EIA Scottish Improvement Science Collaborating Centre (SISCC)

School/ Directorate School of Nursing and Health Sciences

Created 23rd May, 2018

Status Assessed Person Responsible Gillian Clark

Last Review 23rd May, 2018

Next Review 31st July, 2019

Screening Data

What is the name/title of the policy/activity?

Scottish Improvement Science Collaborating Centre (SISCC) funding application

Describe the aim, objective and intended consequences of the policy/activity.

To enhance the evidence base for large scale sustainable change across health and social care.

Who is responsible for the policy/activity and who implements it?

SISCC is responsible for managing funding and allocating the work programme. The delivery of individual projects within the role of SISCC is the responsibility of project leads.

Who is effected by this policy?

Staff, health services, social care services and ultimately end users of these services all are stakeholders in relation to the work that SISCC carries out. On occasions work is also carried out with students of University of Dundee.

Is there any indication that this policy is relevant to equality and the protected characteristics or that those with any of the protected characteristics will have a different experience in relation to the intended outcomes of the policy?

Yes. The programme supports funding for projects across a range of services. This will have an impact of the staffing of projects and the experience of the end user of the health and social care services.

In relation to staffing, depending on whether the funding is made available, staff may be affected if funding is lost from a particular project. Both social care and health care have a significant gender imbalance across many areas. The funding of projects allows us to apply a requirement to support diversity of staffing for the project. In relation to service users, it is well known that the population is ageing and one of the projects being funded through this is the use of a tool for early identification of risk to over 75's from particular diseases. In addition there are changes required in social care to support the ageing population, as well as evidenced links between ageing and disabilities. In terms of race, there is evidence to suggest that the access to social care is limited for some groups, and issues of isolation within the wider community has a detrimental effect on health and well being. By ensuring that funding continues to be available for this type of research and improvement, the end user will benefit and those end users will be of a diverse make up.

Recommend this EA for Full Analysis?

Comments

The Centre does have a relevance to equality. In terms of staffing, it provides funding for work programmes. These are staffed currently by a small but diverse group of people and the people involved vary, depending on the nature of the work being carried out. In areas of health and social care there is a gender divide in the different areas of health and social care and this centre helps to ensure a mix of people achieve an understanding of issues. In addition the Centre funds work into improving health and social care for the public generally, but also carries out specific pieces of work. One example is the approach to early identification of those over 75's who will likely need greater levels of health and social care. In addition, research has shown that BME communities, whilst living longer than many of their white neighbours, experience a much greater range of health and care needs.

There is a clear link between social disadvantage and health and so any work to identify improvements to both health and social care is likely to have a significant positive impact on these and other groups.

Rate this EA

Low

Impact Assessment Data

Is this policy relevant to the protected characteristic of Age?

Yes

Yes - one of the areas of current work is a tool for early identification of risk of age related diseases in over 75's.

The age profile of teams applying for funding is wide ranging.

Is this policy relevant to the protected characteristic of Disability?

Yes

Yes- in relation to staffing, any member of staff who identifies as having a disability is provided support where necessary. Reasonable adjustments will be introduced in line with their individual needs. In relation to service delivery matters, the work carried out by the Centre supports the improvement of services to people generally. However there are clear links between ageing and disability and one of the key projects at the minute is related to improving the early detection of people who are likely to be in greater need of health and social care service over the age of 75.

Is this policy relevant to the protected characteristic of Gender Reassignment?

Yes

Attitude toward those who re-assign their gender varies and people often find themselves isolated. There is also evidence of significant numbers of people who are affected by isolation, depressive type ailments and who self harm because of gender identity issues.

The work of the Centre helps to support improved services in health and social care and it may well be that someone re-assigning will benefit from this work.

Is this policy relevant to the protected characteristic of Marriage and Civil Partnership?

• No

There is no differential relevance in terms of marriage and civil partership

Is this policy relevant to the protected characteristic of Pregnancy and Maternity?

Yes

Yes - the nature of the Centre's work is the improvement of health and social care. Pregnancy and maternity needs may well be identified as a piece of work and the benefits of the program are likely to be wide reaching , including pregnancy and maternity services and care

Yes - in relation to staff, selection of staff to participate in any of the projects would be based solely on skills and anyone selected would be permitted their entitled leave etc. as per the University policies.

