

**EQIA Report For
Management of bowel cancer services**

Date: 31-Mar-08

Policy, Function or Output Details

Section One:	Ownership / Commitments	
1.1 Organisation NHS Quality Improvement Scotland Including SIGN	1.2 Directorate Guidance and Standards	
1.3 Person Responsible: Clare Echlin	1.4 Unit: Standards Development	
1.5 Output Title: Management of bowel cancer services	1.6 Target Completion Date: 31-Mar-08	
1.7 What stage is it at? Ready to publish	1.8 Status: Replacement	
1.9 Associations		
Own Organisation	Partner Organisations	
a) Status Replacement works output NB If you selected multiple then include the breakdown in the titles list above	b) Status Select works Select NB If you selected multiple then include the breakdown in the titles list above	
1.10 Assessment Knowledge		
a) Summary of the knowledge level of the assessor team in relation to the Output and Equality and Diversity? Good knowledge.	b) What data are you aware is available? CSBS colorectal cancer standards 2001 and corresponding national overview. For further information see reference section for each standard. Examples of the data used are: (a) Moertel CG, Fleming TR, Macdonald JS, Haller DG, Laurie JA, Tangen CM, et al. Fluorouracil plus levamisole as effective adjuvant therapy after resection of stage III colon carcinoma: a final report. Ann Intern Med. 1995;122(5):321-26. (b) MERCURY Study Group. Diagnostic accuracy of preoperative magnetic resonance imaging in predicting curative resection of rectal cancer: prospective observational study. BMJ. 2006; 333(7572):779-82.	

(c) Klesen C, Rogalla P, Taupitz M. Local staging of rectal cancer: the current role of MRI. *Eur Radiol.* 2007;17(2):379-89.

If you are interested in seeing more details, please see the reference section within the clinical standards for management of bowel cancer services.

Section Two:	The Output Background
2.1	What is the purpose of this Output? To facilitate NHSScotland to improve and provide equitable services for bowel cancer services. These standards will be used by NHS QIS to review all relevant cancer services provided by NHS boards.
2.2	Which NHS QIS work themes does this relate to? Cancer Give details:
2.3	Who are the stakeholders? NHSScotland, SGHD, bowel cancer patients, carers, families and the public.
2.4	Who is it to benefit or affect? NHSScotland staff. Bowel cancer patients, carers and families. In what way? Staff - with increased knowledge. Bowel cancer patients, carers and families - the level of care should be improved and equitable.

Stage 1

Section Three:	Initial Checklist
Equality target groups	
Please check the relevant boxes, where it is anticipated that there will be an impact on the equality group-either positive or negative	
Age: consider children, young people and older people	<input type="checkbox"/>
Disability eg. physical, sensory impairment and learning disability.	<input type="checkbox"/>
Gender: men, women, transgender and transsexual people	<input type="checkbox"/>
Race/ethnic groups including minorities eg. gypsy travellers, refugees & asylum seekers.	<input type="checkbox"/>
Religion or belief: religious or other groups with a recognised belief system	<input type="checkbox"/>
Sexual orientation eg. lesbian, gay, bisexual	<input type="checkbox"/>
Cross Cutting Strands	
People in poverty	<input type="checkbox"/>
Homeless people	<input type="checkbox"/>
Language or social origins issues	<input type="checkbox"/>
People in Criminal Justice System	<input type="checkbox"/>
People with mental health issues	<input type="checkbox"/>
Marital status including civil partnership	<input type="checkbox"/>

Section Four:	Initial Checklist - Summary Sheet
4.1	Have actual/potential positive impacts been identified for one or more equality target groups? No No differential impacts have been identified as the standards are targeted at the point of diagnosis. EQIA should be undertaken by NHS boards to ensure any differential impact on their local population is identified in planning their service delivery, therefore providing an equitable service for all patients with bowel cancer.
4.2	Have actual/potential negative impacts been identified for one or more equality target groups? No None anticipated.
4.3	Additional information and evidence required: None.
4.4	Assessment status: <ul style="list-style-type: none"> • Data collection was sufficient for the initial checking Yes • If not what can / should be done to improve it: • The assessor team's knowledge was appropriate for the initial checking Yes • If not give details and recommendations:
4.5	What are the resource implications of: Gathering the relevant data already held on equality target groups? No implication as these standards apply across all bowel cancer services in NHS Scotland and therefore no impact on any of the equality target groups. Identifying the gaps in the data? As above. Collecting the missing data? As above.
4.6	This has been subjected to EQIA before Date: Give details of outcomes etc. No previous EQIA undertaken.
4.7	What efforts will be made/ have been made to include representatives from the relevant equality target groups? There was no specific equality target group identified as differentially impacted. Therefore no representatives were required to be involved.
4.8	How have they been/will they be involved in the development? Select Give details:
4.9	What research or consultation has been/requires to be carried out with regard to the impact on equality target groups? Please refer to 4.7 therefore not applicable. However, NHS QIS circulated the draft standards for consultation to the following:

	3 NHSScotland Regional Cancer Networks A representative of Macmillan Cancer Support 3 patient representatives A Senior Trial Co-ordinator and considered all comments received when redrafting the standards.	
	Initial Checklist	Recommended actions and sign off
4.10	Further initial checking <input type="checkbox"/> If yes what should be undertaken?	
4.11	Rapid impact assessment <input type="checkbox"/> If not what are the reasons? No RIA is required as these standards do not adversely impact any equality target group.	
4.12	Full impact assessment <input type="checkbox"/> If not what are the reasons? Please refer to 4.11.	
4.13	Recommendations summary: To publish the standards as planned.	
4.14	No further action is recommended and the conclusions of the initial checklist are accurate and comprehensive <input checked="" type="checkbox"/> If not give reasons:	
Name:	Clare Echlin (Lead Assessor)	Date: 31-Mar-08