

Equality & Health Impact Assessment (EHIA)

Business Justification Case (BJC)

Development of a 2nd permanent CT-Sim and AI software at Singleton Hospital



Caring for each other
Working together
Always improving



Introduction and Aim

The BJC has been prepared through a process of engagement with key stakeholders. Principally, it seeks support from Welsh Government in the form of investment for the development of a second permanent CT-Sim and AI software at Singleton Hospital, Swansea.

The EHIA document is a live document for identification of impact, mitigation and action for the duration of the project / programme of works. The findings will be updated on an ongoing basis as the development moves through the business case process and fully considered within the design of facilities as they progress.

Reviewed by:	SRO	Project Director	Project Board
	Mrs Ceri Gimblett, Interim Service Director, Singleton & Neath Port Talbot Hospitals Service Delivery Group, SBUHB	Ms Adel Davies-Pugh, Interim Divisional Manager Cancer Services, SBUHB	
Date:	May 2024	May 2024	May 2024

1.	For service change, provide the title of the Project Outline Document or Business Case and Reference Number	Development of a 2nd permanent CT-Sim and AI software at Singleton Hospital Reference No. tbc
2.	Name of Clinical Board / Corporate Directorate and title of lead member of staff, including contact details	The Project Director is: Ms Adel Davies-Pugh, Interim Divisional Manager Cancer Services, who has the authority and responsibility to manage delivery of the project on behalf of the key stakeholders

