APPENDIX A

Form 1: Preparation

Part A must be completed at the beginning of a Policy/function/strategy development or review, and for every such occurrence. (Refer to the Step-by-Step Guide for additional information).

Step '	1 - Preparation							
1.	Title of Policy - what are you equality impact assessing?	Policy for consent to examination or treatment						
2.	Policy Aims and Brief Description - what are its aims? Give a brief description of the Policy (The What, Why and How?)	This policy applies to all health professionals who have regular patient contact and who are employed (or are contracted to work) by Cardiff and Vale University Health Board						
		 The policy aims to: Set out the legal issues that must be complied with when obtaining patient consent inform staff that they must comply with Mental Capacity Act 2005 when a patient's capacity to consent is in doubt Provide staff with appropriate information that will guide them in obtaining valid consent in order to protect patients, staff and the UHB 						
3.	Who Owns/Defines the Policy? - who is responsible for the Policy/work?	Medical Director						

Step	1 ₋ Preparation	
4.	Who is Involved in undertaking this EqIA? - who are the key contributors to the EqIA and what are their roles in the process?	Mental Capacity Act Manager – developing a draft EqIA and ensuring that it is sent, along with the Consent Policy, to the Divisional Quality and Safety Group Chairs for dissemination to their members so that they can consider and comment.
5.	Other Policies - Describe where this Policy/work fits in a wider context. Is it related to any other policies/activities that could be included in this EqIA?	Blood Transfusion Policy 2006 Care Programme Approach Policy 2006 Covert Administration of Medicines Policy 2008 Do Not Attempt Cardiopulmonary Resuscitation Policy 2010 Good Clinical Practice Teaching for Personnel Undertaking Clinical Research [undated] Policy and Procedure for the Safe and Effective Use of Bedrails 2008 Research Governance Policy 2007 Restraint in the Care Management of Patients who Lack Mental Capacity to Consent to Treatment and Care 2011 Single Nurse Administration of Drugs in Hospital Policy 2004 Production of Written Information Policy 2008
6.	Stakeholders - Who is involved with or affected by this Policy?	All UHB staff (and those who are contracted to work in the UHB or who hold honorary contracts) who have regular patient contact.

Step	1 - Preparation	
7.	What factors may contribute to the outcomes of the Policy? What factors may detract from the outcomes? These could be internal or external factors.	Support will be provided to the Directorates regarding the implementation of this policy by the Mental Capacity Act Manager. The availability of staff time to implement this policy may detract from the outcomes. Staff attitudes to the importance of capacity and consent issues may also have an impact. Staff compliance with undertaking training on capacity and consent issues will have an impact.

Form 2: Evidence Gathering

Equality Strand	Evidence Gathered	Doe	s the							ng wit ropria	h regard to this te.
Race	An internet search of the topic "consent to treatment policy and equality" was conducted on 15/8/2011 (see attached list). No documented evidence was found from this search to suggest that there are any statements, conditions, rules or requirements of the consent policy which could potentially exclude or, where applied, could cause an adverse impact against any group of individuals in respect of race. All of the Consent Policy EqIAs that were scrutinised identified that the effect of the policy on the equality strands was either "no impact" or "positive impact". An analysis chart of the identified policies has been kept. There is no relevant internal data or information from the Concerns Team nor from Patient Experience services. The policy directs staff to provide information in other languages, including Welsh and to make use of interpreters when required.	Eliminating Discrimination and Eliminating Harassment		Promoting Equality of Opportunity		Promoting Good Relations and Positive Attitudes		Encouraging participation in Public Life	X	Take account of difference even if it involves treating individuals more favourably*	
Disability	An internet search of the topic "consent to treatment policy and equality" was conducted on 15/8/2011 (see attached list).	nent	1		√ 	Ö	V		X	some	√
	No documented evidence was found from this										

	search to suggest that there are any statements, conditions, rules or requirements of the consent policy which could potentially exclude or, where applied, could cause an adverse impact against any group of individuals in respect of disability. All of the Consent Policy EqlAs that were scrutinised identified that the effect of the policy on the equality strands was either "no impact" or "positive impact". An analysis chart of the identified policies has been kept. There is no relevant internal data or information from the Concerns Team nor from Patient Experience services. The policy reflects the legal requirement to take into account the needs of disabled people with regard to consent – eg. providing information in different formats						
Gender	An internet search of the topic "consent to treatment policy and equality" was conducted on 15/8/2011 (see attached list). No documented evidence was found from this search to suggest that there are any statements, conditions, rules or requirements of the consent policy which could potentially exclude or, where applied, could cause an adverse impact against any group of individuals in respect of gender. All of the Consent Policy EqIAs that were scrutinised identified that the effect of the policy on	√ ·	V	√	X		

