

EQUALITY IMPACT ASSESSMENT - RESULTS

<p>Title of Policy</p>	<p>Beating Cancer: Ambition and Action</p>
<p>Summary of aims and desired outcomes of Policy</p>	<p>Beating Cancer: Ambition and Action is a comprehensive cancer strategy for Scotland. It sets out to improve the experience of, and outcomes for, people affected by cancer across Scotland, by improving service delivery and reducing health inequalities. It is divided into eight chapters: prevention; improving survival; early detection and diagnosis; improving treatment; workforce; living with and beyond cancer; quality improvement; and research. Each chapter includes a set of ambitions and actions that underpin the improvement work.</p> <p>In addition to more people surviving cancer and the reduction of cancer health inequalities, the strategy's desired outcomes are that: people with cancer and their families feel involved in decision making and are able to make the right decisions for them on the basis of full</p>

	information; there is a radical improvement in experience and quality of life, including at the end of life; the growth in the number of people diagnosed with cancer is reduced; there is more equitable access to services and treatment.
Directorate: Division: team	Healthcare Quality and Improvement Directorate: Strategic Planning and Quality Division: Cancer Policy Team

Executive summary

Beating Cancer: Ambition and Action is a comprehensive cancer strategy for Scotland. It sets out to improve the experience of, and outcomes for, people affected by cancer across Scotland, by improving service delivery and reducing health inequalities.

A full equality impact assessment (EqIA) process was undertaken to inform and enhance the cancer strategy. It highlighted that:

- Any cancer diagnosis and treatment is on individual clinical assessment. Improving clinical capabilities and service delivery will improve everyone’s experience of cancer, including those of protected characteristics.
- There are no specific areas of concern. The strategy is thought to comprehensively address inequalities, including for protected characteristics.
- A key finding was that socio-economic health inequalities are significant determinants of cancer incidence, survival and mortality. So, reducing health inequalities is important for improving cancer care and reducing overall inequality. This does not fall neatly into the categories of the protected characteristics, and so into the EqIA's remit. However, to tackle

cancer inequalities, people from most deprived backgrounds and communities need to be targeted.

- Variation exists in survival rates and patient experience in different tumour types. Only few of these roughly align with protected characteristics (e.g. ovarian or urological cancers for sex). So, these differences are mostly not in the scope of the EqIA but like socio-economic health inequalities affect cancer equalities considerations.

- In most cases at the moment data collected in national surveys on cancer clinical outcomes, care and patient experiences is not broken down according to protected characteristics.

The results indicate that the duties for an EqIA have been met and that there is currently no expected impact that requires remedial action. The cancer strategy is expected to affect almost everyone in Scotland, and so this also includes people with protected characteristics. Improving equality is one of the core ambitions of the strategy and the strategy document's impact is expected to be positive or neutral, instead of negative.

Background

The strategy's long term aims are:

- More people surviving cancer for 1, 5 and 10 years;
- Closing the gap in survival rates between Scotland and the best countries in Europe;
- A reduction in cancer health inequalities;
- People with cancer and their families feeling involved in decision making and able to make the right decisions for them on the basis of full information;
- A radical improvement in experience and quality of life, including at the end of life;
- A reduction in the growth in the number of people diagnosed with cancer;
- More equitable access to services and treatment.

The cancer strategy contributes to the Scottish Government's National Outcomes of:

- We live longer, healthier lives;
- We have tackled the significant inequalities in Scottish society;
- Our public services are high quality, continually improving, efficient and responsive to local people's needs;
- Our people are able to maintain their independence as they get older and are able to access appropriate support when they need it;
- We are better educated, more skilled and more successful, renowned for our research and innovation.

The cancer strategy is a part of the overall landscape of health and social care policy in Scotland. It links to other existing government initiatives, like the Tobacco Control Strategy, the obesity strategy Preventing Overweight and Obesity in Scotland, the National Clinical Strategy and the National Health and Social Care Workforce Plan (to be published in spring 2017).

The EqIA was done in consultation with Scottish Government policy teams working with aspects of the cancer strategy, including any areas of a particular concern to the protected groups. The Scottish Government's Library also carried out a literature search on the subject for any relevant recent academic research papers. The final draft was also presented for and approved by the Scottish Cancer Taskforce, an expert group overseeing the cancer strategy, comprising of clinicians, third sector and patient representatives and officials.

The Scope of the EQIA

The EqIA relates to the cancer strategy document. Separate equality assessments will be done by service providers and other delivery partners upon implementation of any specific action or piece of work, according to relevant legislation and guidelines.

EqIAs should be proportionate: the more relevance to equalities (to people who have one or more of the protected characteristics) a policy has, the more rigorous the EqIA will need to be. Likewise, if the policy has minimal relevance, or a positive impact, the EqIA can be much 'lighter touch'.

Each of the individuals and policy teams who contributed to the EqIA drew from their areas of expertise and experiences to contribute to the assessment.

The cancer strategy is expected to affect almost everyone in Scotland, and so this also includes people with protected characteristics. Improving equality is one of the core ambitions of the strategy. Because the strategy document's impact is expected to be positive or neutral, instead of negative, the EqIA was a lighter touch one and no further consultations were carried out.

Key Findings

The EqIA found that the strategy will comprehensively address inequalities, including for protected characteristics. Any cancer diagnosis and treatment is on individual clinical assessment. Improving clinical capabilities and service delivery, along the lines of the vision for more person-centred care, will improve everyone's experience of cancer, including those of protected characteristics.

A key finding was that socio-economic health inequalities are significant determinants of cancer incidence, survival and mortality. So, reducing health inequalities is important for improving cancer care and reducing overall inequality. This does not fall neatly into the categories of the protected characteristics, and so into the EqIA's remit. However, to tackle cancer inequalities, people from most deprived backgrounds and communities need to be targeted.

Also, variation exists in survival rates and patient experience in different tumour types. Only few of these roughly align with protected characteristics (e.g. ovarian or urological cancers for sex) but this, although beyond the scope of an EqIA, affects cancer equalities considerations.

Improving equality is one of the core ambitions of the strategy. The results indicate that its impact, for all protected characteristics and otherwise, is expected to be positive or neutral and that the duties for an EqIA have been met. There is currently no expected impact that requires remedial action.

Recommendations and Conclusion

Commitment to reducing health inequalities is strongly built into the cancer strategy. This EqIA serves as a safeguard to check that the protected groups, as well as any other equalities considerations, have been reviewed in light of the strategy.

As it was not necessary, no adjustments have been made to the cancer strategy as a result of this assessment.

Before implementation, delivery partners and service providers will have conducted their own equalities assessments for the aspects they are responsible for, according to relevant equalities legislation and local guidelines.

Equalities monitoring and review will be integrated into the evaluation and monitoring measures for the strategy as a whole. An outcomes-focused comprehensive monitoring and evaluation framework is being developed for the cancer strategy and impact on equalities will be built into it.

Periodic monitoring and evaluation for equalities will be supported by national surveys that are conducted in Scotland. There are also several other cancer publications, by charities and other organisations, which will aid in monitoring equalities impact.