<p>3.</p>	<p>Objectives of strategy/ policy/ plan/ procedure/ service</p>	<p>Providing a second permanent CT-Sim within the South West Wales region will:</p> <ul style="list-style-type: none"> ○ Provide essential resilience in cancer treatment pathways in compliance with best practice requirements as set out in the Service Specification for External Beam Radiotherapy Services in Wales , that requires Cancer Centre have access to a 2nd CT-Sim, and; as supported by the Clinical Oncology Sub Committee's (COSCs) (of Welsh Scientific Advisory Committee), which recommends that all Welsh Cancer Centres (as part of a Radiotherapy 10-year Equipment Plan) include two CT-Sims ○ Improve Time to Radiotherapy performance, support meeting the 14-day Radiotherapy target and reduce the patient pathway for the population of South West Wales ○ Reduce significant clinical risk (operating only one machine presents is a single point of failure, which should machine breakdown occur will result in breaches of Radiotherapy Treatment (RT) Quality Metrics ○ Provide access to innovative AI software, which will reduce Clinical Oncologist and non-medical staff (Radiotherapy Physics) staff time spent undertaking Outlining targets and Organs at risk, and reduce the pathway by 2-4 days <p>The specific investment objectives for this business case are:</p> <ol style="list-style-type: none"> 1. To increase Resilience of the SWWCC's RT infrastructure by increasing capacity to support 2,700 patients p.a. 2. To improve the SWWCC's RT Quality of service by reducing clinical risk by eliminating a single point of failure; improving the patient experience by providing local access to high quality treatment planning; enhancing the SWWCC's reputation as a regional centre of excellence for cancer services, and providing access to modern infrastructure that complies with best practice 3. Improve the SWWCC's RT service efficiencies by improving RT performance against All Wales Radiotherapy Quality Metrics' 14-day targets; reducing time to RT rates, and; reducing number of RT target breaches against baseline 4. To improve the SWWCC's RT service effectiveness by providing the South West Wales region's population with access to two modern CT-Sims capable of supporting complex treatments, and; providing opportunities for Research and Clinical Trial participation 5. To improve the SWWCC's RT service economies by providing innovative AI software, which will reduce Clinical Oncologist and non-medical staff (Radiotherapy Physics) time spent undertaking Outlining targets and Organs at risk <p>This investment supports the final Welsh Scientific Advisory Committee Radiotherapy Treatment (RT) Infrastructure Plan (submitted to WGov 30th June 2022) and SB and HDd UHB's Clinical Services' Plans.</p> <p>It supports national cancer strategies, including the Cancer Quality Statement (2021) and the Cancer Action Plan for Wales (2022).</p> <p>SWWCC's Strategic Programme Case (2023/2024 – 2032/2033) Improving Regional Non-Surgical Oncology Services (Radiotherapy and Oncology Outpatients) for the population of South West Wales, which was jointly developed by SB and HDd UHBs, recognised that CT-Sims are integral to RT treatment planning and that limited CT capacity presents the biggest barrier to achieving RT targets.</p>
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		<p>This investment supports The Well-Being and Future Generations Act by:</p> <ul style="list-style-type: none"> - Improving the wellbeing of the population Wales by providing access to modern cancer planning infrastructure to support cancer treatment; - Investing in high-level technology, which will make a real difference to improving cancer patients' health and keeping them well, whilst allowing our staff to work more effectively; - Supporting a resilient service model through collaboration with other Health Boards and by meeting demand from across South-West Wales, and; - Supporting the Health Board to meet ongoing Welsh Government planned care targets by increasing the HVLC capacity of the service by over 1,500 patients per year. <p>It supports A Healthier Wales long term plans for health & social care by:</p> <ul style="list-style-type: none"> - Meeting national well-being goals; - Improving people's physical wellbeing and maximising their mental health by promoting a 'person centred' service, which helps them to stay well or by the very least, to live the best life possible, and; - Supporting treatment and planned care services that work well. <p>It supports delivery of Wales' Cancer targets by maintaining a continuum of care for cancer patients.</p>																								
<p>4.</p>	<p>Evidence and background information considered. For example:</p> <ul style="list-style-type: none"> • population data • staff and service users data, as applicable • needs assessment • engagement and involvement findings • research • good practice guidelines • participant knowledge • list of stakeholders and how stakeholders have engaged in the development stages • comments from those involved in the designing and development stages • Cluster and GP Practice Plans • Population pyramids are available from Public Health Wales Observatory. 	<p>The following table provides the population statistics for Wales, SBUHB and HDUHB:</p> <p>Figure – Population Base (as at Mid-Year 2022)</p> <table border="1" data-bbox="745 735 2089 970"> <thead> <tr> <th>Key Statistics</th> <th>Wales</th> <th>HDUHB</th> <th>SBUHB</th> </tr> </thead> <tbody> <tr> <td>Total population</td> <td>3,131,640</td> <td>385,094</td> <td>383,440</td> </tr> <tr> <td>% Population aged 65 to 74</td> <td>11.28%</td> <td>13.35%</td> <td>10.88%</td> </tr> <tr> <td>% Population aged 75 to 83</td> <td>7.52%</td> <td>8.93%</td> <td>7.29%</td> </tr> <tr> <td>% Population aged 85 and over</td> <td>2.72%</td> <td>3.20%</td> <td>2.75%</td> </tr> <tr> <td>% Total Population aged 65 and over</td> <td>21.51%</td> <td>24.48%</td> <td>20.92%</td> </tr> </tbody> </table> <p style="text-align: right;">Source: StatsWales.gov</p> <p>The population of Wales is expected to grow to 3,423,359 by 2046 (6.49%).</p> <p>The following table provides the latest health statistics for Wales, and HDUHB's and SBUHB's populations:</p>	Key Statistics	Wales	HDUHB	SBUHB	Total population	3,131,640	385,094	383,440	% Population aged 65 to 74	11.28%	13.35%	10.88%	% Population aged 75 to 83	7.52%	8.93%	7.29%	% Population aged 85 and over	2.72%	3.20%	2.75%	% Total Population aged 65 and over	21.51%	24.48%	20.92%
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5.	Who will be affected by the strategy/ policy/ plan/ procedure/ services	<p>The recent Linear Accelerator (Linac) Replacement program, where the SWWCC has seen significant investment, has allowed the introduction of hypofractionation for a number of treatment sites. This has seen our Linac capacity rise from 2,000 to 2,400 patients p.a. (most centres in England treating more than 2,000 patients p.a. have two CT-Sims).</p> <p>Around 15% of Radiotherapy patients currently require an additional scan during their treatment, as their tumour will have changed size and /or shape (this is called adaptive Radiotherapy). Adapting treatments during Radiotherapy will increase to around 30% of all patients in the next few years, as we are better able to visualise tumour regression/progression. PET scanning is expected to contribute to this in the next year.</p> <p>There are currently no plans to change the location of cancer services.</p>																												
	How visible is this 'project/programme' to the public	This project is classed as being of low visibility to the public (ref WGov's RPA Form)																												
	What is the degree of direct / indirect impact on other services	<p>Other integrated service interdependences include:</p> <ul style="list-style-type: none"> - Linear Accelerator cancer treatment services. - Theatre & Recovery services, Anaesthetic and Nursing Teams & Advanced Nurse Practitioners services. - Systemic Anti-Cancer Treatments (SACT) services - Acute Oncology Service (AOS) services 																												
6.	EQIA / How will the strategy, policy, plan, procedure and/or service impact on people?																													
	<p>Questions in this section relate to the impact on people on the basis of their 'protected characteristics'. Specific alignment with the 7 goals of the Well-being of Future Generations (Wales) Act 2015 is included against the relevant sections.</p>																													

