Overview

On 7 June 2011, NHS Ayrshire & Arran’s then Chief Executive attended a seminar on 7 June 2011 provided by NHS Health Scotland to find out how other Boards were approaching equality impact assessment of financial decisions. Following on from this, a presentation on EQIA of financial decisions was given at our Directors’ Team and the Equality and Human Rights Commission “Using the equality duties to make fair financial decision: A guide for decision-makers” was re-circulated.

As well as the support provided to the Directors Team, monthly Equality Impact Assessment training was offered by the Equality and Diversity Officer to support staff with the process. Equality Impact Assessment continues to be promoted across the organisation and has been updated in line with the requirements of the Equality Act 2010. Through the impact assessment process, it is envisaged that any adverse impacts will be considered and mitigated as far as possible.

Working with the PFPI team, our equality impact assessment toolkit was incorporated into the service change protocol to ensure impact assessment was being undertaken alongside any service changes.

Equalities in the budgeting process

- How were equalities issues taken into consideration in allocating budgets in 2012-13? (Please describe the process undertaken)

Equality issues are considered as part of the ongoing process of equality impact assessment. When developing policies and practices, NHS Ayrshire & Arran staff are required to assess the impact of change on the various equality groups. Given the requirement for efficiency savings, it is inevitable that there will be some adverse impacts and NHS Ayrshire & Arran have to look at ways to mitigate as far as possible these impacts. NHS Ayrshire & Arran as part of the service change process focus on ways to improve within existing resources rather than looking at it in isolation.

- Was the approach taken for the 2012-13 budget any different from that taken in 2011-12? (If YES, please describe what changed in your approach)

In early 2012, NHS Ayrshire and Arran held three meetings where stakeholders were invited to discuss cost pressures.

- Can you provide any examples of how equalities considerations influenced agreed budgets? (Please provide up to THREE examples)

1. NHS Ayrshire and Arran in partnership with the Royal National Institute for the Blind (RNIB) and local councils have approved funding to create a vision support services to provide emotional and practical support for patients diagnosed with slight loss or visual impairment. This new investment builds on joint working with RNIB dating back to 2005 on Bridge to Vision which responded to unmet visual needs of adults with a learning disability. An independent project evaluation was commissioned through the public health department and showed positive clinical outcomes from this earlier work.
2. There was a need to relocate sexual health services in South Ayrshire. A decision had been taken to relocate the service to one of the main hospitals. Through the service change process (which also includes impact assessment and due consideration of the feedback from a previous survey of young females) concern was raised about the hospital location, the decision was changed and the service is now being relocated within a health centre rather than the hospital to ensure young females continue to access the service. This decision was based on the needs of young females rather than a cost saving exercise.

**Equalities in mainstream services**
For your three most significant mainstream services (in terms of cost), please provide details of

a) The total budget for this service in 2011-12 and 2012-13

<table>
<thead>
<tr>
<th>Service</th>
<th>2011/12</th>
<th>2012/13</th>
</tr>
</thead>
<tbody>
<tr>
<td>Emergency services</td>
<td>£127</td>
<td>£125</td>
</tr>
<tr>
<td>Planned services</td>
<td>£177</td>
<td>£179</td>
</tr>
<tr>
<td>Primary care</td>
<td>£100</td>
<td>£101</td>
</tr>
</tbody>
</table>

b) The impact (positive or negative) that this service has on equality groups

Health services are open to all who require to access them and as part of the mainstreaming agenda; NHS Ayrshire & Arran tend to implement reasonable adjustments to support those where necessary rather than as an additional service for a particular group. Obviously certain services are already in place for particular groups such as mental health services, cancer services and learning disability services but for the most part, our services are open to all.

c) The impact (if any) that any budget changes have had on equality groups

As outlined previously our budget changes are subject to equality impact assessment and steps are taken to mitigate as far as possible any adverse impacts as a result of financial circumstances.

**Service provision for equalities groups**
For up to THREE services with a specific focus or provision for equalities groups, please provide details of

a) The total budget for this service in 2011-12 and 2012-13

<table>
<thead>
<tr>
<th>Service</th>
<th>2011/12</th>
<th>2012/13</th>
</tr>
</thead>
<tbody>
<tr>
<td>Mental health</td>
<td>£81</td>
<td>£81</td>
</tr>
<tr>
<td>Learning disabilities</td>
<td>£4</td>
<td>£4</td>
</tr>
<tr>
<td>Maternity, children and sexual health</td>
<td>£39</td>
<td>£39</td>
</tr>
</tbody>
</table>

b) The impact that this service has on equality groups.

Health services are open to all who require to access them and as part of the mainstreaming agenda; NHS Ayrshire & Arran tend to implement reasonable adjustments to support those where necessary rather than as an additional service for a particular group. Certain services are already in place for particular groups such as mental health...
services, learning disability services and women and children’s services with an example of a change to sexual health services given above.

c) The impact (if any) that any budget changes have had on equality groups

As outlined previously our budget changes are subject to equality impact assessment and steps are taken to mitigate as far as possible any adverse impacts as a result of financial circumstances.

**Mainstreaming equalities**

- What specialist services or programmes have been, or are being altered, in the interests of mainstreaming?

As outlined previously NHS Ayrshire & Arran try to ensure that our services are accessible by all equalities groups to avoid the need to set up specific services. By implementing reasonable adjustments, it is hoped that anyone regardless of their protected characteristics can access our services.

In line with the setting of equality outcomes as outlined in the Specific Duties, which came into force on 27 May 2012, NHS Ayrshire & Arran have identified the routine enquiry of Gender Based Violence as one of our equality outcomes. It is anticipated that the work being taken forward over the next four years will be mainstreamed into existing business. This work will cut across a number of equalities groups.

- What monitoring is in place to ensure that the relevant equality groups continue to access an appropriate service?

Through SMR00 and SMR01 returns, all Boards are scrutinised on their monitoring of ethnicity. With the implementation of the new patient management system, NHS Ayrshire & Arran is looking at ways to improve the recording of ethnicity as well as other equalities data which will support future service planning and delivery.


John G Burns  
Chief Executive  
NHS Ayrshire & Arran  
27 August 2012