

NHS England and NHS Improvement: Equality and Health Inequalities Impact Assessment (EHIA)

1. **Name of the proposal (policy, proposition, programme, proposal or initiative)¹: Adult Critical Care Transfer Service**
2. **Brief summary of the proposal in a few sentences**

In 2019/20 there were between 20,000-25,000 adult critical care transfers between intensive care units across England. Reasons for transfer vary from access to Specialised services, repatriation and capacity management. There is no standardization for these services. Commissioners, Integrated Care Systems, networks and providers need to work together to ensure that adequate services are commissioned to provide access to adult critical care within and out of region transfers both through existing and new transfer services.

This specification outlines the clinical standards and requirements for the delivery of adult critical care transfers. Neonatal and paediatric critical care transfer service specifications already exist. Critical Care incorporates both intensive and high dependency care. Levels of critical care can be found in the Adult Critical Care Service Specification: <https://www.england.nhs.uk/publication/adult-critical-care-services/>

3. **Main potential positive or adverse impact of the proposal for protected characteristic groups summarised**

Some adult patients on critical care require to be transferred to another hospital/site to receive the relevant treatment such as complex interventional cardiology, bone marrow and solid organ transplants. There are already published National Service Specifications setting clinical standards and requirements for neonatal and paediatric transfer services. Patients are prioritised for this service based on clinical need. As some patients with protected characteristics may be at greater risk of requiring critical care services their need for critical care transfer may be disproportionately higher. This proposal provides national clinical standards and requirements for adults addressing inequalities in access and care for transfers.

¹ Proposal: We use the term proposal in the remainder of this template to cover the terms initiative, policy, proposition, proposal or programme.

Protected characteristic groups	Summary explanation of the main potential positive or adverse impact of your proposal	Main recommendation from your proposal to reduce any key identified adverse impact or to increase the identified positive impact
<p>Age: older people; middle years; early years; children and young people.</p>	<p>This proposal will have a positive impact on older adults.</p> <p>Older adults are at greater risk of requiring critical care (and therefore transfer) due a greater likelihood of developing severe illness (increased comorbidities and frailty).</p>	<p>The proposal sets the minimum clinical standards and requirements for adult critical care transfers ensuring prioritisation for the service is based only on clinical need.</p>
<p>Disability: physical, sensory and learning impairment; mental health condition; long-term conditions.</p>	<p>This proposal will have a positive impact on people who have long term conditions. Increasing comorbidities are a risk factor for requiring critical care services (and therefore transfer)</p>	<p>The proposal sets the minimum clinical standards and requirements for adult critical care transfers ensuring prioritisation for the service is based only on clinical need</p>
<p>Gender Reassignment and/or people who identify as Transgender</p>	<p>This proposal is not likely to impact on this group as having gender reassignment and/or identifying as transgender has not been identified as a risk factor for requiring critical care services.</p>	<p>Not applicable</p>
<p>Marriage & Civil Partnership: people married or in a civil partnership.</p>	<p>This proposal will not impact on this group as marital status has not been identified as a risk factor for requiring critical care services.</p>	<p>Not applicable</p>
<p>Pregnancy and Maternity: women before and after childbirth and who are breastfeeding.</p>	<p>This proposal will have a positive impact on women who are pregnant due to a greater risk of requiring critical care services (and therefore transfer) secondary to obstetric complications.</p>	<p>The proposal sets the minimum clinical standards and requirements for adult critical care transfers ensuring prioritisation for the service is based only on clinical need.</p>

Protected characteristic groups	Summary explanation of the main potential positive or adverse impact of your proposal	Main recommendation from your proposal to reduce any key identified adverse impact or to increase the identified positive impact
Race and ethnicity ²	Outside critical care admissions due to COVID-19, this proposal will not impact on this group as race and ethnicity have not been identified as risk factors for requiring critical care services.	Non applicable
Religion and belief: people with different religions/faiths or beliefs, or none.	This proposal will not impact on this group as religion and beliefs have not been identified as risk factors for requiring critical care services.	Non applicable
Sex: men; women	This proposal will not impact on this group as gender has not been identified as a risk factor for requiring critical care services.	Non applicable
Sexual orientation: Lesbian; Gay; Bisexual; Heterosexual.	This proposal will not impact on this group as sexual orientation has not been identified as a risk factor for requiring critical care services.	Non applicable

² Addressing racial inequalities is about identifying any ethnic group that experiences inequalities. Race and ethnicity includes people from any ethnic group incl. BME communities, non-English speakers, Gypsies, Roma and Travelers, migrants etc. who experience inequalities so includes addressing the needs of BME communities but is not limited to addressing their needs, it is equally important to recognise the needs of White groups that experience inequalities. The Equality Act 2010 also prohibits discrimination on the basis of nationality and ethnic or national origins, issues related to national origin and nationality.

