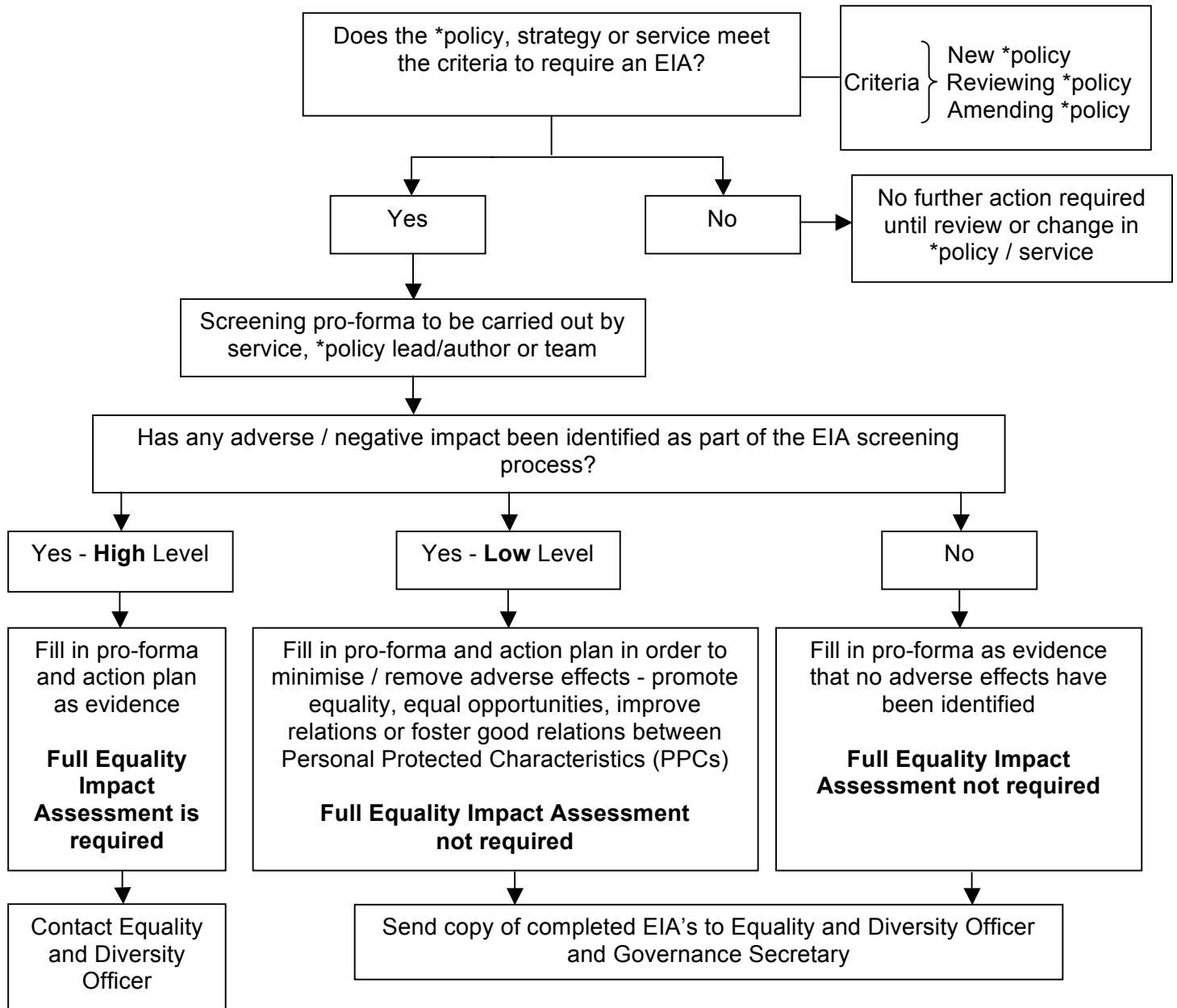


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Equality Impact Assessment Initial Screening Pro-forma
Clinical Policies, Procedures and Functions

Equality Impact Assessment Process Chart
Screening Process



N.B. If a member of staff is unsure about any stage of the EIA process then please contact the Equality and Diversity Officer or patient experience team.

If you require this document in an alternative format e.g., larger print please contact Equality and Diversity Officer on 694479 or e-mail Rwh-tr.EqualityandDiversity@nhs.net

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Completion Guidance: Please ensure that all the questions on the pro-forma are completed and that written evidence is provided. Should you have any problems when filling out this pro-forma then please contact the Patient Experience Team.

