

Equality and Health Impact Assessment

Policy* title: Withdrawal of national desflurane contract in Wales

AWMSG and AWTTC will consider and complete an Equality and Health Impact Assessment in parallel with each development stage of our policies. This will help us to follow the five ways of working for public bodies, and work to achieving the wellbeing goals, outlined in the Well-Being of Future Generations (Wales) Act 2015.

* The term "policy" is used throughout to cover: policies, strategies, functions, practices, procedures.

Date: 04/12/2023

1.	Names of the policy lead(s);	Welsh Anaesthetic Green Network - WAGN
	AWTTC contact details	Tel: 02921 826900; email: <u>awttc@wales.nhs.uk</u>
2.	State the objectives of the policy.	To stop all use of desflurane in secondary care in Wales. The primary reason for this is to minimise environmental harm.
		Stopping the use of desflurane will positively impact NHS Wales' target to achieve net zero by 2030, and is in line with the NHS Wales Decarbonisation strategic delivery plan. Stopping desflurane use will also bring NHS Wales in line with the mandate of the Royal College of Anaesthetists.
		The project proposes to remove desflurane from the national formulary, return borrowed vaporizer equipment, and track ongoing desflurane purchase. Use of desflurane will be monitored by a medicine monitoring dashboard.
3.	 Evidence and background information considered. For example: population data staff and service users' data, as applicable 	Desflurane is a volatile anaesthetic gas with 2540 times the global warming potential of carbon dioxide, this compares with 130 times GWP for sevoflurane, an alternative.



 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 Population pyramids are available from Public Health Wales Observatory.	The use of desflurane has reduced from making up 13.6% volatile anaesthetic gas used in Wales in 2018/9 to 1.5% in 2022/3, and from 71.4% volatile carbon footprint to 21%. This still represents 128,584 kgCO2e per annum. There are 3 sites in Wales still using desflurane – 1 main site and 2 others with occasional use. The primary reason for terminating use of desflurane is its disproportionate environmental impact in combination with the widespread availability of suitable alternatives. Ceasing use will positively impact NHS Wales's target to achieve Net Zero by 2030 and is in line with the NHS Wales Decarbonisation strategic delivery plan which states that by 2022 "Anaesthetists will be prioritising medical gases with low global warming potential as standard". Additionally, desflurane is a more expensive anaesthetic gas option. A survey of all anaesthetists in Wales conducted in October 2022 received 193 replies (approx. 25% response rate). 86% of respondents never use desflurane. There was 1 daily and 1 weekly user, otherwise use was on an annual basis. Of the 27 users of desflurane, 19 work on sites which have decommissioned the gas since the survey. These few users would need to change their practice to alternative techniques, which are widely available and there are numerous education opportunities regarding these. Actions/outcomes: Desflurane will be removed from the national formulary. Borrowed vaporizers will be returned to pharmaceutical company. Desflurane burchasing will continue to be tracked. We will consider training requirements for regular desflurane users for alternatives to ensure ongoing patient safety. Online training is available through the Total Intravenous Anaesthesia (TIVA) Academy.
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		The method of withdrawal will be via a centralised approach with opportur for hospital sites to negotiate an individual contract if they need to. Desflurane – Walking on thin ice caps – background article https://www.bjanaesthesia.org.uk/article/S0007-0912(20)30766-2/fullte NHS England – Decommission statement –	
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5. EQIA - How will the policy impact on people?

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.

How will the policy impact on, or affect:	Potential positive and/or negative impacts	Recommendations for improvement/ mitigation	Actions taken (and who by). Refer to where the mitigation is included in the document, as appropriate.
 5.1 Age For most purposes, the main categories are people aged: under 18 years; between 18 and 65 years; over 65 years. 	Some survey respondents reserve desflurane for frail or elderly patients. The evidence is of low certainty that total intravenous anaesthesia (TIVA) is favourable in terms of post-operative cognitive dysfunction in elderly patients. On balance of low certainty of evidence – a neutral effect. In young patients – benefits in terms of maintaining planetary health for future – a positive impact.	N/A	N/A
5.2 Persons with a disability	Neutral impact	N/A	N/A
as defined in the Equality Act			
2010			
Those with physical impairments, learning disability, sensory loss or impairment, mental health conditions,			



How will the policy impact on, or affect:	Potential positive and/or negative impacts	Recommendations for improvement/ mitigation	Actions taken (and who by). Refer to where the mitigation is included in the document, as appropriate.
long-term medical conditions such as diabetes.			
 5.3 People of different genders: Consider men, women, people undergoing gender reassignment. 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. 	Neutral impact	N/A	N/A
5.4 People who are married or who have a civil partner.	Neutral impact	N/A	N/A
5.5 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.	Neutral impact	N/A	N/A



How will the policy impact on, or affect:	Potential positive and/or negative impacts	Recommendations for improvement/ mitigation	Actions taken (and who by). Refer to where the mitigation is included in the document, as appropriate.
5.6 People of a different race, nationality, colour, culture or ethnic origin including non- English speakers, gypsies/travellers, migrant workers.	Neutral impact	N/A	N/A
5.7 People with a religion or belief or with no religion or belief. The term 'religion' includes a religious or philosophical belief.	Neutral impact	N/A	N/A
 5.8 People who are attracted to other people of: the opposite sex (heterosexual); the same sex (lesbian or gay); both sexes (bisexual). 	Neutral impact	N/A	N/A
5.9 People who communicate using the Welsh language in terms of correspondence, information leaflets, or service plans and design.	Neutral impact	Ensure any patient information is provided in English and Welsh, including easy read formats.	N/A



