

Hywel Dda University Health Board Equality Impact Assessment (EqIA)

Please note:

Equality Impact Assessments (EqIA) are used to support the scrutiny process of procedures / proposals / projects by identifying the impacts of key areas of action before any final decisions or recommendations are made.

It is recognised that certain proposals or decisions will require a wider consideration of potential impacts, particularly those relating to service change or potential major investment. For large scale projects and strategic decisions please consult the Health Board's Equality and Health Impact Assessment Guidance Document and associated forms.

The completed Equality Impact Assessment (EqIA) must be:

- Included as an appendix with the cover report when the strategy, policy, plan, procedure and/or service change is submitted for approval.
- Published on the UHB intranet and internet pages as part of the consultation (if applicable) and once agreed.

For in-house advice and assistance with Assessing for Impact, please contact:-

Email: Inclusion.hdd@wales.nhs.uk

Tel: 01554 899055

Form 1: Overview

1.	What are you equality impact assessing?	Section 17 leave of absence policy
2.	Brief Aims and Description	The policy aims to provide staff with sufficient guidance in order to ensure effective compliance with providing leave to detained patients in accordance with section 17 of the Act and The Code of Practice for Wales 2016. Current policy has review date of September 2021.
3.	Who is involved in undertaking this EqIA?	Ruth Bourke, Mental Health Act Administration Lead and Sarah Roberts, Mental Health Legislation Manager will be working in partnership to lead on the review but will be supported by a number of specialist mental health groups including Mental Health Legislation Scrutiny Group, Medical Staffing Committee and Ward Managers Forum.
4.	Is the Policy related to other policies/areas of work?	Community Treatment Order Policy Section 117 Aftercare Policy
5.	Who will be affected by the strategy / policy / plan / procedure / service? (Consider staff as well as the population that the project / change may affect to different degrees)	Service users, nursing staff, responsible / approved clinicians, mental health act administrators and other professionals working within mental health services. Carers and relatives of patients as well as wider care provisions in the community for patients detained under the mental health act.
6.	What might help/hinder the success of the Policy?	The policy is a useful resource for staff on mental health inpatient wards and within community mental health teams. Some inpatient wards and community mental health teams have a lack of knowledge about the process due to misunderstanding / misinterpretation/ misuse of section 17 leave. Ongoing training of staff will alleviate the above. Training is delivered to all MH areas and upon preceptorship nursing staff as part of their training plan. Cooperation of staff Time constraints <i>Difficulty in obtaining Responsible Clinicians (doctors) availability?</i>

Form 2: Human Rights

Human Rights: The Human Rights Act contains 15 Articles (or rights), all of which NHS organisations have a duty to act compatibly with and to respect, protect and fulfil. The 6 rights that are particularly relevant to healthcare are listed below.

Depending on the Policy you are considering, you may find the examples below helpful in relation to the Articles.

Consider, is the Policy relevant to:	Yes	No
<p>Article 2 : The right to life</p> <p>Example: The protection and promotion of the safety and welfare of patients and staff; issues of patient restraint and control</p>		✓
<p>Article 3 : The right not be tortured or treated in an inhuman or degrading way</p> <p>Example: Issues of dignity and privacy; the protection and promotion of the safety and welfare of patients and staff; the treatment of vulnerable groups or groups that may experience social exclusion, for example, gypsies and travellers; Issues of patient restraint and control</p>		✓
<p>Article 5 : The right to liberty</p> <p>Example: Issues of patient choice, control, empowerment and independence; issues of patient restraint and control</p>	✓	
<p>Article 6 : The right to a fair trial</p> <p>Example: issues of patient choice, control, empowerment and independence</p>	✓	
<p>Article 8 : The right to respect for private and family life, home and correspondence; Issues of patient restraint and control</p> <p>Example: Issues of dignity and privacy; the protection and promotion of the safety and welfare of patients and staff; the treatment of vulnerable groups or groups that may experience social exclusion, for example, gypsies and travellers; the right of a patient or employee to enjoy their family and/or private life</p>	✓	
<p>Article 11 : The right to freedom of thought, conscience and religion</p> <p>Example: The protection and promotion of the safety and welfare of patients and staff; the treatment of vulnerable groups or groups that may experience social exclusion, for example, gypsies and travellers</p>	✓	

Form 3 Gathering of Evidence and Assessment of Potential Impact

How will the strategy, policy, plan, procedure and/or service impact on:-	Positive	Negative	No impact	Potential positive and / or negative impacts Please include unintended consequences, opportunities or gaps. This section should also include evidence to support your view e.g. staff or population data.	Opportunities for improvement / mitigation If not complete by the time the project / decision/ strategy / policy or plan goes live, these should also been included within the action plan.
Age Is it likely to affect older and younger people in different ways or affect one age group and not another?					
Disability Those with a physical disability, learning disability, sensory loss or impairment, mental health conditions, long-term medical conditions such as diabetes					
Gender Reassignment Consider the potential impact on individuals who either: •Have undergone, intend to undergo or are currently undergoing gender reassignment. •Do not intend to undergo medical treatment but wish to live in a different gender from their gender at birth.					
Marriage and Civil Partnership This also covers those who are not married or in a civil partnership.					

