Equality Impact Assessment



Enhancing Specialist Response Capabilities Programme

National Risk & Resilience Department

Equality Impact Assessment

Equality Impact Assessment is concerned with anticipating and identifying the equality consequences of a 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.

Introduction

What is the background to this programme?

The patient safety is the highest priority of our Government and the Scottish Ambulance Service. To ensure that the Service meets the consequences of a threat to public safety, the Scottish Government Health and Social Care Directorates have committed to working with NRRD to ensure that the specialist operational capability provided by Scottish Ambulance Service is fit to meet the planning assumptions for the threats and risks defined within the National Security Risk Assessment. This programme of work, whilst meeting the response requirements, also ensures full inter-operability with the other UK emergency services and response partners.

There exists an agreement with Scottish Government Health and Resilience Unit that requires the Scottish Ambulance Service to maintain an on-going, national specialist operational capability to provide patient care in hazardous environments on behalf of NHS Scotland. The Programme activity is designed to monitor, manage and mitigate existing and emerging capability gaps in response regarding hazardous environment response including Major Incidents with Mass Casualties.

Name of policy, process, strategy, function or service	Enhancing Specialist Response Capabilities Programme	
Name of Department	National Risk & Resilience Department	
Name of Lead	Stephen Massetti – Enhancing Response Capabilities Programme Director Stephen Massetti/Allan Shields, Programme Director Rebecca Board, Programme Manager (Assessment reviewer) Neil Gillies, NARU Embed/Quality Assurance Sarah Howard-Stone, Project Manager September 2017 (Ian Conway) Reviewed March 2019 Reviewed/updated February 2020 Reviewed/updated February 2021	
Review Team: Names & Job Roles		

PART ONE: EQUALITY IMPACT ASSESSMENT

SECTION ONE: AIMS OF THE POLICY, PROCESS, STRATEGY, FUNCTION OR SERVICE

1. Is this new or existing service?

The Enhancing Specialist Response Capabilities (ESRC) programme is a programme designed to ensure that the existing Specialist Capabilities of the Service evolve to meet the needs of the National Security Risk Assessment as it changes and is updated.

2. What is the aim or purpose of this programme?

To ensure the best possible patient outcomes and to meet the legislative requirements regarding response in hazardous environments and in Major Incidents involving Mass Casualties.

3. What are the intended outcomes?

In overall terms, the programme aims to enhance the ability of the Service to provide a specialist response to unexpected incident of scale, or to build a level of response capacity more likely to be able to meet the consequences of a raise in threat.

- Save life and improve health outcomes, protect the public and provide resilient, safe and effective, efficient and timely patient centred care.
- Respond effectively to the incident in a way that delivers optimum care and assistance to those involved, minimises the consequential disruption to the Service and supports an early return to normal levels of functioning.
- Maintain an appropriate capability to respond to other emergencies.
- Work in partnership with other agencies to allow the Service to deliver an effective, integrated, multi-agency response.
- Protect, as far as is practicable, the safety of staff and patients.
- Ensure that resources are prioritised, deployed and managed efficiently and effectively.

- Ensure that mutual aid is available across organisational boundaries.
- 4. How have the stakeholders been involved in the development of this programme?

The Programme and individual Projects have Stakeholder maps and board approved Communications Plans.

SECTION TWO: IMPACT ASSESSMENTS		
Equality Groups	If any potential impact on any of the groups has been identified, please give details – including if impact is anticipated to be positive or negative.	
Women, men and transgender people or those undergoing gender reassignment	Nil to note	
Minority Ethnic Groups including gypsy travellers, refugees & asylum seekers	Nil to note	
People in religious or faith groups	Nil to note	
Older people, children and young people	Consideration and provision where required regarding specific needs and suitable equipment and/or additional skills training will be included in each Project. Identified requirements will be included in product specifications after consultation with and approval by Senior Users.	
Disabled people	Consideration and provision where required regarding specific needs and suitable equipment and/or additional skills training will be included in each Project. Identified requirements will be included in product specifications after consultation with and approval by Senior Users.	
Lesbian, gay and bisexual people	Nil to note	
Employees or contactors	Staff and contractor welfare will be incorporated into product specifications e.g. provision of PPE and training.	
Carers	Nil to note	
People with mental health problems	We have access to Service provision regarding staff welfare and wider implications will be incorporated into product specifications after consultation with and approval by Senior Users.	
Homeless people	Specific needs around communication in the event of an incident will be incorporated into product specifications.	
Women who are pregnant or on maternity leave	Consideration and provision where required regarding specific needs for Pregnant Women and suitable equipment and/or additional skills training will be included in each Project. Identified requirements will be included in product specifications after consultation with and approval by Senior Users.	