Yes - some of the projects may present risks to pregnant mothers or their unborn child. In relation to pregnancy and maternity needs, any piece of work which may risk mother or child will be subject to a Health and Safety Risk Assessment, as per University policy.

Is this policy relevant to the protected characteristic of Race?

• Yes

At present there is no confirmation that any project has a specific relevance to race, the overall benefits of improving services will undoubtedly benefit wider communities, including minority ethnic individuals and communities. There is evidence of long life but greater ill health amongst minority ethnic groups and also evidence of difficulties in accessing services for a variety of cultural reasons.

In relation to staffing work programs, until this point in time the staff makeup has been international and very diverse. People apply and are selected for their skills in relation to the needs of any single project and this will continue to be reflected in our approach.

Is this policy relevant to the protected characteristic of Religion and Belief?

• No

There is no relevance to religion and belief that is known. A training program is under development, however that is an online program and can be accessed at any time, avoiding conflict with times for religious adherence.

Is this policy relevant to the protected characteristic of Sex?

• Yes

In relation to the various projects, some will have a greater relevance to gender than others. It is well understood that certain ailments and conditions have a greater impact on one gender over the other and that women are more likely to visit their GP than men. The work carried out by the Centre takes cognisance of different groups and needs in order to improve services all round.

In relation to staffing, it is difficult to get men into health and social care areas such as nursing and social work. The project teams tend to be very mixed , with gender and race balances.

Is this policy relevant to the protected characteristic of Sexual Orientation?

• No

Sexual orientation is not relevant to the Centre and the projects being undertaken.

Taking account of the findings so far, is there a possibility that the implementation of this policy would result in a different experience or a detriment for those with protected characteristics?

• Yes

The Centre determines funding for individual projects to improve health and social care. For a number of the protected groups there are particular challenges in terms of access to both these areas of care. The projects supported by the Centre will contribute to an overall benefit to service users generally and specifically in relation to the protected groups. For example we are aware that our population is aging and with that comes an increase in the numbers of people living with complex health needs and also a greater demand on social care. One project specifically looks at the early markers for risk from particular diseases in the over 75's, thereby helping services to identify level and type of need required. In addition, a recent report or race and health matters highlighted that whilst some ethnic groups live longer, they experience a greater number of ailments.

Based on your findings so far, what recommendations or changes (if any) would you make in relation to the policy and how it is implemented?

The recommendation is that the funding for the Centre continue because of the work it does to improve services in

health and social care at a time when demand is becoming greater.

No change to the status quo in relation to the Centre, however in order to ensure equality of approach, projects should take account of the different aspects relating to the protected groups. This will support the elimination of discrimination in terms of access to services amongst some groups and also encourage equality of opportunity.

Where you have recommended actions/changes to the policy, what are the timescales for completion of these

24-05-2018

What monitoring arrangements do you have in place to identify changes in any impact or relevance?

Staffing selection will be monitored to ensure a diversity of staff and projects will be scrutinised to ensure research includes links to the protected groups. This can be achieved by introducing the protected groups into the check list on the project plan.

Comments

The work of the Centre is about improving services. Evidence is available to show that access to health and social care varies across protected groups and that there is a link between some of the protected groups in relation to health. The work of the Centre has particular benefit in relation to the aging population, however there are clear links with that and disability and race. In terms of general health service provision, particular groups have very differing experiences and improvement to health and social care services should be take account of the very individual issues affecting protected groups.

Organisation Sign-off Data

Having read the EIA, do you approve its findings and recommendations?

Yes

What are your reasons for approving/not approving the EIA?

Agreement with the activities of the project

If you have approved the EIA, do you agree with the monitoring arrangements in place?

Yes

Where you have not approved the monitoring process, what other steps do you require to be taken?

N/A

Comments

The impact of the work carried out by the Centre is positive in terms of the protected characteristics. Currently there are areas where health and social care lack knowledge ad understanding to provide a fully effective service for these groups. The work of the Centre takes these into account when identifying ways of improving those services.

Next Review Date

2019-07-31

Outstanding Actions

No outstanding actions