	the equality strands was either "no impact" or "positive impact". An analysis chart of the identified policies has been kept. There is no relevant internal data or information from the Concerns Team nor from Patient Experience services. The legal position regarding woman who are pregnant and their right to refuse treatment even if it puts the unborn child at risk is included in the policy.						
Sexual Orientation	An internet search of the topic "consent to treatment policy and equality" was conducted on 15/8/2011 (see attached list). No documented evidence was found from this search to suggest that there are any statements, conditions, rules or requirements of the consent policy which could potentially exclude or, where applied, could cause an adverse impact against any group of individuals in respect of sexual orientation. All of the Consent Policy EqIAs that were scrutinised identified that the effect of the policy on the equality strands was either "no impact" or "positive impact". An analysis chart of the identified policies has been kept. There is no relevant internal data or information from the Concerns Team nor from Patient Experience services.	~	~	√	x		
Age	An internet search of the topic "consent to treatment	1	$\sqrt{}$		X		

	policy and equality" was conducted on 15/8/2011 (see attached list). No documented evidence was found from this search to suggest that there are any statements, conditions, rules or requirements of the consent policy which could potentially exclude or, where applied, could cause an adverse impact against any group of individuals in respect of age. All of the Consent Policy EqIAs that were scrutinised identified that the effect of the policy on the equality strands was either "no impact" or "positive impact". An analysis chart of the identified policies has been kept. There is no relevant internal data or information from the Concerns Team nor from Patient Experience services. The policy reflects the fact that, legally, children and adults can be treated differently with regard to consent. However, the policy does not treat children and adults differently in this policy, beyond what the law requires.						
Religion or Belief	An internet search of the topic "consent to treatment policy and equality" was conducted on 15/8/2011 (see attached list). No documented evidence was found from this search to suggest that there are any statements, conditions, rules or requirements of the consent policy which could potentially exclude or, where	1	√	V	X		

	applied, could cause an adverse impact against any group of individuals in respect of religion or belief. All of the Consent Policy EqIAs that were scrutinised identified that the effect of the policy on the equality strands was either "no impact" or "positive impact". An analysis chart of the identified policies has been kept. There is no relevant internal data or information from the Concerns Team nor from Patient Experience services. The policy directs staff to be mindful of religion or							
	belief when taking consent.	,		-			_	
Welsh Language	An internet search of the topic "consent to treatment policy and equality" was conducted on 15/8/2011. It was not possible to find any Welsh LHB EqIAs for Consent Policies either through the internet or by searching the Welsh LHBs' intranet sites. No documented evidence was found from this search to suggest that there are any statements, conditions, rules or requirements of the consent policy which could potentially exclude or, where applied, could cause an adverse impact against any group of individuals in respect of Welsh language. All of the Consent Policy EqIAs that were scrutinised identified that the effect of the policy on the equality strands was either "no impact" or "positive impact". An analysis chart of the identified policies has been kept.	V	√		√	X		

	There is no relevant internal data or information from the Concerns Team nor from Patient Experience services. The policy reflects the law on the Welsh language. If a request was made for the policy to be available in Welsh or another language, then the request would be met.							
liberty; to a fai	human right to: life; not to be tortured or treated in a r trial; not to be punished without legal authority; to be; to freedom of thought, conscience and religion; and to not be discriminated against in relation to ar	respe to free	ct fo	r private of expre	and fami ssion and	ly life, hom d of assem	e and bly; to i	marry and
Human Rights	The policy complies with the Human Rights Act, partic subjected to treatment that is inhuman or degrading (A Right to respect for freedom of thought, conscience ar policy also takes into account the requirements of the	Article 3 nd relig	3); Riq ion (<i>P</i>	ght to resp Article 9);	pect for pi Right to fi	ivate and fa	amily life	e (Article 8);

^{*} This column relates only to Disability due to the specific requirement in the DDA 2005 to treat disabled people more favourably to achieve equal outcomes. This is not applicable to the other equality strands.

Form 3: Assessment of Relevance and Priority

Equality Strand	Evidence: Existing evidence to suggest some groups affected. Gathered from Step 2. (See Scoring Chart A)	Potential Impact: Nature, profile, scale, cost, numbers affected, significance. Insert one overall score (See Scoring Chart B)	Decision: Multiply 'evidence' score by 'potential impact' score. (See Scoring Chart C)
Race	3	+1	3
Disability	3	+1	3
Gender	3	+1	3
Sexual Orientation	3	0	0
Age	3	+1	3
Religion or Belief	3	+1	3
Welsh Language	3	+1	3
Human Rights	2	+1	2

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

Scoring Chart C: Impact Decision

-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)