<p>Pregnancy and Maternity Maternity covers the period of 26 weeks after having a baby, whether or not they are on Maternity Leave.</p>					
<p>Race/Ethnicity or Nationality People of a different race, nationality, colour, culture or ethnic origin including non-English / Welsh speakers, gypsies/travellers, asylum seekers and migrant workers.</p>					
<p>Religion or Belief (or non-belief) The term 'religion' includes a religious or philosophical belief.</p>					
<p>Sex Consider whether those affected are mostly male or female and where it applies to both equally does it affect one differently to the other?</p>					
<p>Sexual Orientation Whether a person's sexual attraction is towards their own sex, the opposite sex or to both sexes.</p>					
<p>Socio-economic Deprivation Consider those on low income, economically inactive, unemployed or unable to work due to ill-health. Also consider people living in areas known to exhibit poor economic and/or health indicators and individuals</p>					

<p>who are unable to access services and facilities. Food / fuel poverty and personal or household debt should also be considered.</p> <p>For a comprehensive guide to the Socio Economic Duty in Wales and supporting resource please see: https://gov.wales/more-equal-wales-socio-economic-duty</p>					
<p>Welsh Language Please note opportunities for persons to use the Welsh language and treating the Welsh language no less favourably than the English language.</p>					

Form 4: Examine the Information Gathered So Far

1.	Do you have adequate information to make a fully informed decision on any potential impact?	
2.	Should you proceed with the Policy whilst the EqlA is ongoing?	
3.	Does the information collected relate to all protected characteristics?	
4.	What additional information (if any) is required?	
5.	How are you going to collect the additional information needed? State which representative bodies you will be liaising with in order to achieve this (if applicable).	

Form 5: Assessment of Scale of Impact

This section requires you to assign a score to the evidence gathered and potential impact identified above. Once this score has been assigned the Decision column will assist in identifying the areas of highest risk, which will allow appropriate prioritisation of any mitigating action required.

Protected Characteristic	Evidence: Existing Information to suggest some groups affected. (See Scoring Chart A below)	Potential Impact: Nature, profile, scale, cost, numbers affected, significance. Insert one overall score (See Scoring Chart B below)	Decision: Multiply 'evidence' score by 'potential impact' score. (See Scoring Chart C below)
Age			
Disability			
Sex			
Gender Reassignment			
Human Rights			
Marriage and Civil Partnership			
Pregnancy and Maternity			
Race/Ethnicity or Nationality			
Religion or Belief			
Sexual Orientation			
Welsh Language			

Scoring Chart A: Evidence Available	
3	Existing data/research
2	Anecdotal/awareness data only
1	No evidence or suggestion

Scoring Chart B: Potential Impact	
-3	High negative
-2	Medium negative
-1	Low negative
0	No impact
+1	Low positive
+2	Medium positive
+3	High positive

Scoring Chart C: Impact	
-6 to -9	High Impact (H)
-3 to -5	Medium Impact (M)
-1 to -2	Low Impact (L)
0	No Impact (N)
1 to 9	Positive Impact (P)

Form 6 Outcome

You are advised to use the template below to detail the outcome and any actions that are planned following the completion of EqIA. You should include any remedial changes that have been made to reduce or eliminate the effects of potential or actual negative impact, as well as any arrangements to collect data or undertake further research.

Will the Policy be adopted?	
If No please give reasons and any alternative action(s) agreed.	
Have any changes been made to the policy/ plan / proposal / project as a result of conducting this EqIA?	

<p>What monitoring data will be collected around the impact of the plan / policy / procedure once adopted? How will this be collected?</p>	
<p>When will the monitoring data be analysed? Who will be responsible for the analysis and subsequent update of the impact assessment as appropriate?</p>	
<p>Where positive impact has been identified for one or more groups please explain how this will be maximised?</p>	
<p>Where the potential for negative impact on one of more group has been identified please explain what mitigating action has been planned to address this.</p> <p>If negative impact cannot be mitigated and it is proposed that HDUHB move forward with the plan / project / proposal regardless, please provide suitable justification.</p>	

Form 7 Action Plan

Actions (required to address any potential negative impact identified or any gaps in data)	Assigned to	Target Review Date	Completion Date	Comments / Update

EqIA Completed by:	Name	
	Title	
	Team / Division	
	Contact details	
	Date	
EqIA Authorised by:	Name	
	Title	
	Team / Division	
	Contact details	

	Date	
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