1. What impact will the programme have on equality?		
•	Discrimination against groups of people	All population groups were considered, there is no obvious cause for discrimination of any of the above population groups
•	Equality of opportunity for all groups of people	Geography does have an impact on the availability of specialist teams in more remote locations; however, the operational footprint does afford the most specialist support across the main populated areas of Scotland with on-call teams based in less populated regions. The programme team will be looking at extending the operational capability with the addition of extra specialist staff able to deploy to more remote or rural locations. They are also considering additional SORT (lite) teams to assist with
•	Relations between different groups	providing additional staff more remote regions to increase resilience. Nil to note
•	Tackling bullying and harassment	Following existing policies and procedures

2.	what impact will the pro	ogramme have on lifestyles?
•	Diet and nutrition	N/A
•	Exercise & physical activity	Additional support for special operations employees to maintain a good state of fitness to enable them to carry out the duties in extreme physically challenging environments.
•	Substance use: Alcohol & drugs	N/A
•	Risk taking behaviour	Provision of PPE and training mitigates against additional risk involved in hazardous environment deployment.
•	Education and learning or skills	Additional development of special operation employees: Enhancing their specialist knowledge and capability. Leadership and scene management skills. Recruitment of specialist trainers across all SORT locations will increase training opportunities.
3.	Does your programme c	onsider the impact on the social environment?
•	Social status	N/A
•	Employment	We will be recruiting additional staff across three locations.
•	Social/family support	N/A
•	Stress/resilience	The work can be stressful and it is essential that teams are debriefed following incidents and they have access to counselling services if required.
•	Income	N/A
•	Geographical location	As described above, this can be an issue for people living in more rural and remote location as they will not have immediate access to specialist resources in comparison to densely populated areas. Additional staff recruitment and increased specialist operational footprint will assist with this.

•	Living conditions	N/A
•	Working conditions	Refurbishing and expanding existing sort bases to accommodate additional staff will provide an improvement in working conditions.
•	Pollution or climate change	Increased vehicle footprint by specialist teams attending incidents.
•	Accidental injuries or public safety	The programme will be carrying out a full review of existing risk assessments and ensuring safe working practices a adopted in any new capability.
•	Transmission of infectious disease	The teams all adhere to robust policies and procedures, additional training and enhanced PPE are available for all employees.
5.	Will the programme af	fect access to and experience of services?
	Health care	Yes as noted above
•	Health care Social services	Yes as noted above N/A
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•	Social services	N/A
•	Social services Education Housing	N/A Yes as noted above

PART TWO

SECTION ONE: EVIDENCE AVAILABLE AT TIME OF EQUALITY IMPACT ASSESSMENT

1. Name any experts or relevant groups/bodies you should approach (or have approached) to explore their views on the issues.

This programme is an extension to the initial model response capability which was developed in consultation with Scottish Government, National Risk & Resilience Department, local staff partnerships and our own executive team. Moving forward, we are working collaboratively with our colleagues at the National Ambulance Resilience Unit to develop similar capabilities as specialist units have in England and Wales. Learning opportunities also exist in Academia regarding emergency response and also in countries with similar challenges regarding risk, climate, population distribution and topography e.g. New Zealand and Canada.

2. What do we know from in-house data – this can include service use, patient surveys, staff surveys, details of local populations, consultations, focus groups, analysis, best practice guidance, pilot projects.

Initially the model response programme focused on the likelihood of significant multi-site terrorist or major incidents across key location in major cities throughout the United Kingdom, we subsequently modelled our capability on this criterion within Scotland. As such we have focused our resourcing and operational footprint across the most densely populated locations with supplementary on-call teams available in more remote or less populated regions.

3. What do we know from existing quantitative and qualitative date, research, consultations, focus groups analysis, academic or professional publications, reports etc.

There are clearly some regions across Scotland that have a lesser specialist capability than the more densely populated regions. We are exploring the possibility of additional have SORT (lite) teams, strategic holding areas and additional major incident equipment throughout Scotland. This will be done with close consultation with both our executive team and Scottish Government.