<p>6.1 Age For most purposes, the main categories are:</p> <ul style="list-style-type: none"> • under 18; • between 18 and 65; and • over 65 	<p>Potential Positive impact All ages</p> <ul style="list-style-type: none"> • Accessible cancer treatment planning services delivered from fit for purpose facilities. <p>All ages</p> <ul style="list-style-type: none"> • Reduced levels of mortality for cancer patients. <p>Potential Negative impact All ages None identified at this time</p>	<ul style="list-style-type: none"> • Provide CT-Sim facilities in line with WHTM/ WHBN guidance to include health implications of design and be fully compliant with all mandatory standards. • Provide regional treatment planning capacity to regional population. 	<p>Action to be taken by:</p> <ul style="list-style-type: none"> • Capital and Estates team • UHB IM&T team • Cancer service board • Workforce <p>SWWCC</p>
<p>6.2 Persons with a disability as defined in the Equality Act 2010 Those with physical impairments, learning disability, sensory loss or impairment, mental health conditions, long-term medical conditions such as diabetes</p>	<p>Potential Positive impact</p> <ul style="list-style-type: none"> • Accessible cancer treatment planning delivered from fit for purpose and DDA compliant facilities that are cognisant of the needs of disabled staff, visitors and their carers. • Reduced levels of mortality for cancer patients. <p>Potential Negative impact</p> <ul style="list-style-type: none"> • None identified at this time 	<ul style="list-style-type: none"> • Develop additional CT-Sim facilities in line with WHTM/ WHBN guidance to include health implications of design and be fully compliant with all mandatory standards. • Provide accessible services for disabled patients. • Ensure patient / visitors & carers / staff member is able to communicate in language (e.g. Welsh) or format (e.g. sign language) appropriate to need • Partnership working with specialist organisations during design (e.g. MacMillan Cancer Care). • Provide regional treatment planning capacity to regional population. 	<p>Action to be taken by:</p> <ul style="list-style-type: none"> • Capital and Estates team • UHB IM&T team • Cancer service board • SWWCC
<p>6.3 People of different genders: Consider men, women, people undergoing gender reassignment</p> <p>NB Gender-reassignment is anyone who proposes to, starts, is going through or who has completed a process to change his or her gender with or without going through any medical procedures. Sometimes referred to as Trans or Transgender</p>	<p>Potential Positive impact</p> <ul style="list-style-type: none"> • Appropriate changing facilities provided that are cognisant of the needs of the privacy & dignity of staff members • Accessible cancer treatment planning delivered from fit for purpose and DDA compliant facilities that are cognisant of the needs of disabled staff, visitors and their carers. • Reduced levels of mortality for cancer patients. <p>Potential Negative impact</p> <ul style="list-style-type: none"> • None identified at this time 	<ul style="list-style-type: none"> • Develop additional CT-Sim facilities in line with WHTM/ WHBN guidance to include health implications of design and be fully compliant with all mandatory standards. • Provide regional treatment planning capacity to regional population. 	<p>Action to be taken by:</p> <ul style="list-style-type: none"> • Capital and Estates team • Cancer service board • SWWCC

