Equality and Diversity Impact Assessment for Monklands Replacement Project – Wester Moffat Site

Stage 3
Revised January 2020
Monklands Replacement Project
EDIA of Wester Moffat Site

This EDIA was completed on the Wester Moffat site, which is one of three shortlisted sites, being taken forward for option appraisal number two.

This EDIA:

- Focuses on land at Wester Moffat being a potential site for a new build University Hospital Monklands
- It assesses the location and not the internal design or delivery of services within the building
- A separate EDIA will be developed in regards to the design, once a location has been agreed
- A Fairer Scotland Duty assessment of the proposal, i.e. focusing on the impact of the new Monklands proposal on socio-economic inequalities has been being carried out by NHS Lanarkshire’s Public Health Department

See link: Add when completed

Q1 a; Function
- [ ] Guidance
- [ ] Policy
- [ ] Project
- [x] Service
- [ ] Other, please detail:

Q2: What is the scope of this EDIA

- [x] NHSL Wide
- [ ] Service Specific
- [ ] Discipline Specific
- [ ] Other (Please Detail)

Q3: Is this a new development? (see Q1)

- [x] Yes
- [ ] No

Q4: If no to Q3 what is it replacing?
Q5: Team responsible for carrying out the Impact Assessment? (please list)

Prepared January 2020 by:
Monklands Replacement Project, Business Manager
NHS Lanarkshire, Equality and Diversity Manager
NHS Lanarkshire, Head of Planning & Development

Reviewed in draft January 2020 by:
Monklands Replacement Project Team

This final draft will be presented to the Stakeholder Engagement group for approval on Tuesday 18th February 2020.

Q6: Main EDIA person’s contact details

<table>
<thead>
<tr>
<th>Name</th>
<th>Telephone Number</th>
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<tbody>
<tr>
<td>Lisa Elliott</td>
<td>01236 713348</td>
</tr>
</tbody>
</table>

Department: Monklands Replacement Project
Email: Lisa.elliott@lanarkshire.scot.nhs.uk

Q7: Describe the main aims, objectives and intended outcomes

The current hospital accommodation is a product of 1960s design and 1970s construction techniques. The lack of provision of sufficient space, and of sufficient quality, to develop and expand clinical services prevents NHS Lanarkshire from meeting its strategic objectives.

NHS Lanarkshire’s Achieving Excellence strategy describes the ambition to shift care away from inpatient treatment to day case, day treatment, outpatient and community care. The current accommodation is a barrier to this due to chronic lack of space, on-going risks to business continuity and limitations on what can be achieved within the current footprint. The strategy also describes pan-Lanarkshire development of further centres of excellence for trauma, orthopaedics, cancer, general surgery and for training and research: again the limitations of infrastructure at Monklands prevent these.

http://www.nhslanarkshire.org.uk/Involved/consultation/healthcare-strategy/Pages

As part of this NHS Lanarkshire is preparing plans for a large capital funded project to replace the existing University Hospital Monklands with a new build. Wester Moffat is one of a number of potential sites being considered.

This project provides a unique opportunity to further develop our specialist acute hospital services and centres of excellence and to fully integrate these with community based health and social care services.
Any development process is being conducted in accordance with guidance issued by the Scottish Government Health Directorate, which sets out the Board’s responsibility to inform potentially affected staff and communities about the proposed changes and to involve them in the design development and appraisal of options. This is done through proportionate public engagement on the preferred options and in recommending a decision.

The redevelopment will enable NHSL to construct a healthcare facility according to current design standards. This will improve the atmosphere and setting in which care is provided and will improve patient experience and working environment for hospital staff.

It is proposed that the project will reshape the hospital and the care environment for residents in the University Hospital Monklands catchment, and will enhance the range of services provided by NHS Lanarkshire.

The urban context of this large development means that there are potentially some adverse effects for certain population groups and that these may manifest as negative health outcomes. It is acknowledged that large construction sites can be disruptive for local residents.

NHSL recognise this risk and will take all appropriate measure to maintain communication and to reduce disruption.

Q8: (i) Who is intended to benefit from the function/service development/other (Q1) – is it staff, service users or both?

- Staff
- Service Users
- Other

Please identify: carers; partner organisations

(ii) Have they been involved in the development of the function/service development/other?

- Yes
- No

(iii) If yes, who was involved and how were they involved? If no, is there a reason for this action?