4. What gaps in knowledge are there? What further evidence is required?

We will continue to work closely with all stakeholders throughout this programme. Due to its evolving nature it is likely that we will discover knowledge gaps as the work progresses. It is crucial that we learn and evaluate any identified gaps and integrate it into the development of the programme through change management processes and/or future business case development.

SECTION TWO: RECCOMENDATIONS

1. What are the specific actions required as a result of this equality impact assessment?

To continue to work closely with all stakeholders throughout the programme implementation to ensure compliance and amend equality assessment where required.

2. Who will take this forward?

Rebecca Board, Programme Manager (Assessment reviewer) Sarah Howard-Stone, Project Manager In conjunction with the Programme and Project Boards.

3. Date for completion?

Estimated 2026 for full (option three) programme implementation.

4. Who will be consulted about the findings of this equality impact assessment?

This assessment will be circulated around the programme team and associated stakeholders; we will also seek approval from the services equality lead (Ann Tobin) prior to release and throughout the programme to ensure compliance.

SECTION THREE: MONITORING

- 1. What will be the outcome monitored? As part of the programme performance management and monitoring that is in place within the programme
- 2. What monitoring arrangements are in place? Risk register, action tracker, programme timeline and programme review
- 3. Who will monitor? Programme Management Team
- 4. What criteria will be used to monitor progress? It will be part of the benefits realisation plan evaluation, audit and standards

PART THREE

SECTION ONE: EQUALITY IMPACT ASSESSMENT SUMMARY

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National Risk & Resilience Department	Programme Director: Stephen Massetti
Date of implementation: September 2017	Review date: February 2021

SECTION TWO: POSITIVE IMPACTS

<u>Access to Specialist Resources</u>: This programme will increase the available specialist resources available across Scotland to the benefit of our organisation, key stakeholders and the wider public and the services ability to respond to major incidents.

Employment Opportunities: We will be recruiting additional staff across all three SORT base locations to supplement existing employees.

<u>Clinical Improvement:</u> More specialist clinicians and enhanced clinical capabilities.

<u>Innovation & Development</u>: Taking forward our vehicle and equipment specifications to the next level.

<u>Enhanced Capability:</u> More specialist capability to "take the care to the patient" by implementing a service wide approach regarding IOR.

Improved Employee Fitness: SORT staff will have access to gym equipment to ensure they are physically fit enough to carry out specialist role.

Education & Development: Ambulance staff will have improved access to specialist training programmes

SECTION THREE: NEGATIVE IMPACTS

<u>Equal Opportunities for recruitment to the Service:</u> Due to the specialist roles SORT clinicians deploy into, it is not appropriate to recruit staff with disabilities which may hinder their capacity to fulfil specialist role.

<u>Environmental Impacts:</u> Due to the increase in operational footprint the specialist resources bring to incidents, additional vehicles may contribute to higher levels of environmental pollution.

<u>Employee Wellbeing</u>: Due to the nature of the incidents specialist resources attend, there is a high likelihood of staff experiencing increase levels of stress and exposure to infectious diseases.

<u>Recruitment shortfall:</u> It may be problematic recruiting staff in specific geographic areas i.e. Aberdeen.

SECTION FOUR: CONSULTATION/INVOLVEMENT

As detailed above - Consultation was done internally between programme and executive team via highlight reports, face to face consultation. SORT & NRRD team have been updated through national bulletins. Specifically Fleet, Procurement, HR, Estates & Finance have all had an input with the development and progression of this programme.

External stakeholders have been involved with investment, specification, and capacity modelling throughout the implementation of the programme.

SECTION FIVE: WHAT FURTHER EVIDENCE IS REQUIRED?

Continual review of programme aims and objectives in line with emerging threats which the programme may need to evolve and adapt in order to successfully deliver products.

SECTION SIX: WHAT ARE THE RECOMMENTIONS?

- Further consultation regarding recruitment in problem areas contingency planning
- Risk register to be updated and reviewed in light of EQIA
- Consultation with key stakeholders regarding increased capacity of specialist ambulance resources

COMPLETED PROGRAMME – Who will sign this off? SAS Board & Scottish Government

PUBLICATION

he completed summary of the equality impact assessment will be available from the programme team and Ann Tobin, Equalities Manager		
ality Impact Assessment – Enhancing Capabilities Programme Version 3.2 February 2021	Pag	