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# PROVISION OF EMERGENCY GENERAL SURGERY IN SOUTHERN HEALTH AND SOCIAL CARE TRUST

**EQUALITY IMPACT ASSESSMENT** 



This document can be made available on request in alternative formats e.g. easy-read, electronic version, Braille, computer disc, audiocassette, large font, DAISY, and in other languages to meet the needs of those who are not fluent in English – see contact details on page 3.

### 1.0 Introduction

In keeping with the commitments in its Equality Scheme the Trust carried out an initial equality screening in relation to this proposal. The screening outcome was to progress to a full EQIA.

This Equality Impact Assessment (EQIA) Final Report should be read in conjunction with the original EQIA which was published alongside a Rural Needs Impact Assessment and the Trust's accompanying consultation document: 'Future Provision of Emergency General Surgery within Southern Health and Social Care Trust.

The EQIA was made available as part of a formal consultation which ran for 12 weeks from 27 January 2023 until 21 April 2023.

Copies of all our documents are available on our website: www.southerntrust.hscni.net/consultations

or on request by contacting us on:

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With reference to the Trusts' Equality Scheme, an EQIA Final Report should contain the following elements:

- A statement of the aim of the policy assessed
- Information and data collected
- Details of the assessment of impact(s)
- Consideration given to measures which might mitigate any adverse impact
- Consideration given to alternative policies which might better achieve the promotion of equality of opportunity
- Consultation responses
- The decision taken
- Future monitoring plans

To assist consultees and to avoid consultation overload with repetition, we refer to the Emergency General Surgery Consultation Feedback Report within this EQIA Final Report.

# 1.1 Executive Summary

The Southern Health and Social Care Trust (the Trust) has responded to all queries and concerns raised throughout the consultation period and all responses are included within the Consultation Feedback Report. The Feedback Report will now be shared with the Southern Health and Social Care Trust Board for consideration and following this a way forward will be agreed. The outcome will be shared with the Department of Health for their consideration. The contingency model will continue in the interim until a final decision is reached.

There was minimal detailed response specifically on the EQIA. Any relevant feedback has been highlighted within the Consultation Feedback Report under Theme 8 – Equality and Rural Needs is included within this report under 1.4 Details of the assessment of impact.

The Trust would like to thank everyone who attended the listening events and the public meeting and recognises that Consultees have contributed their valuable time to respond to our consultation process. The Trust welcomes all feedback received and is grateful to everyone for their time and effort.

## 1.2 A Statement of the aim of the Policy

The Trust is committed to providing Emergency General Surgery services to the population it serves, which are based on the best available evidence and quality standards, and which will deliver the best possible outcomes for our patients. The Trust must also carefully plan how to meet growing need and ensure best use is made of all our available resources to provide services which are, safe, sustainable, and accessible and of a high quality. Our General Surgical Team is proud of the care that they provide to our patients, however acknowledges that to ensure the best possible outcomes, services must adapt and develop to meet new regional guidelines and changing population needs.

The Trust's General Surgery Team has been significantly challenged for a considerable period of time to provide a service across the two hospitals in our Acute Hospital network, which are Daisy Hill Hospital and Craigavon Area Hospital. The challenges are due to workforce deficits, particularly in relation to the ability to secure appropriately trained and qualified general surgeons. To address these challenges, contingency arrangements were put in place by the Trust in February 2022.

The Trust in the Consultation Document set out the changes it proposed to make on a permanent basis for the provision of Emergency General Surgery services.

This proposed permanent change is to ensure these services are safe, of a high quality and sustainable into the future.

The Senior Leadership Team wishes to thank everyone who gave us feedback during the consultation. At the centre of our plans are the people who use our Emergency General Surgery services and the Trust would like to thank everyone who took the time to respond to the consultation and meet with us.

- 1.3 Information and data collected refer to Consultation Feedback Report Pg. 9 to 12.
- 1.4 Details of the assessment of impact(s) refer to Consultation Feedback Report. The Summary of feedback Pg. 13-47 includes reference to staff and

service users, in particular staff is referred to in Theme 1 - Workforce and Service Users Theme 8 - Equality.

A response was receive for S75 data on those patients who received Emergency General Surgery during the contingency period.

Detailed overleaf is a snapshot of unplanned inpatient admissions for general surgery to Craigavon Area Hospital and Daisy Hill Hospital from April 2022 to August 2023.

This table gives an indication of the profile of patients against Section 75 categories where information is available.