Comments:

A series of stakeholder events have been undertaken as part of the process to develop plans for the replacement of University Hospital Monklands. This process has been developing since 2016, and will continue to ensure appropriate engagement to take forward the detail of the option appraisal process, with patient and carer representatives, clinicians, managers and staff.

From the earliest stages of the process, the Monklands Replacement Project Team has given consideration to involving key groups to inform and promote the need for change and to identify the possible barriers that may prevent people from engaging in the development process. A range of different methods of engagement and discussion were agreed thus enabling people to have their views heard. In addition, the involvement of staff and lay representatives in the stakeholder groups meant that they could directly disseminate information to their communities and provide on-going feedback on the process.
The Monklands Replacement Project Team supported and informed the development of a formal process of engagement with key stakeholders. A series of Stakeholder Events were held between January and October 2016 to ensure that:

- All stakeholders were identified and would have the opportunity to engage in the development of an appropriate clinical model
- A process to develop a short list of service configuration options was agreed
- A definitive short list of options could be developed
- Timescales for delivery were agreed

In addition the consultation process around NHS Lanarkshire’s healthcare strategy ‘Achieving Excellence’ included a specific section on the plans relating to University Hospital Monklands and sought active engagement from the public on the options for delivery of services. This was supported by a series of public events during October 2016. The results of the consultation responses were factored into the formal option appraisal planning process.

The process has progressed through 2017, with the development of clinical work streams to finalise the model of delivery of clinical care to patients. The initial phase of this process concluded in May 2018 with a series of cross-check sessions attended by a wide range (100+) of stakeholders – clinicians, patients, patient representatives and staff side representatives. This clinical model informed the option appraisal process.


A total of 51 stakeholders, comprising 35 staff across NHS Lanarkshire and 16 patients, patient representatives and carers participated in the events. Significant engagement with stakeholders/participants was undertaken in advance through a series of six pre-briefing sessions.

An agreement via the NHS Lanarkshire Board and the Scottish Health Council determined that a formal public consultation would take place and the following preparation was carried out:

- A consultation document was created (3 months in advance) which was easy to understand with clear and concise information, this document was available at health centres, libraries and pharmacies across the area
- A dedicated web page was also created which hosted links to the document, online survey, and additional supporting documents
- Twitter and Facebook updates were prepared
- Public Consultation events were arranged

The Scottish Health Council helped to oversee the consultation process, by supporting and providing guidance and feedback to NHS Lanarkshire throughout the process, and produced a report following completion of the consultation period.
The Scottish Health Council has participated in the process from the initial stages, which have included being part of Option Appraisal, Planning and the Monklands Replacement Project Stakeholder Engagement Group.

The Monklands Replacement Project Stakeholder Engagement Group ((MRPSEG) was created to support and guide the Monklands Replacement Project Team, in how it informs, engages and consults with people on the Monklands Replacement Refurbishment Project. The MRPSEG is made up of public, patients, carers, third sector representatives, Scottish Health Council and NHS Lanarkshire staff. Members offer their perspectives on how NHS Lanarkshire informs, engages and consults with patients, carers and the public regarding MRRP.

All EDIAs and reviews throughout the process have been submitted to the Stakeholder Engagement Group and other working groups. Members have been asked on a regular basis to contribute on the EDIAs as they evolve and change throughout the consultation process.

A number of EDIAs were completed and published prior to the original Option Appraisal in June 2018. A further three were carried out in 2018, focusing on the two most highly scored sites and one looking at staying on the existing site, as requested by Scottish Health Council.

The EDIA process is a continuous one, and will not be signed off as completed, until a decision has been made on a site. Until then, the EDIAs will be continuously updated and submitted to the MRP Stakeholder Engagement Group on a regular basis for comments.

A formal public consultation on the outcome of the appraisal took place in Autumn 2018 and a formal report setting was published setting out the process, including a detailed financial analysis, and identification of the highest scoring option. Following this period of formal consultation (90 days) a final report and recommendation, including comments from stakeholders, was considered by NHS Lanarkshire Board in autumn 2018.

The Cabinet Secretary for Health commissioned an Independent Review of the process followed by the Monklands Replacement Project. The Report of the Independent Review Panel (IRP) was published on 27th June 2019. On the same day the Cabinet Secretary for Health and Sport wrote to the NHS Board Chair on this matter.