Policy* Number (if applicable)		
Name of policy *		
State type of *policy e.g., policy, business case, leaflet etc		
Aim of policy *		
Name of Accountable Director		[INSERT JOB TITLE]
Name of Responsible person/people		[INSERT JOB TITLE]
Assessment Carried out by:-	Name	[INSERT JOB TITLE]
	Department	
	Tele	
	E-mail	
Date of completion		
Synopsis of * project / procedure or attach policy		

1. What service / functions are you responsible for?	
1 a. Where is your service/function carried out? E.g. New Cross, Community, West Park	
1b. Do you receive information on age, disability, Gender / Sex, Gender Re-Assignment, Marriage and Civil Partnership, Pregnancy and Maternity, Race (incl Ethnicity), Religion, Belief, Spirituality, Sexual Orientation of your service users?	y/n

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Please list the information you receive.					
2. Do you currently monitor the service / function by age, disability, Gender / Sex, Gender Re-Assignment, Marriage and Civil Partnership, Pregnancy and Maternity, Race (incl Ethnicity), Religion, Belief, Spirituality, Sexual Orientation? Please state by which equality and by which system	y/n				
REFERRAL STAGE					
3. How are people referred to your function / service? Please explain fully					
4. Could the method/s of referral used have an adverse impact on people from Personal Protected Characteristics (PPCs)? Y/N if yes please state what level of impact Low Level – Impact can be rectified by small actions being taken High level/adverse impact – Impact cannot be rectified without significant changes to the *policy or strategy	Age	High		Low	
	Disability	High		Low	
	Gender / Sex	High		Low	
	Gender Reassignment	High		Low	
	Marriage and Civil Partnership	High		Low	
	Pregnancy and Maternity	High		Low	
	Race (incl Ethnicity)	High		Low	
	Religion, Belief or Spirituality,	High		Low	
	Sexual Orientation	High		Low	
	Any other – e.g. Socio Economic Status	High		Low	
5. What evidence do you have to support your judgement in Question 4? Please explain fully					
ASSESSMENT STAGE					
6. How are people assessed to use the function / service or receive treatment? Please explain fully					

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<p>7. Could the methods used have a level of impact on people with Personal Protected Characteristics (PPCs)? Y/N if yes please state what level of impact Low Level – Impact can be rectified by small actions being taken High level/adverse impact – Impact cannot be rectified without significant changes to the *policy or strategy</p>	Age	High		Low	
	Disability	High		Low	
	Gender / Sex	High		Low	
	Gender Reassignment	High		Low	
	Marriage and Civil Partnership	High		Low	
	Pregnancy and Maternity	High		Low	
	Race (incl Ethnicity)	High		Low	
	Religion, Belief or Spirituality,	High		Low	
	Sexual Orientation	High		Low	
	Any other – e.g. Socio Economic Status	High		Low	
8. What evidence do you have to support your judgement in Question 7? Please explain fully					
FUNCTION/SERVICE/TREATMENT STAGE					
9. How, when and where is your function / service or treatment provided? Please explain fully					

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<p>10. Could the methods described have an adverse impact on people with Personal Protected Characteristics (PPCs)? Y/N if yes please state what level of impact Low Level – Impact can be rectified by small actions being taken High level/adverse impact – Impact cannot be rectified without significant changes to the *policy or strategy</p>	Age	High		Low	
	Disability	High		Low	
	Gender / Sex	High		Low	
	Gender Reassignment	High		Low	
	Marriage and Civil Partnership	High		Low	
	Pregnancy and Maternity	High		Low	
	Race (incl Ethnicity)	High		Low	
	Religion, Belief or Spiritually	High		Low	
	Sexual Orientation	High		Low	
	Any other – e.g. Socio Economic Status	High		Low	
11. What evidence do you have to support your judgment in Question 10? Please explain fully					

Action Plan

Function / Service	PPC	Action	Timescale	Lead manager [INSERT JOB TITLE]
				[INSERT JOB TITLE]
				[INSERT JOB TITLE]
				[INSERT JOB TITLE]
				[INSERT JOB TITLE]

Date Completed : _____

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Guidance notes for managers completing
Equality Impact Assessments

Question 1

The question asks you to confirm the service/function you are responsible for.

Question 1a

This question is asking you to confirm the location that your service / functions cover.

Question 1b

This question is asking you to confirm if you receive any information that provides you with a breakdown about the make up of the population/ service user group.