<p>6.4 People who are married or who have a civil partner.</p>	<p>Potential Positive impact</p> <ul style="list-style-type: none"> ▪ Accessible cancer treatment planning delivered from fit for purpose and DDA compliant facilities that are cognisant of the needs of disabled staff, visitors and their carers. ▪ Reduced levels of mortality for cancer patients. <p>Potential Negative impact</p> <ul style="list-style-type: none"> ▪ None identified at this time 	<ul style="list-style-type: none"> ▪ Develop additional CT-Sim facilities in line with WHTM/ WHBN guidance to include health implications of design and be fully compliant with all mandatory standards. ▪ Provide regional treatment planning capacity to regional population. 	<p>Action to be taken by:</p> <ul style="list-style-type: none"> ▪ Capital and Estates team ▪ Cancer service board ▪ SWWCC
<p>6.5 Women who are expecting a baby, who are on a break from work after having a baby, or who are breastfeeding. They are protected for 26 weeks after having a baby whether or not they are on maternity leave.</p>	<p>Potential Positive impact</p> <ul style="list-style-type: none"> ▪ Accessible cancer treatment planning delivered from fit for purpose and DDA compliant facilities that are cognisant of the needs of disabled staff, visitors and their carers. ▪ Reduced levels of mortality for cancer patients. <p>Potential Negative impact</p> <ul style="list-style-type: none"> ▪ None identified at this time 	<ul style="list-style-type: none"> ▪ Develop additional CT-Sim facilities in line with WHTM/ WHBN guidance to include health implications of design and be fully compliant with all mandatory standards. ▪ Provide regional treatment planning capacity to regional population. 	<p>Action to be taken by:</p> <ul style="list-style-type: none"> ▪ Capital and Estates team ▪ Cancer service board ▪ SWWCC
<p>6.6 People of a different race, nationality, colour, culture or ethnic origin including non-English speakers, gypsies/travellers, migrant workers</p>	<p>Potential Positive impact</p> <ul style="list-style-type: none"> ▪ Accessible cancer treatment planning delivered from fit for purpose and DDA compliant facilities that are cognisant of the needs of disabled staff, visitors and their carers. ▪ Reduced levels of mortality for cancer patients. <p>Potential Negative impact</p> <ul style="list-style-type: none"> ▪ There may be impact for individuals who do not understand written English, or for whom English/ Welsh is not a first language. 	<ul style="list-style-type: none"> ▪ Develop additional CT-Sim facilities in line with WHTM/ WHBN guidance to include health implications of design and be fully compliant with all mandatory standards. ▪ Provide regional treatment planning capacity to regional population. 	<p>Action to be taken by:</p> <ul style="list-style-type: none"> ▪ Capital and Estates team ▪ UHB IM&T team ▪ Cancer service board ▪ SWWCC

<p>6.7 People with a religion or belief or with no religion or belief. The term 'religion' includes a religious or philosophical belief</p>	<p>Potential Positive impact</p> <ul style="list-style-type: none"> ▪ Accessible cancer treatment planning delivered from fit for purpose and DDA compliant facilities that are cognisant of the needs of disabled staff, visitors and their carers. ▪ Reduced levels of mortality for cancer patients. <p>Potential Negative impact</p> <ul style="list-style-type: none"> ▪ None identified at this time 	<ul style="list-style-type: none"> ▪ Develop additional CT-Sim facilities in line with WHTM/ WHBN guidance to include health implications of design and be fully compliant with all mandatory standards. ▪ Provide regional treatment planning capacity to regional population. 	<p>Action to be taken by:</p> <ul style="list-style-type: none"> ▪ Capital and Estates team ▪ Cancer service board ▪ Workforce ▪ SWWCC
<p>6.8 People who are attracted to other people of:</p> <ul style="list-style-type: none"> • the opposite sex (heterosexual); • the same sex (lesbian or gay); • both sexes (bisexual) 	<p>Potential Positive impact</p> <ul style="list-style-type: none"> ▪ Accessible cancer treatment planning delivered from fit for purpose and DDA compliant facilities that are cognisant of the needs of disabled staff, visitors and their carers. ▪ Reduced levels of mortality for cancer patients. <p>Potential Negative impact</p> <ul style="list-style-type: none"> ▪ None identified at this time 	<ul style="list-style-type: none"> ▪ Develop additional CT-Sim facilities in line with WHTM/ WHBN guidance to include health implications of design and be fully compliant with all mandatory standards. ▪ Provide regional treatment planning capacity to regional population. 	<p>Action to be taken by:</p> <ul style="list-style-type: none"> ▪ Capital and Estates team ▪ Cancer service board ▪ Workforce ▪ SWWCC
<p>6.9 People who communicate using the Welsh language in terms of correspondence, information leaflets, or service plans and design</p> <p>Well-being Goal – A Wales of vibrant culture and thriving Welsh language</p>	<p>Potential Positive impact</p> <ul style="list-style-type: none"> ▪ All signage in the development will adhere to UHB's Welsh Language Policy & to the WFGs Act in relation Welsh Language Act's requirements. ▪ Accessible cancer treatment planning delivered from fit for purpose and DDA compliant facilities that are cognisant of the needs of disabled staff, visitors and their carers. <p>Reduced levels of mortality for cancer patients</p>	<ul style="list-style-type: none"> ▪ Develop additional CT-Sim facilities in line with WHTM/ WHBN guidance to include health implications of design and be fully compliant with all mandatory standards. ▪ Ensure patient / visitors & carers / staff member is able to communicate in language (e.g. Welsh) or format (e.g. sign language) appropriate to need 	<p>Action to be taken by:</p> <ul style="list-style-type: none"> ▪ Capital and Estates team ▪ UHB IM&T team ▪ Cancer service board ▪ Workforce <p>SWWCC</p>
	<p>Potential Negative impact</p> <ul style="list-style-type: none"> ▪ None identified at this time 	<ul style="list-style-type: none"> ▪ Provide regional treatment planning capacity to regional population. Ensure visitors, carers and staff member is able to communicate in Welsh language or format appropriate to need ▪ All public documents available in Welsh ▪ Employ / promote availability of Welsh speaking staff 	<ul style="list-style-type: none"> ▪