The Cabinet Secretary recognised in her letter that the options to either refurbish or redevelop the existing site of University Hospital Monklands were not viable, and so it was recommended that the designation of the project moving forwards became the “Monklands Replacement Project” (MRP).

The Cabinet Secretary also offered ongoing advice to the Project in the form of recommendations. The recommendations were welcomed by the chair and steps have been taken to implement the recommendations.

A new Oversight Board has been formed and met for the first time officially in October 2019. This Oversight Board is recognised as a Governance Committee of the Lanarkshire NHS Board.

The Cabinet Secretary also requested that a re-evaluation of potential sites take place in conjunction with North Lanarkshire Council Planning department alongside a public site nomination process. This
piece of work has taken place and new shortlist of sites was presented to the NHS Lanarkshire Board on 9th January 2020.

The Cabinet Secretary also requested that a vision for the existing University Hospital Monklands site be taken forward which would include the establishment of a new partnership for the development of a set of proposals for the future use of the University Hospital Monklands Site. The recommendations of the Fairer Scotland Duty assessment will also be taken forward.

A further communication and engagement plan has been developed for Spring 2020 with the intent to hold a second option appraisal exercise in March 2020.

(iv) Please include any evidence or relevant information that has influenced the decisions contained in this EDIA; (this could include demographic profiles; audits; research; published evidence; health needs assessment; work based on national guidance or legislative requirements etc.)

Additional Information

1. Copy of NHS Lanarkshire strategy *Achieving Excellence*  
   http://www.nhs Lanarkshire.org.uk/Involved/consultation/healthcare-strategy/Pages

2. Formal consultation report and associated documentation  
   https://www.nhs Lanarkshire.scot.nhs.uk

3. Director of Public Health Annual Report  

4. SGHD CEL 4 ‘Informing, engaging and consulting people in developing health and community care services’  

5. Scottish Health Council guidance: ‘Involving patients, carers and the public in option appraisal for major health service changes’  
   https://scottishhealthcouncil.org/publications/guidance.aspx#.W_08V-KnyDs

6. Health and Technology Assessment of the Monklands Replacement Project.
The detailed equality impact assessment action plan (see Appendix B) lists the actions that will be taken to mitigate any negative impact assessments have been identified.
Q9: When looking at the impact on the equality groups, you must consider the following points in accordance with General Duty of the Equality Act 2010 see below:

In summary, those subject to the Equality Duty must have due regard to the need to:
- eliminate unlawful discrimination, harassment and victimisation;
- advance equality of opportunity between different groups; and
- foster good relations between different groups

Has your assessment been able to demonstrate the following: Positive Impact, Negative / Adverse Impact or Neutral Impact?

<table>
<thead>
<tr>
<th>Section 1 - What Protected Characteristics are being assessed?</th>
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<tbody>
<tr>
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<tr>
<td>Independent Transport Summary Report</td>
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<td><em>Will be published as part of site selection info pack</em></td>
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<td>Travel and transport analysis</td>
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Option Appraisal process report and appendices