Question 2

This question is asking you to confirm if you monitor the age, disability, Gender / Sex, Gender Re-Assignment, Marriage and Civil Partnership, Pregnancy and Maternity, Race (incl Ethnicity), Religion or Belief, Sexual Orientation of the patients that are coming into the service. Please state here by which Personal Protected Characteristic (PPC) and also by which system or method.

REFERRAL STAGE

Question 3

This question is asking you to confirm how people are referred to your service. This could be one of the following:

- ❖ Self referral
- ❖ GP referral
- ❖ Consultant referral
- ❖ Referral following discharge from hospital

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Question 4

This question requires serious consideration given that you will need to determine the method/s identified do they impact negatively on different Personal Protected Characteristics (PPCs)? The response could be No, however where you have said this evidence is needed to inform the organisation why there is no impact. If yes, then the level of impact and any identified issues will need to be stated so that we can begin to address them in the action plan.

Question 5

This question provides us with an opportunity to utilise the skills, knowledge and expertise of our partners such as Disability groups across the City, The Wolverhampton Lesbian, Gay Bisexual and Transgender Network, evidence from complaints that may have been received about accessing the function / service. Also any local and national research may be used here.

ASSESSMENT STAGE

Question 6

This question is asking you what processes you use for assessing people to use the function / service or receive treatment. This could be one of the following:

- ❖ Eligibility criteria
- ❖ Treatment required
- ❖ No assessment

Question 7

This question requires serious consideration given that you will need to determine of the method/s identified do they impact negatively on people with Personal Protected Characteristics (PPCs)? The response could be No; however where you have said this evidence is needed to inform the organisation why there is no impact. If yes, then the level of impact and any identified issues will need to be stated so that we can begin to address them in the action plan.

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Question 8

This question provides us with an opportunity to utilise the skills, knowledge and expertise of our partners such as the Disability groups across the City, Wolverhampton Lesbian and Gay, Bisexual and Transgender Network, evidence from complaints that may have been received about accessing the function / service. Also any local and national research may be used here.

FUNCTION/SERVICE/TREATMENT STAGE

Question 9

It would be useful to confirm locations for providing your function / service this could be:

- ❖ In an outpatient clinic
- ❖ On a ward
- ❖ In a patient's home
- ❖ In an accessible location if the service user is disabled and could include any of the above

It would be useful to confirm the frequency of providing the function / services and whether the function / service is provided 9-5 or out of hours.

Question 10

This question requires serious consideration given that you will need to determine of the method/s identified do they impact negatively on different Personal Protected Characteristics (PPCs)? The response could be No, however where you have said this evidence is needed to inform the organisation why there is no impact. If yes, then the level of impact and any identified issues will need to be stated so that we can begin to address them in the action plan.

Question 11

This question provides us with an opportunity to utilise the skills, knowledge and expertise of our partners such as Disability groups across the City, Wolverhampton, Lesbian, Gay, Bisexual and Transgender Network, evidence from complaints that may have been received about accessing the function / service. Also any local and national research may be used here.

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Examples of negative / adverse impact

Listed below are a few examples for consideration: however as managers of the functions / services you will be best placed to highlight some of the issues faced when delivering a service or function. Please feedback any other examples that you feel others may also need to consider.

1. Appointment letters when distributed to patients are always written in English. This could have a negative / adverse impact on patients whose first language is not English they will not be able to understand the information received. This could also have a negative impact on confidentiality as someone else may need to read their letter.
2. Appointment letters when distributed to patients do not take into consideration the needs of a disabled patient e.g. with sight impairment. This could also have a negative impact on confidentiality as someone else may need to read their letter.
3. If the initial point of contact for a service / function is not able to respond to a patient whose first language is not English, or who may have a disability (e.g., visual or hearing impairment) this could have a negative or adverse impact on patients accessing the service / function, as they may then be listed as a “did not attend” (DNA).
4. Assessment processes being carried out without taking into consideration cultural differences may result in a negative / adverse impact and patients not using a service / function. E.g., cultural / festival dates, prayer times etc., they may then be listed as a DNA.

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Additional Information

Please put in an additional information that you think may be relevant to the Equality Impact Assessment

Send Completed EIA pro-forma (remove first page) to : **Equality and Diversity Officer**
Rwh-tr.EqualityandDiversity@nhs.net (Patient Experience Team) and **Governance Secretary**, New Cross Hospital
with corresponding documents for publication on the Website.

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