	+2	Medium positive		
	+3	High positive		

FORM 4: (Part A) Outcome Report

Policy Title:	Policy for consent to examination or treatment
Organisation:	Cardiff and Vale University Local Health Board
Name:	Julia Barrell
Title:	Mental Capacity Act Manager
Department:	Patient Safety Team
Summary of Assessment:	The consent policy is underpinned by the Welsh Assembly Government's Reference Guide for Consent to Examination or Treatment (WHC [2008] 010, February 2008) and Good Practice in Consent Implementation Guide: Consent to Examination or Treatment (WHC [2008] 36, May 2008). The policy has been written to incorporate this national guidance into UHB policy and to ensure staff have a clear understanding of this National Guidance. The policy reflects the Welsh Government's commitment to promoting equality of opportunity for all, whatever their race, language, religion or other belief system, disability, age gender and sexual orientation, to ensure that every citizen has the opportunity to make informed choices regarding their health care in Wales, and that compliance with equality legislation is met. The Government of Wales Act 2006, Section 77, is a statutory duty ensuring that equality of
	opportunity is embedded within its work.
	This Equality Impact Assessment has found no evidence of an adverse impact on the groups of people that fall into the equality strands. The evidence identified suggests that the effect of the policy on the equality strands was either "positive impact" or "no impact". The policy does however reflect the different approaches to obtaining consent that are covered by legislation or case law.
Decision to Proceed	Yes /No
to Part B Equality Impact Assessment:	Please record reason(s) for decision
	There is no evidence that the consent policy will adversely impact on the groups of people that fall into the equality strands.

Action Plan

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

	Action(s) proposed or taken	Reasons for action(s)	Who will benefit?	Who is responsible for this action(s)?	Timescale
What changes have been made as a result of the EqIA?	N/A	N/A	N/A	N/A	N/A
2. Where a Policy may have differential impact on certain groups, state what arrangements are in place or are proposed to mitigate these impacts?	N/A	N/A	N/A	N/A	N/A

3. Justification: For when a policy may have adverse impact on certain groups, but there is good reason not to mitigate.	N/A	N/A	N/A	N/A	N/A
4. Describe any mitigating actions taken?	N/A	N/A	N/A	N/A	N/A
5. Provide details of any actions planned or taken to promote equality.	As stated earlier the policy directs staff to provide information in other languages and to make use of interpreters when required.	This is so that individual patient need can be met.	Patients benefit because they will be able to communicate in the language of their choice and for staff it means they will be clear that the patient understands the consent issues	Directorates are responsible for accessing and paying for interpreting/transla tion services, as required	As required

As stated above the policy reflects the fact that, legally, children and adults can be treated differently with regard to consent. However, the policy does not treat children and adults differently, beyond what the law requires.	This is so that individual patient need can be met and the law complied with.	Taking account of age means that the UHB and its staff will be complying with the law regarding consent	Staff must take account of the patient's age and competence	As appropriate to the individual patient.
---	---	---	---	---

Date:	21 st September 2011					
Monitoring	Adherence to this Policy will be monitored by a variety of					
Arrangements:	processes, including structured and ad-hoc case note					
	review and be considered as part of the UHB and					
	Division/Directorate Clinical Audit plan.					
Review Date:						
	2014					
Signature of all						
Parties:	Julia Barrell					

CONSENT TO TREATMENT OR EXAMINATION POLICY EqIA

Evidence gathered from other organisations – 15th August 2011

PI = positive impact NI = negative impact NO = no impact

Organisation	Race	Disability	Gender	Sexual orientation	Age	Religion or belief	Welsh language	Human rights
Plymouth Hospitals NHS	PI	PI	PI	PI	PI	PI	-	-
Trust								
Tameside Hospital NHS	NO	NO	NO	NO	NO	NO	-	-
Foundation Trust								
University Hospital of South	NO	NO	NO	NO	NO	NO	-	-
Manchester NHS								
Foundation Trust								
Surrey NHS	NO	NO	NO	NO	NO	NO	_	-
NHS Eastern and Coastal	NO	NO	PI	PI	NO	PI	-	NO
Kent Community Services								
Nottingham University	PI	PI	NO	NO	PI	PI	-	NO
Hospitals NHS Trust								
Guy's and St Thomas' NHS	PI	PI	PI	PI	PI	PI	-	-
Foundation Trust								
Cheshire and Wirral	NO	NO	NO	NO	NO	NO	-	-
Partnership NHS								
Foundation Trust								
Heatherwood and Wexham	PI	PI	NO	PI	PI	NO	-	-
Park Hospitals NHS								

Foundation Trust								
Royal Orthopaedic Hospital NHS Foundation Trust	NO	NO	NO	NO	NO	NO	-	-
Newcastle PCT	Policy	And	EquIA	Pre-date		MCA		
Northern Lincolnshire and Goole Hospitals NHS Foundation Trust	No	EquIA						
North East London NHS Foundation Trust	For	patients	detained	under		МНА	1983	only
NHS Barking and Dagenham	NO	NO	NO	NO	NO	NO	-	-

NOTES

- 1) The above organisations were identified from an internet search that took place on 15/08/11 on the topic of "Consent to treatment policy and equality"
- 2) All of the Consent Policy EqlAs identified that the effect of the policy on the equality strands was either "no impact" or "positive impact".
- 3) A search on the same date did not reveal any Welsh NHS bodies' Consent Policy EqIAs.

Julia Barrell Mental Capacity Act Manager