injured patients around Scotland that the health service care for and treat. Consequently timely response with the correct medical and clinical teams is essential to ensure good outcomes and a safe transfer for patients. The ScotSTAR retrieval services provide a timely and appropriate response based solely on the clinical need of the patient regardless of sexual orientation</p>
Negative impacts	
Opportunities to enhance equality	
Cross cutting - e.g. health inequalities people with poor mental health, low incomes, involved in the	

<p>criminal justice system, those with poor literacy, are homeless or those who live in rural areas. Other</p>	
<p>Positive impacts</p>	<p>Work on the triage and transfer of distressed patients with mental health problems continues to be challenging. There is consideration required to be given to Civil Aviation Authority, CAA, regulations and pilot approval in respect of distressed patients being fit to fly and therefore endanger the aircraft and its occupants. That said mental health patients are regularly flown and where necessary mental health teams external to ScotSTAR are used for those transfers.</p> <p>Access to hospital accommodation – families of children and infants who are retrieved and are admitted are given priority for hospital accommodation. This applies to all groups.</p> <p>Families also have access to the family support drop in centre which provides support for all family members for the paediatric service.</p>
<p>Negative impacts</p>	
<p>Opportunities to enhance equality</p>	<p>Geography does impact on the above population groups, as access to transport to allow retrieval from remote and rural areas will take longer to arrive than for patients who reside within the urban areas. That said this is a consultant led service which brings advanced care to stabilise patients for the transfer to definitive intervention</p>
<p>Note: specific actions relating to these measures can be listed at section 5</p>	

<p>Section 4: Addressing impacts Select which of the following apply to your policy and give a brief explanation - to be expanded in Section 5: Action plan</p>	
	<p>Reasons</p>
<p>a. No major change - the EQIA shows that the policy is robust, there is no potential for</p>	<p>The ScotSTAR service is available to all critically ill and injured patients around Scotland if requiring transfer. The determination of this service is</p>

discrimination or adverse impact and all opportunities to promote equality have been taken	solely based on clinical need
b. Adjust the policy – the EQIA identifies potential problems or missed opportunities and you are making adjustments or introducing new measures to the policy to remove barriers or promote equality or foster good relations	
c. Continue the development and implementation of the policy without adjustments – the EQIA identifies potential for adverse impact or missed opportunity to promote equality. Justifications for continuing without making changes must be clearly set out, these should be compelling and in line with the duty to have due regard. See option d. if you find unlawful discrimination. Before choosing this option you must contact the Equalities Manager to discuss the implications.	
d. Stop and remove the policy - there is actual or potential unlawful discrimination and these cannot be mitigated. The policy must be stopped and removed or changed. Before choosing this option you must contact the Equalities Manager to discuss the implications.	

Section 5: Action plan

Please describe the action that will be taken following the assessment in order to reduce or remove any negative / adverse impacts, promote any positive impacts, or gather further information or evidence or further consultation

Action	Output	Outcome	Lead responsible	Date	Protected characteristic / cross cutting issue*
Engagement with	Continue to work	Refinement of the	Three service	Ongoing	All

Stakeholders	closely with stakeholders throughout Scotland to ensure continuous improvement	service provided	leads		
Engagement with Stakeholders	Continue work on mental health retrieval processes	Explore possible enhancements	ScotSTAR Head of Service	Ongoing	Cross Cutting Mental Health
Engagement with Stakeholders	Work collaboratively to implement the Scottish trauma review	To be integrated with the new Scottish Trauma system	ScotSTAR Head of Service	Ongoing	All
Engagement with Stakeholders	Work collaboratively to implement the Scottish maternity review	To be integrated with the new Scottish maternity system	ScotSTAR Head of Service	Ongoing	All
* list which characteristic is relevant - age, disability, gender reassignment, gender / sex, marriage and civil partnership, pregnancy and maternity, race, religion / belief, sexual orientation or cross cutting issue e.g. poor mental health, illiteracy etc					

Section 6: Monitoring and review

Please detail the arrangements for review and monitoring of the policy

	Details
a. How will the policy be monitored? Provide dates as appropriate	As part of the performance management and monitoring that will be in place for ScotSTAR
b. What equalities monitoring will be put in place?	This is undertaken by the Governance procedures in place for ScotSTAR
c. When will the policy be reviewed? Provide a review date.	March 2018

Section 7: Sign off			
Please provide signatures as appropriate			
Name of Lead	Title	Signature	Date
Garry Fraser	Mr		17 th March 2017
Completed form: copy of completed form to be retained by department and copy forwarded to Equalities Manager for publication on Service website			
Provide date this was sent	21 st March 2017		