<p>6.10 People according to their income related group: Consider people on low income, economically inactive, unemployed/workless, people who are unable to work due to ill-health</p>	<p>Potential Positive impact</p> <ul style="list-style-type: none"> ▪ Accessible cancer treatment planning delivered from fit for purpose and DDA compliant facilities that are cognisant of the needs of disabled staff, visitors and their carers. ▪ Reduced levels of mortality for cancer patients. <p>Potential Negative impact</p> <ul style="list-style-type: none"> ▪ None identified at this time 	<ul style="list-style-type: none"> ▪ Develop additional CT-Sim facilities in line with WHTM/ WHBN guidance to include health implications of design and be fully compliant with all mandatory standards. ▪ Provide regional treatment planning capacity to regional population. 	<p>Action to be taken by:</p> <ul style="list-style-type: none"> ▪ Capital and Estates team ▪ UHB IM&T team ▪ Cancer service board ▪ Workforce ▪ SWWCC
<p>6.11 People according to where they live: Consider people living in areas known to exhibit poor economic and/or health indicators, people unable to access services and facilities</p>	<p>Potential Positive impact</p> <ul style="list-style-type: none"> ▪ Accessible cancer treatment planning delivered from fit for purpose and DDA compliant facilities that are cognisant of the needs of disabled staff, visitors and their carers. ▪ Reduced levels of mortality for cancer patients. <p>Potential Negative impact</p> <ul style="list-style-type: none"> ▪ None identified at this time 	<ul style="list-style-type: none"> ▪ Develop additional CT-Sim facilities in line with WHTM/ WHBN guidance to include health implications of design and be fully compliant with all mandatory standards. ▪ Provide regional treatment planning capacity to regional population. 	<p>Action to be taken by:</p> <ul style="list-style-type: none"> ▪ Cancer service board ▪ SWWCC
<p>6.12 Consider any other groups and risk factors relevant to this strategy, policy, plan, procedure and/or service</p> <p>Staff Groups There are many ways in which the staff of the interdependent services will be impacted upon as outlined in the above categories relating to equality and the section below in relation to the WFG act, however this section has been created to focus on the impact the project could have on training and development, collaboration and indirect patient contact</p>	<p>Potential Positive impact</p> <ul style="list-style-type: none"> ▪ Staff groups from SBUHB and separate organisations across Wales where required to benefit from training with the SWWCC to gain experience. ▪ Increasing digital links to multiple staff groups/ organisations to provide benefits from collaboration, sharing of information, second opinions, all of which are improving clinical practice, education, treatment and cancer care. <p>Potential Negative impact</p> <ul style="list-style-type: none"> ▪ None identified at this time 	<ul style="list-style-type: none"> ▪ Develop an on-site management approach to ensuring the equitable application of training policy across staffing groups ▪ Develop opportunities to further promote the sharing of medical expertise that will support indirect R&D. 	<p>Action to be taken by:</p> <ul style="list-style-type: none"> ▪ Cancer service board ▪ SWWCC

7.	<p>HIA / How will the strategy, policy, plan, procedure and/or service impact on the health and well-being of our population and help address inequalities in health?</p> <p>Questions in this section relate to the impact on the overall health of individual people and on the impact on our population. Specific alignment with the 7 goals of the Well-being of Future Generations (Wales) Act 2015 is included against the relevant sections.</p>		
<p>7.1 People being able to access the service offered: Consider access for those living in areas of deprivation and/or those experiencing health inequalities</p> <p>Well-being Goal - A more equal Wales</p>	<p>Potential Positive impact</p> <ul style="list-style-type: none"> Provide the population of South West Wales with access to a UK 'standard practice' cancer treatment planning delivered from fit for purpose and DDA compliant facilities that are cognisant of the needs of disabled staff, visitors and their carers. <p>Potential Negative impact</p> <ul style="list-style-type: none"> None identified at this time 	<ul style="list-style-type: none"> Provision of additional CT-Sim capacity at Singleton Hospital. 	<p>Action to be taken by:</p> <ul style="list-style-type: none"> Cancer service board Workforce SWWCC
<p>7.2 People being able to improve /maintain healthy lifestyles: Consider the impact on healthy lifestyles, including healthy eating, being active, no smoking /smoking cessation, reducing the harm caused by alcohol and /or non-prescribed drugs plus access to services that support disease prevention (e.g. immunisation and vaccination, falls prevention). Also consider impact on access to supportive services including smoking cessation services, weight management services etc.</p> <p>Well-being Goal – A healthier Wales</p>	<p>Potential Positive impact</p> <ul style="list-style-type: none"> Provide the population of South West Wales with access to a UK 'standard practice' cancer treatment planning delivered from fit for purpose and DDA compliant facilities that are cognisant of the needs of disabled staff, visitors and their carers. Focus on staff wellbeing and keeping well <p>Potential Negative impact</p> <ul style="list-style-type: none"> None identified at this time 	<ul style="list-style-type: none"> Provision of additional CT-Sim capacity at Singleton Hospital Consider active initiatives for staff on site such as onsite walking routes to encourage staff to use their breaks actively or take walking meetings where appropriate 	<p>Action to be taken by:</p> <ul style="list-style-type: none"> Workforce SWWCC

<p>7.3 People in terms of their income and employment status: Consider the impact on the availability and accessibility of work, paid/ unpaid employment, wage levels, job security, working conditions</p> <p>Well-being Goal – A prosperous Wales</p>	<p>Potential Positive impact</p> <ul style="list-style-type: none"> Employment of a range of skilled staff across disciplines and enable mentoring across all Health Boards. Provide the population of South West Wales with access to a UK 'standard practice' cancer treatment planning delivered from fit for purpose and DDA compliant facilities that are cognisant of the needs of disabled staff, visitors and their carers. <p>Potential Negative impact</p> <ul style="list-style-type: none"> None identified at this time 	<ul style="list-style-type: none"> Provision of additional CT-Sim capacity at Singleton Hospital will enhance recruitment and retention in line with the Training and Development Plan plus provide further opportunities to collaborate with partners/ other teams to support communication and indirect patient care interventions Scheme developed on HB's Local framework include monitoring of expenditure on:- Welsh-based suppliers, SMEs, third sector enterprises, and staff 	<p>Action to be taken by:</p> <ul style="list-style-type: none"> Workforce SWWCC
<p>7.4 People in terms of their use of the physical environment: Consider the impact on the availability and accessibility of transport, healthy food, leisure activities, green spaces; of the design of the built environment on the physical and mental health of patients, staff and visitors; on air quality, exposure to pollutants; safety of neighbourhoods, exposure to crime; road safety and preventing injuries/accidents; quality and safety of play areas and open spaces</p> <p>Well-being Goal – A resilient Wales</p>	<p>Potential Positive impact</p> <ul style="list-style-type: none"> Local access eliminates significant travelling for staff, patients and carers DDA compliance of facility <p>Potential Negative impact</p> <ul style="list-style-type: none"> None identified at this time 	<ul style="list-style-type: none"> Develop additional CT-Sim facilities in line with WHTM/ WHBN guidance to include health implications of design which provides a fully compliant built environment with full accessibility Establish and socialise an agreed site travel plan which promotes access and supports an environmental agenda Promotion of employee wellbeing service to support with healthy lifestyles and wellbeing. Scheme developed on HB's Local framework include monitoring of expenditure on:- Welsh-based suppliers, SMEs, third sector enterprises, and staff include monitoring of, e.g. on-site consumption of renewable energy; tonnes of waste diverted from landfill; percentage of materials containing recycled content and reduction in water consumption 	<p>Action to be taken by:</p> <ul style="list-style-type: none"> Capital and Estates team