Table 1

Section 75 Group	Non elective admissions to CAH from April 2022 – August 2023	Avg % April 22 – August 23
Gender	Female Male	48.6% 51.4%
Religion	Protestant Roman Catholic Other	23.0% 41.5% 35.3%
Age	0-17 18-65 >65	9.3% 53.8% 36.8%
Marital Status	Married Single Widowed Unknown Divorced Separated Common Law	43.7% 34.8% 7.5% 7.3% 3.3% 2.0% 1.4%

Table 2

Section 75 Group	Non elective admissions to  DHH from April 2022 –  August 2023	Avg % April 22-August 23
Gender	Female Male	43.3% 56.7%
Religion	Protestant Roman Catholic Other	6.6% 50.0% 43.4%
Age	18-65 >65	76.7% 23.3%
Marital Status	Married Single Widowed Unknown	50.0% 20.0% 3.3% 26.7%

During this period there were a total of 6437 non elective admissions (6407 to CAH and 30 to DHH).

Responses were received asking for inclusion of more up to date census data. During the Consultation process the Trust reported figures using 2011 census data however during the summer of this year, the Trust was able to access the Census 2021 Flexible Table Builder. Please find below updated tables for the population of Southern Trust and specifically Newry and Mourne areas reporting 2021 data. Please note that not all data categories are available within the Census 2021 report.

# Profile of Southern Health and Social Care Trust Resident Population - 2021

Table 3

Section 75 Group	Make up of Population Affected Census (390,976)	SHSCT Population Percentage Census 2021	• •
Gender	Female	50.2%	50.5%
	Male	49.8%	49.5%
Religion	Protestant	35.5%	22.0%
	Roman Catholic	57.0%	72.1%
	Neither	7.5%	5.9%
Political Opinion	Broadly Unionist	Not Collected	Not Collected

Section 75 Group	Make up of Population	SHSCT Population	N&M population
•	Affected	Percentage Census	Percentage Census
	<b>Census</b> (390,976)	2021	2021
	Broadly Nationalist		
	Other		
	Do Not Wish To		
	Answer/Not Known		
Age	0-15	22.5%	22.0%
	16-24	10.2%	10.4%
	25-34	12.8%	11.9%
	35-44	13.7%	13.0%
	45-54	13.3%	13.3%
	55-64	12.0%	12.7%
25. 10.10	65+	15.6%	16.7%
Marital Status	Single	28.1%	28.6%
	Married/Civil	37.7%	37.5%
	Partnership	34.2%	33.9%
Dependent Status (based	Other/Not Known	20.00/	22.40/
Dependant Status (based on 147,205 households,	Households with	32.9%	32.1%
on 147,205 households, census 2021)	dependent children (Census 2021)		
Disability (based on 147,205	Household with one or	43.1%	44.3%
Households, census 2021)	more persons with a	43.176	44.376
Tiouseriolus, cerisus 2021)	limiting long term illness		
	or disability (Census		
	2021)		
Ethnicity	Bangladeshi	0%	0%
	Black African	0.4%	0.11%
	Black Caribbean	0%	0%
	Black Other	0.4%	0.06%
	Chinese	0.3%	0.19%
	Filipino	0.1%	0.09%
	Indian	0.2%	0.16%
	Irish Traveller	0.3%	0.19%
	Pakistani	0.1%	0.03%
	Mixed Ethnic	0.8%	0.49%
	Arab	0.1%	0.05%
	Roma	0.1%	0.05%
	Other Asian	0.4%	0.09%
	Other Ethnicities	0.2%	0.17%
	White	96.5%	98.32%
Sexual Orientation towards:	Heterosexual	69.8%	70.5%
	LGBTQ+	1.1%	1.2%
	Not Stated	29.1%	28.3%

1.5 Consideration given to measures which might mitigate any adverse impact Measure which might mitigate any adverse impact are included within the Consultation Feedback Report. 1.6 Consideration given to alternative policies which might better achieve the promotion of equality of opportunity

Refer to the Consultation Feedback Report.

1.7 Consultation responses – refer to 5.0 Summary of Feedback Pg. 16 – 50.

# 1.8 Next Steps

The Consultation Feedback Report including feedback on the EQIA will be shared with the Southern Health and Social Care Trust Board for consideration and following this a way forward will be agreed. The outcome will be shared with the Department of Health for their consideration. The contingency model will continue in the interim until a final decision is reached.

# 1.9 Future monitoring plans

We will review our EQIA monitoring information on an annual basis (*reference Table 1*). Other monitoring information is reviewed on an annual basis for example comments, service user feedback and complaints. The Trust is committed to monitoring for any adverse impacts.

EQIA monitoring information will be published as part of our Section 75 Annual Progress Report and published on the Trust website.