




Integrated Impact Assessment		  	
Ref no:			
Name of the policy, service, scheme or project:			
SERVICE DEVELOPMENT/CHANGE PROFORMA Radiotherapy Satellite Centre.			
Service Area			
VCC			
Preparation			
<p>The purpose and aims of the policy, procedure, strategy or decision required</p> <p>Please include;</p> <ul style="list-style-type: none"> the overall objective or purpose the stated aims (including who the intended beneficiaries are) a broad description of how this will be achieved the measure of success will be the time frame for achieving this a brief description of how the purpose aims of the policy are relevant to equality and intended beneficiaries. 		<p>The change proforma outlines the proposal to develop a Radiotherapy Satellite Centre (RSC) at Nevill Hall Hospital, Abergavenny.</p> <p>The development of a Radiotherapy Satellite Centre is part of the Transforming Cancer Services (TCS) clinical service model which seeks to place people at the centre of the conversation, identify what they value most from the services provided now and how that may change in the future, and deliver it in the most efficient and effective manner. The TCS clinical service model has been developed by Velindre University NHS Trust in partnership with stakeholders, including CHCs, patients, other health organisations and the voluntary sector.</p> <p>At present, Radiotherapy is provided by Velindre University NHS Trust (VUNHST) at the Velindre Cancer Centre (VCC),Whitchurch, Cardiff for the whole of the South East Wales region (population 1.5. million) and has eight treatment machines known as linear accelerators (linacs). The proposed change will see an expansion to the current Velindre Cancer Centre radiotherapy service with the majority of South East Wales residents continuing to receive their treatment at</p>	

	<p>Velindre Cancer Centre in Cardiff but the addition of a radiotherapy satellite centre at Nevill Hall Hospital, hosting an additional two treatment machines and thereby providing a more local radiotherapy service for some patients.</p> <p>The development of the service is a joint project between Aneurin Bevan UHB (ABUHB) and Velindre University NHS Trust (VUNHST), to serve the populations of both North Aneurin Bevan, Powys and North Cwm Taff, which will be closer to residents than Velindre Cancer Centre. The proposed addition of a radiotherapy satellite will enable a proportion of South East Wales residents a choice of location from where to receive their radiotherapy treatment, which previously did not exist.</p> <p>The planned timescale is for the Radiotherapy Satellite Centre to open 2023/24.</p> <p>In summary the objective is to deliver a Radiotherapy Satellite Centre that will provide excellent care for cancer patients from across the north of Velindre Cancer Centre's catchment population, closer to their homes and therefore improving quality of care, patient experience and clinical outcomes. The Radiotherapy Satellite Centre will also support Velindre NHS University Trust in its ambition to be an international focal point for research and education</p>
Who is the Executive Sponsor?	Steve Ham, Chief Executive

<p>We have a legal duty to engage with people with protected characteristics under the Equality Act 2010 identified as being relevant to the policy.</p> <ul style="list-style-type: none"> • What steps will you take to engage and consult with stakeholders, (internally and externally)? • How will people with protected characteristics be involved in developing the policy, procedure, strategy and or decision from the start? • Outline how proposals have/will be communicated? • What are the arrangements for engagement as the policy/procedure/strategy or decision is being implemented? 	<p>The service change proforma outlines that both through the Transforming Cancer Services and Radiotherapy Satellite Centre projects there have been discussions with stakeholders. The CHC has been involved through the evaluation process, as part of the development of the Clinical model within Transforming Cancer Services Programme and the evaluation panel for the selection of the site to host to Radiotherapy Satellite Centre. In addition on behalf of the project Andrea Hague, Director of Service Transformation, presented to the joint CHC meeting in October 2020 and as a result it was recommended that this change proforma be produced for full considerations by CHCs Joint Planning and Service Change Committee on 16 April 2021.</p> <p>In addition ABUHB and VUNHST have developed a communications and engagement strategy for the project which involves a number of key patient focus groups and surveys to identify the things that are important to consider in finalising the design of the Radiotherapy Satellite Centre and also for any public engagement events.</p>
<p>Does the policy assist services or staff in meeting their most basic needs such as;</p> <ul style="list-style-type: none"> • Improved Health • Fair recruitment etc. 	<p>The rationale for the development of a Radiotherapy Satellite Centre serving the population of South East Wales is as follows:</p> <ul style="list-style-type: none"> • Currently Insufficient capacity to meet demand: • To improve clinical outcomes • To improve access rates for radiotherapy • Provide equitable access to radiotherapy

