

Tameside & Glossop Single Commissioning Function Equality Impact Assessment (EIA) Form

Subject / Title	COMMUNITY CARDIOLOGY DIAGNOSTICS SERVICE: ECG and ECG Interpretation, 24 hour Ambulatory ECG and event recorder Interpretation
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Team	Department	Directorate
Commissioning	Commissioning	Commissioning

Start Date	Completion Date
2 nd May 2018	4 th June 2018

Project Lead Officer	Alison Lewin
Contract / Commissioning Manager	Alison Lewin
Assistant Director/ Director	Jessica Williams

EIA Group (lead contact first)	Job title	Service
Alison Lewin	Deputy Director of Commissioning	Commissioning

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PART 1 – INITIAL SCREENING

<p>1a.</p>	<p>What is the project, proposal or service / contract change?</p>	<p>Tameside and Glossop CCG commission Broomwell Healthwatch TeleMedical Monitoring Services Ltd to deliver community cardiology diagnostic services:</p> <ul style="list-style-type: none"> • Practice based 12 lead ECG service including provision of ECG machines and remote interpretation of all ECGs. • Neighbourhood based 24hour ECG service including provision of ECG machines and remote interpretation of all ECGs. <p>Broomwell have delivered services to Tameside & Glossop for a number of years. The current contract was let in 2016 (1st April 2016) as a 3 year contract following a formal procurement process. The current contract will end on 31st March 2019. The indicative annual contract value for the 2 services is c£190k.</p> <p>The purpose of this report is to present options for the future commissioning of community cardiology diagnostic services for the population of Tameside & Glossop.</p>
<p>1b.</p>	<p>What are the main aims of the project, proposal or service / contract change?</p>	<p>The main proposal outlined in the report is to seek approval to extend the current contract, in line with the standard NHS Contract terms, with another two options for consideration.</p> <p>The specification in the current contract states that the Service Provider (Broomwell) shall</p> <ul style="list-style-type: none"> • Provide a timely, locally accessible service within the community • Rapid access to quality assured results • Increased access to diagnostic procedures • To ensure optimal client care, related to diagnostic outcomes • Address health inequalities • Improved quality of life for patients and their relatives/ carers • Provide a best value patient-focused service that fulfills the clinical needs of patients and other users. • Provide safe, efficient, responsive, comprehensive and effective services which meet National guidelines, accreditation requirements and statutory

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		<p>regulations.</p> <ul style="list-style-type: none"> • Provide a flexible and appropriate service that respond to changes in patient care and organisational requirements. • Ensure that service standards are met through the appropriate use of qualified and registered staff. Maintain a balanced skill mix that provides the best value service and ensure all staff are developed and trained to be competent for the work to be undertaken. • Work within, and meet the standards of a quality management system, ensuring all standard operating procedures comply with, National minimum standards and regulatory body's requirements. • Ensure that training is provided to GP practice staff to ensure the equipment is fitted correctly. Any training costs should be covered within the cost of the interpretation <p>The purpose of the report to SCB is to seek approval to extend this contract for a further 2 years in line with the conditions of the standard NHS contract. This is an initial EIA based on option 1 in support of the Community Cardiology Diagnostics Service report. If option 2 or 3 are selected by SCB then further research / engagement would need to be undertaken and a full EIA produced to evidence what this would mean for the service.</p>
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1c. Will the project, proposal or service / contract change have either a direct or indirect impact on any groups of people with protected equality characteristics?

Where a direct or indirect impact will occur as a result of the project, proposal or service / contract change please explain why and how that group of people will be affected.

Protected Characteristic	Direct Impact	Indirect Impact	Little / No Impact	Explanation
Age			✓	There is no anticipation that the development or implementation of this strategy will impact directly or indirectly on Age in any significant sense. Whilst the service may be used more by older adults, if option 1 is opted for this will mean service will continue as per current provision.
Disability			✓	There is no anticipation that the development or implementation of this

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				strategy will impact directly or indirectly on Disability in any significant sense
Ethnicity			✓	There is no anticipation that the development or implementation of this strategy will impact directly or indirectly on Ethnicity in any significant sense
Sex / Gender			✓	There is no anticipation that the development or implementation of this strategy will impact directly or indirectly on Sex/Gender in any significant sense
Religion or Belief			✓	There is no anticipation that the development or implementation of this strategy will impact directly or indirectly on Religion or Belief in any significant sense
Sexual Orientation			✓	There is no anticipation that the development or implementation of this strategy will impact directly or indirectly on Sexual Orientation in any significant sense
Gender Reassignment			✓	There is no anticipation that the development or implementation of this strategy will impact directly or indirectly on Gender Reassignment in any significant sense
Pregnancy & Maternity			✓	There is no anticipation that the development or implementation of this strategy will impact directly or indirectly on Pregnancy & Maternity in any significant sense
Marriage & Civil Partnership			✓	There is no anticipation that the development or implementation of this strategy will impact directly or indirectly on Marriage & Civil Partnership in any significant sense
NHS Tameside & Glossop Clinical Commissioning Group locally determined protected groups?				
Mental Health			✓	There is no anticipation that the development or implementation of this strategy will impact directly or indirectly on Mental Health in any significant sense
Carers			✓	There is no anticipation that the development or implementation of this strategy will impact directly or indirectly on Carers in any significant sense
Military Veterans			✓	There is no anticipation that the development or implementation of this

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				strategy will impact directly or indirectly on Military Veterans in any significant sense
Breast Feeding			✓	There is no anticipation that the development or implementation of this strategy will impact directly or indirectly on Breast Feeding in any significant sense
Are there any other groups who you feel may be impacted, directly or indirectly, by this project, proposal or service / contract change? (e.g. <i>vulnerable residents, isolated residents, low income households</i>)				
Group (please state)	Direct Impact	Indirect Impact	Little / No Impact	Explanation
n/a				

Wherever a direct or indirect impact has been identified you should consider undertaking a full EIA or be able to adequately explain your reasoning for not doing so. Where little / no impact is anticipated, this can be explored in more detail when undertaking a full EIA.

1d.	Does the project, proposal or service / contract change require a full EIA?	Yes	No
			✓
1e.	What are your reasons for the decision made at 1d?	<p>The proposal is to continue with a service which has been commissioned for a number of years in Tameside & Glossop. The view of the commissioner is that this service does not impact directly or indirectly on any of the groups outlined above. We have a robust contract monitoring process in place which would enable us to identify any issues should they arise, and we would work with the provider to rectify these.</p> <p>This is an initial EIA based on option 1 in support of the Community Cardiology Diagnostics Service report. If option 2 or 3 are selected by SCB then further research / engagement would need to be undertaken and a full EIA produced to evidence what this would mean for the service.</p>	

Signature of Contract / Commissioning Manager	Date
Alison Lewin	4 th June 2018
Signature of Assistant Director / Director	Date
Jessica Williams	4 th June 2018

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