How will the policy impact on, or affect:	Potential positive and/or negative impacts	Recommendations for improvement/ mitigation	Actions taken (and who by). Refer to where the mitigation is included in the document, as appropriate.
Well-being goal – A Wales of vibrant culture and thriving Welsh language			
5.10 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.	High body mass index (BMI) is more prevalent in low income populations. Some anaesthetists cited high BMI as a reason for desflurane use as it does lead to a quicker wake-up in this population. However, whilst statistically significant reductions in wake-up times (2– 10 minutes difference across literature) in studies do not represent clinical significance (no difference in post-operative pulmonary complications) and newer alternative techniques (such as TIVA) have been found to be favourable and are commonly utilized in bariatric centres in the UK. Therefore – neutral impact.	N/A	N/A
5.11 People according to where they live.	Neutral impact	N/A	N/A



How will the policy impact on, or affect:	Potential positive and/or negative impacts	Recommendations for improvement/ mitigation	Actions taken (and who by). Refer to where the mitigation is included in the document, as appropriate.
Consider people living in areas known to show poor economic and/or health indicators, people unable to access services and facilities.			
 5.12 Consider others who face health inequalities: Looked after and accommodated children and young people. Carers: paid/unpaid, family members. People who are homeless or those who experience homelessness: people on the street; those staying temporarily with friends/family; those in hostels/B&Bs. Those involved in the criminal justice system: offenders in prison or on probation, ex-offenders. People with addictions and substance misuse problems. People who have poor literacy. 	Neutral impact	Provide easy read formats of patient information.	N/A



How will the policy impact on, or affect:	Potential positive and/or negative impacts	Recommendations for improvement/ mitigation	Actions taken (and who by). Refer to where the mitigation is included in the document, as appropriate.
People living in remote, rural and island locations.			
5.13 Consider any other groups and risk factors relevant to this project.	We consider the impact on any other groups to be neutral.	N/A	N/A



6. HIA - How will the policy impact on the health and wellbeing of people in Wales and help address inequalities in health?

Questions in this section relate to the impact on the overall health of individual people, and the impact on the population in Wales. Specific alignment with the 7 goals of the Well-being of Future Generations (Wales) Act 2015 is included against the relevant sections.

How will the policy impact on, or affect:	Potential positive and/or negative impacts and any particular groups affected	Recommendations for improvement/ mitigation	Actions taken (and who by) Refer to where the mitigation is included in the document, as appropriate.
6.1 People being able to access the service offered. Consider access for those living in areas of deprivation and/or those experiencing health inequalities. Well-being goal - A more equal Wales	Neutral impact	N/A	N/A
6.2 People being able to improve or maintain healthy lifestyles. Consider the impact on healthy lifestyles, including healthy eating, being active, no smoking /smoking cessation, reducing the harm caused by alcohol or non-prescribed drugs plus access to services that support disease prevention	Neutral impact	N/A	N/A



How will the policy impact on, or affect:	Potential positive and/or negative impacts and any particular groups affected	Recommendations for improvement/ mitigation	Actions taken (and who by) Refer to where the mitigation is included in the document, as appropriate.
(such as vaccination, falls prevention).			
Also consider impact on access to supportive services, including smoking cessation services, weight management services.			
Well-being goal – A healthier Wales			
6.3 People in terms of their income and employment status. Consider the impact on the availability and accessibility of work, paid or unpaid employment, wage levels, job security, working conditions.	Neutral impact	N/A	N/A
Well-being goal – A prosperous Wales			
6.4 People in terms of their use of the physical environment. Consider the impact:	Neutral impact	N/A	N/A



How will the policy impact on, or affect:	Potential positive and/or negative impacts and any particular groups affected	Recommendations for improvement/ mitigation	Actions taken (and who by) Refer to where the mitigation is included in the document, as appropriate.
 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 or accidents; quality and safety of play areas and open spaces. 			
Well-being goal – A resilient Wales			
 6.5 People in terms of social and community influences on their health. Consider the impact on: family organisation and roles; social support and social networks; 	Neutral impact	N/A	N/A



How will the policy impact on, or affect:	Potential positive and/or negative impacts and any particular groups affected	Recommendations for improvement/ mitigation	Actions taken (and who by) Refer to where the mitigation is included in the document, as appropriate.
 neighbourliness and sense of belonging; social isolation; peer pressure; community identity; cultural and spiritual ethos. Well-being goal – A Wales of cohesive communities			
6.6 People in terms of macro- economic, environmental and sustainability factors. Consider the impact of government policies; gross domestic product; economic development; biological diversity; climate.	Neutral impact	N/A	N/A



7. Please complete section 7 after completing the EqHIA, and complete the action plan.

7.1 Please summarise the potential positive and/or negative impacts of the policy.	Overall, the policy has a neutral impact in most areas, and a positive impact on the environment.

Action plan for mitigation or improvement and implementation

	Action	Lead(s)	Timescale	Actions taken
7.2 What are the key actions identified as a result of completing the EqHIA?	N/A	N/A	N/A	N/A
7.3 Is a more comprehensive Equalities Impact Assessment or Health Impact Assessment needed?	No			
7.4 What are the next steps?	Send the document and EqHIA to consultation. Public consultation held and comment received. Send to AWPAG for consideration. Send to AWMSG for endorsement.	AWTTC	July–August 2023 August 2023 September 2023 November 2023 December 2023	Public consultation Minor change to document based on comment received. No changes to document. Document endorsed Document published