	<ul style="list-style-type: none"> • Reduced journey times for patients: • Improve access to research • Alignment with National policies • Improve patient experiences • Improve integration of services • Flexibility to increase capacity.
<p>Who and how many (if known) may be affected by the policy?</p>	<p>Whilst Cancer can affect any age, it remains a disease predominantly of people aged over 65 and for some cancers socio economic status impacts on incidence levels.</p> <p>Radiotherapy is currently provided using eight linacs at the Velindre Cancer Centre, Cardiff, for the eligible patients from South East Wales (approximate population of 1.5. million). The service is managed and operated by Velindre University NHS Trust.</p> <p>As outlined above, the populations of north Gwent, Powys and north Cwm Taff who are receiving radiotherapy treatments will benefit from this service. It has been estimated that over 6300 attendances pa will benefit, with over 2957 hours pa of patient travel time saved and 98% patients having a journey time of less than 45 minutes (Royal College of Radiologist recommendation).</p>

	<p>In addition it is anticipated that provision of a satellite radiotherapy centre will improve access rates to radiotherapy by 2%, resulting in an additional 231 patients receiving treatment, including 115 additional cancer survivors.</p>
<p>In review of the Well-being of Future Generations Act Which Well-being Goals does this contribute to and how?</p> <p>Please select from drop down box, if multiple, please list.</p> <p>If none, how will it be adapted to contribute to one?</p>	<p>A Healthier Wales</p> <p>A Resilient Wales A More Equal Wales A Wales of Cohesive Communities A Globally Responsible Wales</p>
<p>Evidenced used/considered</p> <p>Your decisions must be based on robust evidence. What evidence base have you used in support?</p> <p>Evidence includes views and issues raised during engagement; service user or citizen journeys, case studies, or experiences; and qualitative and experience based research, not just quantitative data and statistics.</p> <p>Please list the source of this evidence;</p> <ul style="list-style-type: none"> • Identify and include numbers of staff, broken down by protected characteristics and other relevant information • What research or other data is available locally or nationally that could inform the assessment of impact on different equality groups? Is there any information available (locally/nationally) about how similar 	<p>Patients who have a diagnosis of cancer will benefit from this service change and in particular those referred for radiotherapy treatment. Radiotherapy is currently only provided in Velindre Cancer Centre for the population of South East Wales (1.5million). There are over 4600 referrals pa to Velindre Cancer Centre for radiotherapy treatment. Radiotherapy has an important role in the treatment of cancer as approximately 50% of all cancer patients will benefit from radiotherapy as part of their cancer management and 40% of all patients cured of cancer are cured by radiotherapy (World Health Organization (WHO) and the International Atomic Energy Agency (IAEA)).</p> <p>As outlined earlier, and in the change proforma, the TCS engagement exercise identified a preferred clinical service model which included development of a satellite Radiotherapy Centre.</p> <p>There is a range of literature/evidence, as well as anecdotal and qualitative feedback, which suggests that travel time impacts on update of radiotherapy treatments with patients living</p>

<p>policies/procedures/strategies or decisions have impacted on different equality groups (including any positive impact)?</p> <p>Do you consider the evidence to be strong, satisfactory or and are there any gaps in the evidence?</p>	<p>further away from a centre less likely to take up the offer of radiotherapy treatment. Royal College of Radiologists recommend a travel time of 45 minutes and the development of the Radiotherapy Satellite Centre improves access so 98% patients will live within this recommended travel time.</p> <p>It is anticipated that provision of a satellite radiotherapy centre will improve access rates to radiotherapy by 2% from 37% to 39% (against guidance and best practice for radiotherapy of 41%) resulting in an additional 231 patients receiving treatment, including 115 additional cancer survivors.</p> <p>Currently the Trust recognises that its equality information on patients is limited to sex and age primarily, with some data on ethnicity and religion for some patients. As such the Trust needs to reflect on population data and the cancer surveillance for more in-depth data, however from that analysis it is know that parts of ABUHB and CTMUHB have some of the most deprived communities in Wales (and in the UK) and some of the highest incidences of cancer in Wales; thus provision of a more local radiotherapy centre to these population should make it easier for these groups to access treatment.</p>
<p>Who is involved in undertaking the EQIA</p>	<p>Andrea Hague, Director of Service Transformation, VUNHST. Ceri Harris – Equality & Diversity Manager, VUNHST.</p>