<p>7.5 People in terms of social and community influences on their health: Consider the impact on family organisation and roles; social support and social networks; neighbourliness and sense of belonging; social isolation; peer pressure; community identity; cultural and spiritual ethos</p> <p>Well-being Goal – A Wales of cohesive communities</p>	<p>Potential Positive impact</p> <ul style="list-style-type: none"> Co-location with other SWWCC services and the main hospital will support ongoing staff cohesion and opportunity for synergy Provision of local services eliminates significant travelling therefore supporting patients and carers / the wider community to access the timely support they need and reduce any extended financial burdens <p>Potential Negative impact</p> <ul style="list-style-type: none"> None identified at this time 	<ul style="list-style-type: none"> Consider implementation of staff social organisational group. Provision of additional CT-Sim capacity at Singleton Hospital. 	<p>Action to be taken by:</p> <ul style="list-style-type: none"> Cancer service board Workforce SWWCC
<p>7.6 People in terms of macro-economic, environmental and sustainability factors: Consider the impact of government policies; gross domestic product; economic development; biological diversity; climate</p> <p>Well-being Goal – A globally responsible Wales</p>	<p>Potential Positive impact</p> <ul style="list-style-type: none"> Deliver UHB and WG policies Contribute to meeting the WFG Act As well as the WFG Act, the project supports the principles as set out within Public Health Wales (PHW) Long Term Strategy 2023 – 2035, and ‘A Healthier Wales’ which work to protect and improve health and well-being and reduce health inequalities for the people of Wales. This project will contribute to the specific priority of the collaborative agendas for change by allowing the Health Board to deliver excellent regional public health services to protect the public and maximise population health outcomes. By improving equity of access, the population of South West Wales will be relative to other areas of Wales with inequalities reduced. 	<ul style="list-style-type: none"> Continue to adhere to the values and visions of multiple national and regional strategies to deliver enhanced service models and opportunities for future sustainability 	<p>Action to be taken by:</p> <ul style="list-style-type: none"> Cancer service board
	<ul style="list-style-type: none"> All changes and linked service delivery will have measures to tackle the public health effect of climate change and increase service sustainability where possible. 		
<p>8.</p>	<p>Please summarise the potential positive and/or negative impacts of the strategy, policy, plan or service</p> <p>Please answer question 8.1 following the completion of the EHIA and complete the action plan</p>	<p>Summary of Analysis The development will have the following positive impacts:</p>	

		<p>Provides permanent additional CT-Sim capacity and improved resilience in the SWWCC at Singleton Hospital in compliance with WHBN/WHTM standards and best practice by:</p> <ul style="list-style-type: none"> • Providing access to two modern CT-Sim machines & supporting AI software within the SWWCC. • Providing fully compliant estate infrastructure and high-quality environment. • Meeting WHBN/WHTM design and technical standards. <p>Reduces the patient pathway and improve quality and provide timely treatment planning; Enhance the SWWCC's reputation as a regional centre of excellence for cancer services, and; Provide access to modern clinical services and technologies and comply with best practice by:</p> <ul style="list-style-type: none"> • Accessing additional CT-Sim services. • Ensuring the SWWCC has sufficient current and future CT-Sim capacity. • Improving RTT performance. <p>Reducing Time to Radiotherapy performance target breaches in the provision of radical radiotherapy treatment, improving performance against All Wales Radiotherapy Quality Metrics by: Achieving the 14 day target for 80% of our patients.</p>
		<ul style="list-style-type: none"> • Improving patient pathways by providing access to modern CT-Sim infrastructure and AI Software. • Reducing current Radiotherapy Pathways by 2 days in line with best practice and WGov's Quality Metric for Cancer Centre performance (i.e. from 14 days to 12 days). • Shortening the pathway. <p>Providing the South West Wales population with access to two modern CT-Sims capable of supporting complex treatments, and; Providing more opportunities for Research and Clinical Trial participation.</p> <p>Providing access to CT Sim assisted AI software, which will reduce Clinical Oncologist and non-medical staff (Radiotherapy Physics) time spent undertaking Outlining targets and Organs at risk by achieving a significant reduction on Clinical Oncologist's time.</p>