Climate Change (Scotland) Act 2009

BREEAM 2014

North Lanarkshire Council Air Quality Plan Measures 2018

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<td>X</td>
<td>Travel</td>
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Could potentially lead to unequal opportunities due to:
- Negative: for a small group there would additional travel time
- Currently, there are no bus stops within 400m of the Wester Moffat site and no railway station within 800m of the site, however, this is an estimate as available land is of vast amount and it is undetermined at this point where a hospital would be located.
- The nearest train station is Drumgelloch which connects to Coatbridge and Airdrie stations on the Glasgow, Edinburgh and Helensburgh line.
- possible increase in traffic and congestion on local roads and motorways – a traffic impact assessment will be undertaken as part of the formal planning approval process, this has been factored into the financial analysis
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<td><strong>Transport</strong>&lt;br&gt;There is the possibility of less travel to the location/need different travel/transport issues/arrangements. This could have a positive impact where age groups of service users/carers are closer to the location and will require less assistance with travel or escort.&lt;br&gt;&lt;br&gt;<strong>Transport</strong>&lt;br&gt;• New location is more accessible for a larger proportion for the hospitals catchment area with 100% of the catchment able to reach Wester Moffat within 20 minutes; this is an increase of 6% from the existing site.&lt;br&gt;• new single carriageway link road - proposed East Airdrie Link Road&lt;br&gt;• Train station (Drumgelloch) has good links to Coatbridge, Airdrie, Edinburgh and Glasgow.&lt;br&gt;• Provision of bus services will be provided at least equivalent to existing services,&lt;br&gt;• Buses will continue to be provided to Wester Moffat based on existing timetable of frequencies – currently – currently 4.98% of population use bus services&lt;br&gt;• <strong>all buses that currently provide access to Monklands will provide the equivalent to Wester Moffat</strong>&lt;br&gt;&lt;br&gt;Development of <strong>integrated community transport hub</strong>, which will support people with;&lt;br&gt;• Poor access to public transport due to rurality or other geographical factors complex or challenging health issues who are not eligible for ambulance transport e.g. people with limited mobility or short term acquired disabilities&lt;br&gt;&lt;br&gt;<strong>Parking</strong>&lt;br&gt;• Increase in the number of parking places as guided by North Lanarkshire Council – which will improve the patients experience as parking is a significant challenge at current site.&lt;br&gt;• Development of a parking strategy for NHS Lanarkshire with focus on patient parking.&lt;br&gt;&lt;br&gt;Improve facilities with the creation or increase of the following:-</td>
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|  |  |  | • Disability parking  
• Drop off zone  
• Parking will be protected for the use of patients, carers and staff – introduction of a system to discourage inappropriate users to park on site e.g. commuters using the car park as park and ride  
• Improve infrastructure to support Scottish government sustainability and clean travel agenda by creating secure cycle parking, showers and changing facilities for people using the site |
| General | X |  | Provision of new hospital facility designed to meet healthcare needs of catchment population, better clinical outcomes for patients  
• New site will have compliant access and be supported by a range of public transport options.  
• Design Statement delivered in its entirety e.g. ability to provide 20% expansion, increased access to green space  
• No increased traffic through construction  
• No risk of loss of business continuity  
• No requirement for service decants  
• Shortest timeframe for completion (2027)  
• No construction and demolition work at live, operational hospital |
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| x        | x                 | x       | - Re-use of the previously developed and contaminated land where appropriate remediation has taken place.  
- Maintain ecological value of the site and protect existing features prior to and during site operations.  
- Increase emissions / pollution from additional traffic to an undeveloped site.  
- Reduction in biodiversity on the existing brownfield site during development  
- Potential pollution of water supplies during building work.  
- Increase in noise / pollution / dust from site traffic.  
- Increase in noise / pollution / dust from building works. |

### Section 2 - What Protected Characteristics or other affected Groups are being assessed?

**Low Income/Poverty**

**What Evidence has been considered?**

- Travel and transport analysis  
[https://www.nhslanarkshire.scot.nhs.uk/?wpdmdl=3217&ind=1536322726244](https://www.nhslanarkshire.scot.nhs.uk/?wpdmdl=3217&ind=1536322726244)  

- Option Appraisal process report and appendices  

- How travel times were identified  
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Provide any evidence that supports your answer for positive, negative or neutral including what is currently in place or is required to ensure equality of access.

- Due to travel increase there may be additional costs for a small group of the population, but there is mitigation for that, patients in receipt of designated range of benefits eligible for reimbursement of:
  - Travel costs for hospital appointments
  - All patients over 60 have access to Free bus travel
  - A number of protected groups have access to Free travel costs

Development of **integrated community transport hub**, which will support people with:
- Poor access to public transport due to rurality or other geographical factors
- Complex or challenging health issues who are not eligible for ambulance transport e.g. people with limited mobility or short term acquired disabilities

**Public Transport**
### What impact has your review had on the following ‘protected characteristics’:

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<td>- all buses that currently provide access to Monklands will provide the equivalent to Wester Moffat</td>
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### Section 3 - What Protected Characteristics are being assessed?

Age (Older people, Adults, Young People, Children Infants), Disability (incl. physical/ sensory problems, learning difficulties, communication needs; cognitive impairment), Gender Reassignment, Marriage and Civil Partnership, Pregnancy and Maternity, Race/Ethnicity, Religion/Faith, Sex (Male/Female), Sexual Orientation

### What Evidence has been considered?

Travel and transport analysis
https://www.nhslanarkshire.scot.nhs.uk/?wpdmdl=3217&ind=1536322726244

Option Appraisal process report and appendices

How travel times were identified
https://www.nhslanarkshire.scot.nhs.uk/?wpdmdl=3278&ind=1538741515855

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Section 4 - What Protected Characteristics or other affected Groups are being assessed?