Equality Duties, Sustainable Development Principles

	Protected Characteristics	Additional	Sustainable
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Does the policy/procedure, strategy, e-learning, guidance etc meet	Race	Sex/Gender	Disability	Sexual orientation	Religion and Belief	Age	Gender reassignment	Pregnancy and Maternity	Marriage/ civil Partnerships	Welsh Language	Carers	Long Term	Collaboration	Involvement	Prevention	Integration
<ul style="list-style-type: none"> Public Sector & specific duties - Equality Act 2010 Welsh Language Standards (2011) Sustainable Development Principles? 																
To eliminate discrimination and harassment	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓
Promote equality of opportunity	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓					
Promote good relations and positive attitudes	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓					
Encourage participation in public life	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓					
In relation to disability only, should the policy/service/project or scheme take account of difference, even if involves treating some individuals more favorably?			✓													

Key	
✓	Yes
x	No
-	Neutral

Human Rights Based Approach – Issues of Dignity & Respect

The Human Rights Act contains 15 rights, all of which NHS organisations have a duty. The 7 rights that are relevant to healthcare are listed below.			
Consider is the policy/service/project or scheme relevant to:	Yes	No	N/A
Article 2: The Right to Life	✓		
Article 3: the right not to be tortured or treated in a inhumane or degrading way	✓		
Article 5: The right to liberty	✓		
Article 6: the right to a fair trial	✓		
Article 8: the right to respect for private and family life	✓		
Article 9: Freedom of thought, conscience and religion	✓		
Article 14: prohibition of discrimination	✓		

Measuring the Impact

Reason for your decision (including evidence used). Include details of how it might impact on people from this group and how opportunities to advance equality and good relations have been maximised.	
Protected Characteristics & Other Areas	Impact – operational & financial
<ul style="list-style-type: none"> • Race • Sex • Disability • Sexual orientation • Religion belief & non belief • Age • Gender Identity • Pregnancy & maternity • Marriage & civil partnership • Carers 	<p>In the paper it explains the advantages/positive outcomes of this new service explaining that the provision of a Radiotherapy Satellite Centre at Nevill Hall Hospital will enable up to 20 % of radiotherapy (2 linacs) provided by Velindre University NHS Trust to receive their radiotherapy treatment within their locality rather than having to travel to Velindre Cancer Centre in Cardiff (latter will have 8 linacs).</p> <p>This will;</p> <ul style="list-style-type: none"> • Reduced travel time – As outlined in question 5 and Appendix 1 of the change proforma, the impact of a Radiotherapy Satellite Centre is reduced journey times for patients: 98% of radiotherapy patients in South-East Wales would have a journey time of less than 45 minutes (as recommended by the Royal College of Radiologists). <p>From an equality point of view the reduction of travel time will be a positive improvement for patients, as most patients have to travel every week day for many weeks, sometimes up to 6 consecutive weeks). The reduced travel will help those balancing caring responsibilities, as well as patients with mobility difficulties for example or those who would have their physical and mental health impacted by long periods of travel.</p> <p>There is an ambulance service to transport cancer patients to appointment, however this process may take</p>

a patient a whole day of travel and waiting around for other patients, so it is currently sub optimal. Therefore there needs to be further work to look to provide a more flexible and agile approach to patient transport needs, including walking times and public transport.

- **Improved access to radiotherapy:** It is estimated that access rates for radiotherapy treatment would increase by 2% resulting in 231 additional patients receiving radiotherapy treatments and therefore impacting on clinical outcomes, including 115 additional cancer survivors. (Fuller details in Outline Business case).

The definition of access in this description is based on numbers of people using the service rather than access to information, communication needs or physical access issues. From an equality, socio economic view, it recognizes that this additional provision of service, will enable patients to choose their preferred location for service. Empowering them to take active decisions in their care and aid quicker access to treatment.

- **Equitable access** to radiotherapy: Local outreach services promote more equitable access to services.

It is recognised that by providing outreach services, this will make access easier for some people, but it will not be the answer for everyone. The Trust will continue to look at public transport access, communication, awareness, and inclusivity and awareness of difference community and individual needs.