4. Main potential positive or adverse impact for people who experience health inequalities summarised

Groups who face health inequalities ³	Summary explanation of the main potential positive or adverse impact of your proposal	Main recommendation from your proposal to reduce any key identified adverse impact or to increase the identified positive impact
Looked after children and young people	This proposal will not impact on this group as Looked After children and young people have not been identified as being at greater risk of requiring critical care services.	Not applicable
Carers of patients: unpaid, family members.	This proposal will not impact on this group as being a carer has not been identified as a risk factor for requiring critical care services.	Not applicable
Homeless people. People on the street; staying temporarily with friends /family; in hostels or B&Bs.	This proposal will have a positive impact on people who are homeless as they are more likely to have underlying health conditions. Increasing comorbidities are a risk factor for requiring critical care services (and therefore transfer).	The proposal sets the minimum clinical standards and requirements for adult critical care transfers ensuring prioritisation for the service is based only on clinical need.
People involved in the criminal justice system: offenders in prison/on probation, ex-offenders.	This proposal will not impact on this group as being involved in the criminal justice system has not been identified as a risk factor for requiring critical care services.	Not applicable
People with addictions and/or substance misuse issues	This proposal will have a positive impact on people who have addictions and /or substance misuse issues as they are at greater risk of requiring critical care services (and therefore transfer).	The proposal sets the minimum clinical standards and requirements for adult critical care transfers ensuring prioritisation for the service is based only on clinical need

³ Please note many groups who share protected characteristics have also been identified as facing health inequalities.

Groups who face health inequalities³	Summary explanation of the main potential positive or adverse impact of your proposal	Main recommendation from your proposal to reduce any key identified adverse impact or to increase the identified positive impact
People or families on a low income	This proposal will not have an impact on this group as having a low income has not been identified as a risk factor for requiring critical care services.	Not applicable
People with poor literacy or health Literacy: (e.g. poor understanding of health services poor language skills).	This proposal will not have an impact on people with poor literacy or health literacy as they have not been identified as a risk for requiring critical care services.	Not applicable
People living in deprived areas	This proposal will have a positive impact on people living in deprived areas as they are more likely to have underlying health conditions. Increasing comorbidities are a risk factor for requiring critical care services (and therefore transfer).	The proposal sets the minimum clinical standards and requirements for adult critical care transfers ensuring prioritisation for the service is based only on clinical need. The increased usage of this group helps to ensure geographical equity of critical care services in England.
People living in remote, rural and island locations	This proposal will have a positive impact on this group as they are less likely to live close to critical care services and may therefore benefit more from critical care transfer.	The proposal sets the minimum clinical standards and requirements for adult critical care transfers ensuring prioritisation for the service is based only on clinical need. The increased usage of this group helps to ensure geographical equity of critical care services in England.
Refugees, asylum seekers or those experiencing modern slavery	This proposal will not have an impact on refugees, asylum seekers or those experiencing modern slavery as they	Not applicable

Groups who face health inequalities³	Summary explanation of the main potential positive or adverse impact of your proposal	Main recommendation from your proposal to reduce any key identified adverse impact or to increase the identified positive impact
	have not been identified as risk factors for requiring critical care services.	
Other groups experiencing health inequalities (please describe)	There should be no further direct positive or negative impacts on any other groups not previously described.	Not applicable

5. Engagement and consultation

a. Have any key engagement or consultative activities been undertaken that considered how to address equalities issues or reduce health inequalities? Please place an x in the appropriate box below.

Yes	No X	Do Not Know
------------	-------------	--------------------

b. If yes, please briefly list up the top 3 most important engagement or consultation activities undertaken, the main findings and when the engagement and consultative activities were undertaken.

Name of engagement and consultative activities undertaken		Summary note of the engagement or consultative activity undertaken	Month/Year
1	Stakeholder testing	The service specification was circulated to stakeholders on the 26th February 2021 for a period of 14 days and feedback was requested by the 10th March	February/March 2021
2			
3			

6. What key sources of evidence have informed your impact assessment and are there key gaps in the evidence?

Evidence Type	Key sources of available evidence	Key gaps in evidence
Published evidence		
Consultation and involvement findings		
Research		
Participant or expert knowledge For example, expertise within the team or expertise drawn on external to your team		

7. Is your assessment that your proposal will support compliance with the Public Sector Equality Duty? Please add an x to the relevant box below.

	Tackling discrimination	Advancing equality of opportunity	Fostering good relations
The proposal will support?	x	x	
The proposal may support?			x
Uncertain whether the proposal will support?			

8. Is your assessment that your proposal will support reducing health inequalities faced by patients? Please add an x to the relevant box below.

	Reducing inequalities in access to health care	Reducing inequalities in health outcomes
The proposal will support?	x	x
The proposal may support?		
Uncertain if the proposal will support?		

9. Outstanding key issues/questions that may require further consultation, research or additional evidence. Please list your top 3 in order of priority or state N/A

Key issue or question to be answered	Type of consultation, research or other evidence that would address the issue and/or answer the question
1	
2	
3	

10. Summary assessment of this EHIA findings

This proposal prioritises the need for services on clinical need only and therefore supports tackling discrimination and advancing equality of opportunity. It ensures access to critical care services is equitable among all groups which helps to drive equality in health outcomes.