Staff
### What Evidence has been considered?

- **Travel and transport analysis**
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<th>X</th>
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| X | | Due to travel increase there maybe additional costs for a small group of staff who currently walk to work or use public transport, those affected will be supported via:  
- Travel expenses for 4 years  
- Bus services will be in place to support staff and local communities.  
- Park and ride at local train stations.  
- Car sharing  
- Some changes may be necessary in role profiles due to technological advances  
- Potential for park and ride at Drumgelloch.  
- Improved staff facilities including better socialisation space and changing facilities.  
- Improved staff training facilities with space for expansion for research and development  
- Ability to maximise University status which will help support in-house training and development  
- Possibility of childcare facilities on site  
- Better recruitment opportunities with the availability to compete with other health boards with better facilities  
- Retention of employees due to better working facilities and a new build allows an optimal clinical model which improves patient care and staff morale.  
- Potential for new roles and staff development within all areas of the multi-disciplinary team. Staff across all disciplines have the potential to be upskilled to undertake additional or new roles.  
- Integrated transport hub  
- Shorter distance to work for some staff |
**Section 5 - What Protected Characteristics or other affected Groups are being assessed?**

Carers, Homeless, Involved in Criminal Justice System, Language/Social Origins, Literacy, Mental Health, Looked after and accommodated children and young people, People affected by addictions and substance abuse, Refugees and Asylum Seekers

**What Evidence has been considered?**

- Travel and transport analysis
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<tr>
<td>There is no evidence that shows that there is a differential impact for any of these protected characteristics. This will continue to be assessed at each stage.</td>
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</table>

Section 6 - What Protected Characteristics or other affected Groups are being assessed?

Rural Areas, People who are unable to leave their homes without assistance.

What Evidence has been considered?

Travel and transport analysis
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Option Appraisal process report and appendices

Design Statement
https://www.nhslanarkshire.scot.nhs.uk/?wpdmdl=2850&ind=1531742626006
Option Appraisal process report and appendices

Climate Change (Scotland) Act 2009
BREEAM 2014
North Lanarkshire Council Air Quality Plan Measures 2018

<table>
<thead>
<tr>
<th>What impact has your review had on the following ‘protected characteristics’:</th>
<th>Rural Areas</th>
<th>People who are unable to leave their homes without assistance</th>
</tr>
</thead>
<tbody>
<tr>
<td>Positive</td>
<td>Adverse/ Negative</td>
<td>Neutral</td>
</tr>
<tr>
<td>X</td>
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</tbody>
</table>

- Development of integrated community transport hub, which will support people with;
- Poor access to public transport due to rurality or other geographical factors
- Complex or challenging health issues who are not eligible for ambulance transport e.g. people with limited mobility or short term acquired disabilities

**Section 8 - What Protected Characteristics or other affected Groups are being assessed?**

Transient Populations

**What Evidence has been considered?**

Travel and transport analysis
https://www.nhslanarkshire.scot.nhs.uk/?wpdmdl=3217&ind=1536322726244
What impact has your review had on the following ‘protected characteristics’:

<table>
<thead>
<tr>
<th>Transient Populations</th>
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</thead>
<tbody>
<tr>
<td>Positive Adverse/ Negative Neutral</td>
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<tr>
<td>Comments</td>
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<tr>
<td>Provide any evidence that supports your answer for positive, negative or neutral including what is currently in place or is required to ensure equality of access.</td>
</tr>
<tr>
<td>X</td>
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<tr>
<td>Accessibility to hospital sites is important as some communities like the gypsy/travelling communities are more likely to access a hospital with numerous good main road links.</td>
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</tbody>
</table>
Q10: If actions are required to address changes, please attach your action plan to this document. Action plan attached?

Yes ☒ No ☐

If the screening process has shown potential for a high negative impact contact Hina Sheikh for further advice and support.