- Improved **integration of services**: There would be an increased oncology presence in secondary care (NHH) which would help to better integrate and co-ordinate treatment and care, and transfer oncology knowledge and skills into secondary care and vice versa.
- **Improved patient experience**: An integrated care model that is person-centred and locally available will lead to improved patient experience.
- **Flexibility to increase capacity**: The proposed site at the Nevill Hall Hospital has expansion space to support the installation of two more linacs, if required in the future, to meet an increase in radiotherapy demand.
- Meet expectations of **timeliness** for treatments by providing sufficient treatment capacity to meet forecast demand
- Best in class facilities providing the best patient experience possible
- **Improve recruitment** and retention of staff through role and skills development commensurate with technology and technique advances and career progression opportunities

Currently whilst there do not appear to be any disadvantages, it is recognised there is a need to keep an open mind and listen to the public and patients to ensure that there are no underserved groups. It would be hoped that any such issues can be highlighted through the public engagement too.

In considering how the scheme might impact on people with protected characteristics the following has also been considered:

Age and Sex

Cancer is predominantly a disease which affects people aged over 65, although it can affect at any age. Older patients are more likely to have comorbidities which is key factor to be considered when treating cancer patients and managing side effects of treatment.

Cancer affects all sexes, although there may be differences in the types of cancers. Initially it is planned to treat breast and prostate cancers at the Radiotherapy Satellite Centre, thereby providing services for the 2 most common cancers and offering local treatment for all genders.

Race

It is recognised there is a requirement by some patients for translation and interpretation services and access to volunteers and staff who can converse in the patient's chosen language.

Disability

In designing the service and the new physical facility account will continue to be taken of any requirements for those with physical disability e.g. wheel chair accessibility, suitable environment for those with sensory loss. In addition consideration will be given to those with learning disabilities and mental health issues in recognition that radiotherapy treatment may seem especially frightening for them.

Pregnancy/Maternity and Marriage/Civil partnerships

No impact upon these protected characteristics is anticipated.

Religious Belief and Non Belief

It will be important for staff to consider and recognise patient's beliefs and any impact upon treatment decisions; but also on issues in respect of prayer, diet and rituals. Whilst there is not a specific multifaith or reflective room within the centre patients will be able to access such facilities in the main NHH.

Gender Identity

In designing the layout and service for the Radiotherapy Satellite Centre every effort has been made to consider the requirements for transgender patients and ensure their privacy and dignity is protected in the same way as for all other patients, e.g. pass through changing room layout to avoid waiting in gowns in communal waiting areas.

Sexual Orientation

The service plans to ensure patient's needs and personal circumstances are considered when providing care as evidence (Stonewall) suggests that often patients feel anxious about accessing care which can then lead to them refusing treatment.

Carers

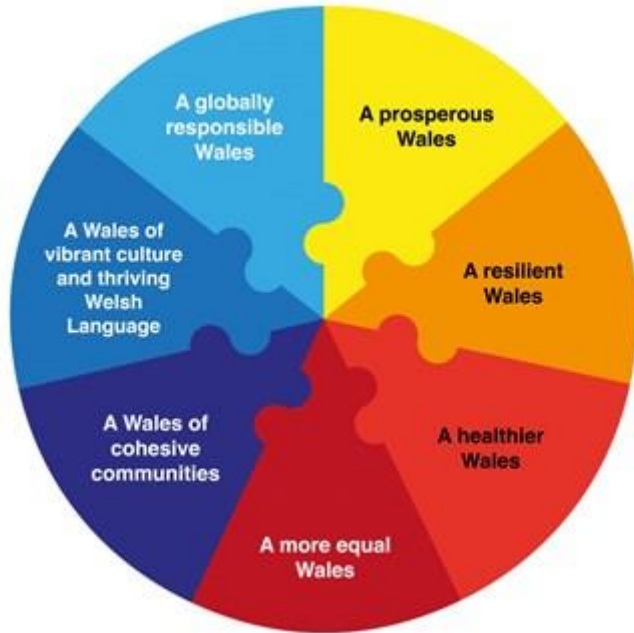
Reduced travel times will benefit carers/companions of patients who may take less time off work to accompany patients to appointments. In addition they will also be benefited by developing the service to meet the needs of

	<p>individuals and protected characteristics of patients and providing these services closer to home, as it will reduce stress and worry about support for them and the patient.</p>
<p>Welsh Language Standards</p>	<p>Impact – Operational & Financial</p>
<p>Does the policy, service, or project have positive or negative effects on:</p> <ul style="list-style-type: none"> a) Opportunities for persons to use the Welsh language? b) Does it treat the Welsh language less favourably than the English language? <p>The Welsh language Standards are:</p> <ol style="list-style-type: none"> 1. Operational Standards – how we operate 2. Service Delivery – how we deliver our services 3. Record Keeping – how we keep a record of our services e.g. language needs of patients or donors 4. Policy making – how we develop our policies 5. Supplementary Standards – how we report on our services 	<p>The service in the Radiotherapy Satellite Centre will be managed and operated by VUNHST and will utilise the Trust’s policy and practices on Welsh Language Standards with the aim that patients wishing to use welsh language are able to do so thereby giving equal status to welsh language and culture.</p> <p>With regard to the workforce, a workforce and development plan for the Radiotherapy Satellite Centre is being finalised and welsh language skills will be included in workforce planning along with wider diversity needs.</p>

Wellbeing Goals

How does the policy/procedure, strategy, e-learning, guidance etc. embed, prioritise the Well-being Goals and Sustainability Development Principle of the Well-being of Future Generations (Wales) Act 2015?

Please describe and provide evidence below of how the 5 ways of working have been met, inclusive of the 7 well-being goals, to maximise the social, economic, environmental and cultural wellbeing of people and communities in Wales.



A Healthier Wales

The aim of the satellite service is to bridge the gap in current cancer care provision and recognize the needs to go to communities to provide care, rather than a medical approach of asking patients to travel to the centre. Alongside the productive use of technology, such as on line appointment. This means we are empowering our patients to have a greater choice on their care plans.

A Resilient Wales

The new service will build more resilience in cancer care services, recognizing the need for greater flexibility.



A More Equal Wales




The development of a new service provides an opportunity to build equality and inclusion into its foundations. From how we contact the patient, how they access our services to the ongoing support and wellbeing of patient centered care.

A Wales of Cohesive Communities

The Cancer center working together in engagement with the communities; from the cancer patient community to the wider South Wales community.

Sustainable Development Principles

<p>Hirdymor  Long Term</p> <p>Balancing short term with long term needs</p>	<p>The satellite center is part of a longer term goal to improve the experiences of current and future cancer patients, recognising their individual needs, working to remove barriers to access and providing quality of life in all aspects possible.</p> <p>This needs to include engagement at its core now and over the next 20 plus years.</p>
<p>Cydweithio  Collaboration</p> <p>Working together to deliver aims and objectives.</p>	<p>Working in collaboration with CHC, as well as other 3rd sector organizations and NHS bodies as a multi-agency approach to providing the best individual care to patients and their families.</p>

<p style="text-align: center;">  </p> <p style="text-align: center;">Cynnwys Involvement</p> <p>Involving those with an interest and seeking their views</p>	<p>Involvement will include the agencies mentioned above as well as the workforce, both currently in Velindre Cancer Centre and at Nevill Hall Hospital.</p>
<p style="text-align: center;">  </p> <p style="text-align: center;">Atal Prevention</p> <p>Putting resources into preventing problems occurring or getting worse</p>	<p>Recognizing from the outset and building it into plans the resources needed to meet engagement needs, from communication, awareness, training and ongoing support during a period of change.</p> <p>Working with access groups and leads to ensure the building is accessible, looking at signage, wayfaring and the use of technology to support patients and service users.</p> <p>Have an open communication policy that reacts to issues and concerns raised in a timely matter, listening and empathizing.</p>
<p style="text-align: center;">  </p> <p style="text-align: center;">Integreiddio Integration</p> <p>Considering impact on all wellbeing goals together and on other bodies</p>	<p>Working closely with Aneurin Bevan UHB, CHC and 3rd sector partners to embed and integrate the wellbeing goals in all aspects of the service.</p>

Socio Economic Impact	Impact – Operational & Financial
<p>How does the policy/procedure, strategy, e-learning, guidance etc. ensure transparent and effective measures to address the inequality of outcome that result from socio-economic disadvantage?</p> <p>Examples of inequality of outcome might include for example, education attainment, employment and earning potential, health and mental health access to services and goods, opportunity to participate in public life, housing.</p>	<p>The socio economic duty come into force this year, its aim is to ensure that strategic decisions address areas and issues of inequality.</p> <p>When considering the location of the satellite center socio economic impact may be hidden. As such it is important to not just focused on stereotypes of poverty or deprivation but look at issues of access to education, affordable housing and digital poverty for example; and not make assumptions based on the house someone lives in or the job someone has but looking instead at their experiences.</p> <p>Thus the decision on the location of the satellite center, the types of services it provides and the partners it works, with alongside the information about the service, is important.</p> <p>Patients from surrounding areas such as Merthyr and Blaenau Gwent, who experience higher levels of deprivation, and higher incidence of cancer, may choose to access cancer services from Nevill Hall Hospital due to better public transport access, travel times</p> <p>These areas have been shown to have higher cases of commodities that could influence their health outcomes and it is recognised they may need additional support and resources from the cancer center as well as external support services. Including advocacy and multi-agency support.</p>
Positive Action	Impact – Operational & Financial

If the policy, procedure, strategy and or decision is intended to increase equality of opportunity through positive action, does it appear to be lawful?

Positive action is defined as voluntary actions employers can take to address any imbalance of opportunity or disadvantage that an individual with a protected characteristic could face.

As part of workforce planning for Radiotherapy Satellite Centre, VUNHST will seek to include potential positive action scheme where there might be areas of imbalance, such as community languages and diversity representation.

Outcome report

Action Required		Potential Outcomes	Time-scale	Lead Officer	Resource implications
1	Involvement of access group in the design of center.	Cost of retrospective changes to building, signs etc.	ASAP	Andrea Hague, Director of Service Transformation, VUNHST	Engagement cost, reasonable expenses if using a local group – consultancy costs.
2	Community and Public Engagement	Improved services, due to positive engagement. Challenges to current service design.	ASAP	Andrea Hague, Director of Service Transformation, VUNHST	Cost of communication material, interpreters, venue and support of use of technology. Use of third party to provide engagement of diverse underserved groups and voices.
3	Review of engagement and services	Be prepared to make changes and improvements.	Continuous, but at least annual – 3 year periods.	Andrea Hague, Director of Service Transformation, VUNHST	Cost of engagement exercises and analysis of findings.

Risk Assessment based on above recommendations – if policy is approved in original format refer to grading in Annex 1

Recommendation	Likelihood	Impact	Risk Grading
1	2	3	6
2	2	3-4	6-8



GIG
CYMRU
NHS
WALES

Ymddiriedolaeth GIG
Prifysgol Felindre
Velindre University
NHS Trust

3	2	3	6
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Reputation and compromise position	Monitoring Arrangements
<p>There have been challenges over the TCS work, which has resulted in reputational damage. So going forward the Trust needs to ensure that engagement also includes the groups that have challenged, to be transparent and actively listen to concerns raised to find an appropriate solution? With regards the satellite center it's about ensuring that engagement and information on the development of the services are clear and provided in accessible formats that are reflective of the community. So looking at diverse images, avoiding stereotypes and using appropriate language.</p>	<p>The service rollout is scrutinized internally and externally, information is available in accessible formats and there is an open dialogue through all stages of development and ongoing service roll out.</p>
Training and dissemination of policy	
Workforce training is in place and supported.	

Is the policy etc. lawful?	Yes <input type="checkbox"/>	No <input type="checkbox"/>	Review date
Does the EQIA group support the policy be adopted?	Yes <input type="checkbox"/>	No <input type="checkbox"/>	

Signed on behalf of Trust Equal Impact Assessment Group		Signed Lead Officer	
Date:		Date:	

Annex 1

Impact, Consequence score (severity levels) and examples					
	1	2	3	4	5
	Negligible	Minor	Moderate	Major	Catastrophic
Statutory duty	No or minimal impact or breach of guidance/statutory duty Potential for public concern Informal complaint Risk of claim remote	Breach of statutory legislation Formal complaint Local media coverage – short term reduction in public confidence Failure to meet internal standards Claims less than £10,000 Elements of public expectations not being met	Single breach in statutory duty Challenging external recommendations Local media interest Claims between £10,000 and £100,000 Formal complaint expected Impacts on small number of the population	Multiple breaches in statutory duty Legal action certain between £100,000 and £1million Multiple complaints expected National media interest	Multiple breaches in statutory duty Legal action certain amounting to over £1million National media interest Zero compliance with legislation Impacts on large percentage of the population Gross failure to meet national standards

LIKELIHOOD DESCRIPTION	
5 Almost Certain	Likely to occur, on many occasions
4 Likely	Will probably occur, but is not a persistent issue
3 Possible	May occur occasionally
2 Unlikely	Not expected it to happen, but may do
1 Rare	Can't believe that this will ever happen