

## **EQUALITY IMPACT ASSESSMENT –GUIDANCE NOTES**

### **Introduction**

The Trust has a legal requirement not to discriminate in the delivery of their services or in employment on grounds of, race, disability, gender and age; this is identified in the Race relations (Amendment) Act 2000, Disability Discrimination Act 2005, Equality Act 2006 and Employment Equality (Age) regulations 2006.

### **What is an Equality Impact Assessment?**

An Equality Impact Assessment (EQI) is a process of systematically analyzing a proposed policy, service development or function to identify an adverse or positive effect it has on differing groups in the Trust and communities.

### **Who needs to undertake an assessment?**

The Trust expects all managers in collaboration with the multi disciplinary team and public if applicable to undertake assessments for policies and service developments for their specific areas of responsibility.

All existing as well as new introductions of services, service redesign and policy require an impact assessment completing and publishing.

### **Step 1 - Screening for policy for relevance to Diversity**

#### **Purpose –to find out whether a full impact assessment is necessary.**

‘Ask’ whether this policy or service development will have any relevance or impact on patients, users and staff depending upon their race, ethnicity, age, gender, disability, sexually, faith or belief.

Use evidence to establish relevance such as – Trust data on Ethnicity, complaints, workforce data, public health evidence, and patient or staff surveys.

Staff should also refer to the Trusts Race Equality Scheme, Disability Scheme and Gender Scheme and associated action plans.

Check that the policy or service development could:

- a) Eliminate unlawful discrimination
- b) Promote equal opportunities
- c) Promote good community relations

If there is no relevance to diversity or to any specific group/individuals then the process ends at this stage and a copy of the Screening/Initial Assessment document to be forwarded to Ms T McErlain –Burns.

### **Step 2 –Intermediate Assessment**

If there is a yes answer to any of the questions on the initial screening form and if further evidence or clarification on research is required then complete the Intermediate assessment section, ensure the further/expanded information is added to the policy/Service development document, then forward the completed form to Ms T McErlain -Burns.

### **Step 3 –Full Impact Assessment**

The full assessment builds on the information already identified in step 1 and 2; it also includes consultation with stakeholders who are most likely to be affected by the changes.

To identify the adverse or positive impact of the service development, redesign and policy.

To produce an action plan to identify changes required to ensure issues addressed.

All full impact assessments are to be published in conjunction with the policy on the Trust Internet/intranet and a copy forwarded to the Equality Board c/o PA to Chief Nurse.

### **Classification of a policy/Service development**

All Policy/Service development Documentation should have recorded on the front sheet whether the EQI is:

Positive –Promotes equality, Eliminates unlawfully discrimination, Promotes good relations.

Neutral –Neither promotes or impacts adversely

Negative – Adversely effects equality and Diversity, possibility of unlawful discrimination.

**EQUALITY IMPACT ASSESSMENT FORM**

**INITIAL ASSESSMENT/SCREENING**

An impact assessment is a way of finding out whether an existing or proposed policy affects different groups of people in different ways and whether there is adverse impact on a group.

This form is to be used for new and existing policies and service developments, where a question is not applicable to your assessment, please indicate.

<b>Managers Name</b> <b>Denise Beddow</b>	<b>Directorate</b> <b>Gastroenterology Medicine</b>
<b>Policy Title</b> <b>Percutaneous endoscopic Gastrostomy (PEG) guidelines for insertion and management</b>	
<b>Policy Statement</b> <b>Peg tubes will be inserted in adult patients who require long term artificial nutritional support. This procedure will be done in a safe and timely manner and all patients will receive appropriate aftercare.</b>	
<b>Which groups does the policy benefit</b> <b>All healthcare professionals</b> <b>Adult patients 18 years and over (Up to the age of 18 years old all children are referred to the paediatric nutrition support team at Leeds General Infirmary)</b>	
<b>Related polices that may be affected by changes</b> <b>Antibiotic guidelines for Mid Yorkshire</b>	
<b>Names of staff and public (if applicable) who participated in the assessment, date of assessment</b> <b>Nutrition support team (dietitians, medical, nursing, pharmacy) (25<sup>th</sup> August 2009)</b> <b>Infection control team (31<sup>st</sup> July 2009)</b> <b>Drug information centre (medicines management committee September 2009)</b>	

Indicate Y or N in each Box below in answer to following questions/statements

	AGE	DISABILITY	RACE	RELIGION & BELIEF	GENDER	SEXUAL ORIENTATION
Do different groups have different needs, experiences, issues and priorities in relation to the policy.	NO	Yes	NO	NO	NO	NO
Is there potential for, or evidence that the policy will promote equality of opportunity for all.	NO	NO	NO	NO	NO	NO
Is there potential for, or evidence that, the policy will affect Different population groups differently (including possible discrimination against certain groups)	NO	NO	NO	NO	NO	NO
Is there public concern in the policy area about actual, received or potential discrimination against a particular population or groups	NO	NO	NO	NO	NO	NO
Is there doubt about answers to any of the above questions	NO	NO	NO	NO	NO	NO

If the answer to any of the above is 'yes' an Intermediate assessment in the relevant area(s) is required.

### Intermediate Assessment

Identify extra information/research to clarify whether there is an adverse risk:

A full assessment is not required. Disabilities are taken into account when obtaining patient consent on an individual basis.



<p>Could the impact mean that some people will be excluded, marginalized, or unlawfully discriminated against? Are we unable to achieve equality? Is there justification for adverse impact or discrimination?</p> <p>What Key issues must be addressed to ensure this policy equitable</p>	
<p><b>Consultation</b> Identify stakeholders affected by policy/service development.</p> <p>Identify modifications needed in policy to reduce or eliminate adverse impact</p>	
<p><b>Resource Implications linked to this policy</b></p>	
<p><b>Monitoring Arrangements</b> What monitoring arrangements are required to check desired outcomes</p>	

**Identify the probability of adverse or beneficial effects**

**Risk of adverse effects on equality (tick to indicate one)**

<p>Highly likely to have adverse effect On equality</p>	<p>May possibly have adverse effect</p>	<p>Probably will not have adverse effect</p>
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HIGH RISK	MODERATE RISK	LOW RISK
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**Potential for benefit (tick to indicate one)**

Highly likely to promote equality of Opportunity and good relations	May have the potential to promote equality and good relations	Probably will not promote equality or good relations
High Potential - LOW RISK	Moderate potential –MODERATE RISK	Low Potential –HIGH RISK

REF: Department of Health Single Equality Scheme 2006-09 Appendix 2 Equality Impact assessment tool

<b>Final Conclusion:</b>
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**Names of Staff/Public undertaking assessment**

**Date**

**Managers' name**

**Action Plan**

High Risk –Issues to be addressed in 1 year

Moderate Risk –Issues to be addressed within 2 years

Low risk –Issues to be addressed issues within 3 years

<b>Action(s)</b>	<b>Named Lead</b>	<b>Timescale</b>