Date EDIA Completed 30.01.2020
Date of next EDIA Review To be confirmed
Signature
Print Name Graham Johnston
Department or Service Head of Planning and Development

Please keep a completed copy of this template for your own records and attach to any appropriate tools as a record of EDIA being completed. Send copy to hina.sheikh@lanarkshire.scot.nhs.uk
<table>
<thead>
<tr>
<th>Date</th>
<th>Issue Implications</th>
<th>Action Required</th>
<th>Lead (Name, title, and contact details)</th>
<th>Time scale</th>
<th>Resource Implications</th>
<th>Comments</th>
</tr>
</thead>
<tbody>
<tr>
<td>27/01/2020</td>
<td>Transport</td>
<td>Mitigation</td>
<td>Graham Johnston, Head of Planning and Development</td>
<td>Timescale will be determined by the progression of the project programme.</td>
<td>Resource implications will be determined by the progression of the project programme.</td>
<td>Initial conversations have taken place with relevant transport providers to support presentation of potential transport plans for either site. Discussions continue with planning and transport Scotland and other relevant parties. has been agreed by the SG</td>
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<td>Increase in congestion in local area.</td>
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<td>Lack of existing public transport links.</td>
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<td>Impact on groups of service users/carers are disproportionally affected by transport issues (e.g. less likely to have own transport if older/additional cost of transport) or where service users require assistance to travel or escort.</td>
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<td>A traffic impact assessment has been undertaken as part of communication and engagement process. The reports will be shared as part of the public information pack and includes financial planning for transport and infrastructure.</td>
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<td>A provision of bus services equivalent existing services will be available based on existing timetable of frequencies. Development of integrated community transport hub to support service users.</td>
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<tr>
<td>27/01/2020</td>
<td><strong>Low income group</strong></td>
<td>Due to travel increase there maybe additional costs for a small group of the population.</td>
<td>Graham Johnston, Head of Planning and Development</td>
<td>Timescale will be determined by the progression of the project programme</td>
<td>Resource implications will be determined by the progression of the project programme</td>
<td>This is an existing policy/services which will not change and will continue to be provided all NHSL patients who require additional financial assistance.</td>
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<td>Patients in receipt of designated range of benefits are eligible for reimbursement of travel costs for hospital appointments.</td>
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<td>All patients over 60 have access to free bus travel.</td>
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<td>A number of protected groups have access to free travel costs.</td>
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<td>27/01/2020</td>
<td><strong>Staff</strong></td>
<td>Due to travel increase their maybe additional costs for a small group of staff who currently walk to work or use public transport.</td>
<td>Graham Johnston, Head of Planning and Development</td>
<td>N/A</td>
<td>Resource implications will be determined by the progression of the project programme</td>
<td>This is an existing NHSL policy which will be equally applied to any staff affected.</td>
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<td>This will be supported by:</td>
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<td>Travel expenses for 4 years</td>
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<td>Bus services will be in place to support staff and local communities.</td>
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<td>27/01/2020</td>
<td>Addictions and substance abuse users</td>
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<td>100% single rooms could lead to occupancy where a patient may attempt to take drugs or try to smoke a cigarette via the window etc.</td>
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<td>Bedroom design objective is to maximise staff observation of rooms within the ward area.</td>
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<td>Some changes may be necessary in role profiles due to technological advances.</td>
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<td>Park and Ride at local train stations.</td>
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<td>Potential for new roles and staff development within all areas of the multi-disciplinary team.</td>
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<td></td>
<td>Staff members across all disciplines have the potential to be up-skilled to undertake additional or new roles.</td>
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</tbody>
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<tr>
<td>Workforce Planning Lead and Site Management Team</td>
<td>N/A</td>
<td>Design of rooms will ensure patients at high risk are in observational designated rooms, which will ensure their safety.</td>
<td>Workforce planning to support any changes to staffs role profile.</td>
</tr>
<tr>
<td>Graeme Reid, Project Director</td>
<td>Timescale will be determined by the progression of the project programme.</td>
<td>Resource implications will be will be determined by the progression of the project programme.</td>
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<tr>
<td>27/01/2020</td>
<td>Community Engagement - Reputation damage/dis-engagement from stakeholders, staff and other affected parties</td>
<td>Stakeholder Engagement Group (SEG) will continue to support NHSL to ensure that communities/stakeholders are part of the design, delivery and decision making around any new hospital, following the agreed decision on location of the new hospital. NHSL will continue to promote progress on work through a number mediums e.g. Roadshows, staff briefings, press releases, Facebook, twitter.</td>
<td>Graham Johnston, Head of Planning &amp; Development</td>
</tr>
</tbody>
</table>

| DD / MM / YYYY |                                                                                      |                                                                                  |                                                        |            |                       |                                                                                               |

Further Notes: