

Equality Impact Assessment - Standard Assessment Template

Section A: Assessment

Name of Policy Cardiff and Vale University Health Board: Guidance for Care of the Deceased Following an Expected Death

Keithley Wilkinson - Equality Manager keithley.wilkinson@wales.nhs.uk 02920 742667

Tracey Skyrme Senior Nurse Bereavement Service 02920744949 tracey.skyrme@wales.nhs.uk

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1. The Policy

Is this a new or existing policy? Existing policy

What is the purpose of the policy? To provide local guidance for all health care professionals of varying disciplines to ensure consistent care for the deceased at Cardiff and Vale University Health Board.

How do the aims of the policy fit in with corporate priorities? i.e. Corporate Plan

It meets the organisational mission of; caring for people, keeping them well, Fundamentals of care, Care Quality commission 2014- duty of candour, safe, effective, compassionate care. WG delivery plans- Achieving Excellence. Healthcare standards framework 2Safe Care, Effective care, Dignified care , Individual care, Equality, diversity and human rights.

Who will benefit from the policy?

All-Patients, carers, family members and staff

What outcomes are wanted from this policy?

To ensure the deceased are treated with dignity, respect, care and compassion at all times.

Where possible it is essential that specific requests and wishes are facilitated; ensuring that all the equality strands and the law are adhered to. To provide staff with procedural guidance facilitating a standardised approach.

To ensure staff have a good knowledge base and an understanding of the process and rationale involved.

To improve knowledge and therefore competence and confidence.

Are there any factors that might prevent outcomes being achieved? (e.g. Training/practice/culture/human or financial resources)

Lack of awareness and misunderstanding of the guidance.

Patients and/or relatives may require translation services.

Cost implications for the UHB as this information should be provided in a bilingual format.

Training issues for the UHB as currently there is no formal teaching programme for staff of all disciplines.

Education is regularly provided for HCSW but not for registered staff, this is provided but on an ad hoc basis.

2. Data Collection

What qualitative data do you have about the policy relating to equalities groups (e.g. monitoring data on proportions of service users compared to proportions in the population)?

Equality strand

An internet search was conducted on between 4th May and 20th June 2016 which included using the following search terms as well as inserting the particular protected characteristic where appropriate. The information provided below is not an exhaustive list but does represent the information gathered.

https://www.google.co.uk/search?hl=en-GB&source=hp&q=Guidance+for+care+of+the+deceased&gbv=2&oq=Guidance+for+care+of+the+deceased+expected+death&gs_l=heirloom-hp.12...13971.25580.0.26580.50.19.0.31.4.0.182.1843.12j7.19.0.msedr...0...1ac.1.34.heirloom-hp..28.22.1843.LwZVley3xkc

<https://www.ashfordstpeters.info/patient-care/876-bereavement-office-operational-policy>
accessed 12.27 04 05 2016

<http://www.nht.nhs.uk/documentHandler.cfm?dld=6332&pflag=docm93jjm4n6332>.
accessed 12.34 04 05 2016

http://www.nhs.uk/media/2426968/care_after_death_guidance.pdf accessed 12.48 04 05 2016

<http://www.northamptongeneral.nhs.uk/WorkforUs/Downloads/EQIAs/EQIAClinicalGuidelineforPrinciplesofPracticeforLastOfficesChild.pdf> accessed 13.13 04 05 16 only EqIA

<http://www.nhsaaa.net/media/168073/sect19feb13.pdf> accessed 13.28 04 05 16

<http://www.southernhealth.nhs.uk/EasysiteWeb/getresource.axd?AssetID=34128&type=full&servicetype=Attachment> accessed 11.00 23.05.16

http://www.nhsiq.nhs.uk/media/2426968/care_after_death_guidance.pdf accessed 11.14 23.05.16

http://www.porthosp.nhs.uk/Downloads/Policies-And-Guidelines/Clinical-Policies/Adult_patient_death_mgt_policy.doc accessed 11.27 23.05.16

<http://www.northamptongeneral.nhs.uk/WorkforUs/Downloads/EQIAs/EQIASupportingBereavedFamilies.pdf> accessed 11.52 23.05.16

http://publications.1fife.org.uk/weborgs/nhs/uploadfiles/publications/c64_COD-01EQIAForm.doc accessed 11.49 23.05.16

http://www.southerntrust.hscni.net/pdf/DeathOfA_PatientOrClient.pdf accessed 16.00 25.05.16

<http://www.cardiffandvaleuhb.wales.nhs.uk/opendoc/249862> accessed 16.22 26.05.16

Welsh Government Strategic Equality Plans and Objectives 2016-2020

<http://gov.wales/docs/dsjlg/publications/equality/160310-equality-objectives-2016-20-en-v1.pdf> Accessed 15.56 27.05.16

Equality Act 2010

<http://gov.wales/topics/people-and-communities/equality-diversity/?lang=en> accessed 15.59 27 05 16

<https://www.nmc.org.uk/globalassets/sitedocuments/eandd/equality-objectives-action-plan-2015-2016.pdf> Accessed 11.00 31.05.16

https://www.gov.uk/government/uploads/system/uploads/attachment_data/file/226459/E_D_Strategy_report_v3.PDF Accessed 10.30 9.06.16

<https://www.nmc.org.uk/about-us/our-equality-and-diversity-commitments/> Accessed 11.30 9.06.16

Race

The following information was reviewed and there was no specific impact noted;

National Services Scotland

<http://www.nipcm.hps.scot.nhs.uk/documents/tbp-infection-prevention-and-control-during-care-of-the-deceased/> Accessed 12.30 9.05.16

Ayrshire and Arran

<http://www.nhsaaa.net/media/308345/lastonov14.pdf> Accessed 15.32 15.06.2016

Gloucestershire NHS Trust

http://www.glospct.nhs.uk/pdf/equality/impactassessments/equalityimpact_lastoffices_0208.pdf
accessed at 16.53 on 27 02 12

NHS Fife

http://www.nhsfife.org/weborgs/nhs/uploadfiles/publications/c64_ICManualch8LastofficesJun14Ext.pdf
Accessed 15.44 15.06.2016

Northamptonshire Healthcare

<http://www.nht.nhs.uk/documentHandler.cfm?dld=6332&pflag=docm93jjm4n6332> Accessed 15.50
15.06.2016

Yeovil District Hospital

<http://www.yeovilhospital.co.uk/wp-content/uploads/2016/01/Care-of-the-Deceased-Policy.pdf>
Accessed 12.00 16.06.16

Avon and Wiltshire Mental Health Partnership Trust

<http://www.awp.nhs.uk/handlers/downloads.ashx?id=13545> accessed at 10.58 on 16.06.16

Ashford and St Peters Hospitals

<https://www.ashfordstpeters.info/images/policies/PAT12.pdf> accessed at 16.50 on 16 06 16

Manchester Mental Health and Social Care Trust

<http://www.mhsc.nhs.uk/media/80376/policy%20on%20care%20of%20the%20deceased%20patient%20and%20standard%20operating%20procedure.pdf> Accessed 15.00 16 06 16

Greater Glasgow and Clyde NHS

http://www.nhsggc.org.uk/media/220430/EQIA_Schools_bereavement_policy.pdf Accessed 12.50 20 06 16

<http://www.mermaidsuk.org.uk>

This organisation provides support and information for children and teenagers who are trying to cope with gender identity issues and for their families and carers.

Religion

<http://www.nursingtimes.net/nursing-with-dignity-part-8-islam/206284.article> - accessed 20 July 2016

It is recognised that when a person dies, the following rituals should be observed:

- Close the eyes and mouth;
- Straighten the body and limbs;
- Turn the head towards the right shoulder, facing Mecca;
- The body should not be washed but covered completely with a plain sheet;
- A complete Ghusal should be performed by the family as soon as possible;

- Some Muslims may request that non-Muslims do not touch the body. If this is the case, use disposable gloves.

Gender- Reassignment

<http://www.legislation.gov.uk/ukpga/2004/7/contents> accessed 20 July 2016

It has been noted that there could potentially be issues for transgender deaths as noted within the Gender Recognition Act (2004). The guidance does highlight the need for all staff to ensure the dignity and respect of the deceased.

What quantitative data do you have on the different groups¹⁶ (e.g. findings from discussion groups, information from comparator authorities)?

Please indicate the source of the data gathered? (e.g. Concerns/Service/Department/Team/Other)

What gaps in data have you identified? (Please put actions to address this in your action plan?)

3. Impact

Please answer the following

Consider the information gathered in section 2 above of this assessment form, comparing monitoring information with census data as appropriate (see www.ons.gov.uk Office National Statistics website) and considering any other earlier research or consultation. You should also look at the guidance in Appendix 1 with regard to the protected characteristics **stating the impact and giving the key reasons for your decision.**

Human rights

These guidelines support all the principles of the Human Rights Act but particularly the articles concerned with; not to be tortured or treated in an inhumane or degrading way; to respect for private and family life, home and correspondence; to freedom of thought, conscience and religion: to freedom of expression and to not be discriminated against in relation to any of the rights contained in the European Convention.

Do you think that the policy impacts on people because of their age? (This includes children and young people up to 18 and older people) No

Do you think that the policy impacts on people because of their caring responsibilities? Inherent in this is that there is a recognised impact that the guidance will have on those with this protected characteristic. The proactive nature and intent of the guidance would indicate a positive impact as staff would be responsive to the needs of carers.

Do you think that the policy impacts on people because of their disability? (This includes Visual impairment, hearing impairment, physically disabled, Learning disability, some mental health issues, HIV positive, multiple sclerosis, cancer, diabetes and epilepsy.) There is the potential for there to be a negative impact on people with learning difficulties & people with a compromised level of understanding for example. All efforts will be made to recognise people with disabilities and all steps taken to minimise any negative impact on the individual and their family. The UHB recognises the importance of providing skilled and sensitive communication, including the communication needs of relatives and carers as well as the cultural and spiritual elements of care and giving relevant information at the right time and in the right way, such as with the use of communication aids as noted in the guidance.

Do you think that the policy impacts on people because of Gender reassignment? (This includes Trans transgender and transvestites) There does not appear to be any impact on people with this protected characteristic in respect for adults.

Do you think that the policy impacts on people because of their being married or in a civil partnership?

There does not appear to be any impact on people with this protected characteristic. The guidance aims to ensure that all couples are treated with the same dignity and respect whether they are in a same sex or heterosexual relationship and thus implicit, whether they are married or in a civil partnership.

Sometimes within a same sex relationship, when one partner dies and the person left is the next of kin either by common law or Civil partnership or same sex marriage, on some occasions the deceased could be estranged from their family or parents who at this point could try to exclude the living partner, this is not right and unacceptable.

Do you think that the policy impacts on people because of their being pregnant or just having had a baby?

We would be respectful of patients with this protected characteristic in meeting their wishes and the wishes of their carer/families.

Do you think that the policy impacts on people because of their race? (This includes colour, nationality and citizenship or ethnic or national origin such as Gypsy and Traveller Communities.) No It was noted that there might be a positive impact in the following information in accommodating differing cultural needs; If required Cardiff and Vale UHB can provide interpreters through face to face contact and also via the telephone.

Do you think that the policy impacts on people because of their religion, belief or non-belief? (Religious groups cover a wide range of groupings the most of which are Buddhist, Christians, Hindus, Jews, Muslims, and Sikhs. Consider these categories individually and collectively when considering impacts) Yes
Religion or Belief

There is access to Chaplains of varying faiths to provide spiritual support to patients, carers and staff who have a faith and those of no faith. This service is available 24 hours a day via an on call service out of hours. There are also Multi Faith Customs Charts and a Ward Guide for the Religious Care for Patients accessible to Health Board staff.

There are certain cultures that require an expedited burial often within twenty four hours; this can include deceased from both Muslim and Jewish Communities. Guidance is provided to assist this process but there are certain situations where this might not be possible, an example being if it is necessary to involve HM Coroner. If for instance, a death has occurred within twenty four hours of admission to hospital, regulation and law could prevent a short notice burial occurring as referral the HM Coroner would be necessary. Unfortunately, this situation is outside the remit of the Health Board.

Do you think that the policy impacts on men and woman in different ways? There was no specific information or mention in search as to gender issues related to this type of guidance though we know that for some cultures it is important that people are care for by people of the same gender and we would meet this where we could.

Do you think that the policy impacts on people because of their sexual orientation? (This includes Gay men, heterosexuals, lesbians and bi-sexuals) Yes. There does not appear to be any impact on people with this protected characteristic. The guidance aims to ensure that all couples are treated with the same dignity and respect whether they are in a same sex or heterosexual relationship.

Do you think that the policy impacts on people because of their Welsh language? Yes

Welsh Language (Wales) Measure 2011

http://www.legislation.gov.uk/mwa/2011/1/pdfs/mwa_20110001_en.pdf accessed at 14.28 14 07 16

This procedure covers many aspects of caring for the deceased and the care of the bereaved that follows the death. Information providing help and advice following the death is provided bilingually.

Cardiff and Vale University Health Board Welsh Language Scheme suggests that:

The UHB will ensure that members of the public who wish to have dealings with us are able and welcome to do so in Welsh or English.

Also, if requested the Registrar of Births, Deaths and Marriages are able to provide a service in Welsh for the bereaved that require it.

Following the death, if families wish to discuss information through the medium of Welsh then a relevant member of staff or an interpreter could be arranged. Religious and cultural needs will also be considered: many patients, the deceased and their relatives may have specific Welsh language religious needs.

4. Summary.

Which equality groups have positive or negative impacts been identified for (i.e. differential impact).

The aim of the policy is to respect the wishes of the deceased and for nearly all the protected characteristics the impact would be positive. We do however note that potentially there could be a medium negative impact upon the religion or belief strand for bereaved relatives if for example they were unable to bury or cremate the

deceased within a short period of time. Where appropriate we have taken or will make plans for the necessary actions required to minimise any stated impact to ensure that we meet our responsibilities under the equalities and human rights legislation.

Is the policy directly or indirectly discriminatory under the equalities legislation? No

If the policy is indirectly discriminatory can it be justified under the relevant legislation? No

Appendix 3

Cardiff and Vale University Health Board Action Plan

Section B: Action

5. Please complete your action plan below. Issues you are likely to need to address include

- What **consultation** needs to take place with equality groups (bearing in mind any relevant consultation already done and any planned corporate consultation activities) Insert Co Chair, Rainbow LGBT FFlag Network & Welsh Language Officer. Intranet/internet for comments, Spiritual Care group
- What **monitoring**/evaluation will be required to further assess the impact of any changes on equality target groups? I will monitor the impact of any changes on equality target groups.

Equalities Impact Assessment Implementation Action Plan

Issue to be addressed	Responsible Officer	Action Required	Timescale for completion	Action Taken	Comments

6. Report, publication and Review

Please record details of the report or file note which records the outcome of the EQIA together with any actions / recommendations being pursued (date, type of report etc)

Bereavement Strategy group, Intranet

Please record details of where and when EQIA results will be published

Once the policy has been approved the documentation will be placed on the intranet and internet

Please record when the EQIA will be subject to review.

The EQIA and Policy will be reviewed three years after approval unless changes to terms and conditions, legislation or best practice determine that an earlier review is required.

Name of person completing Tracey Skyrme

Signed _____

Date: 7th September 2016

Name of Senior Manager Authorising Assessment and Action Plan for publication _____

Signed: _____

Date: _____

Appendix 4
Format for publication of EQIA results
Executive Summary

This should provide a summary of the results of the EQIA, in particular focusing on any decisions that have been made.

Background

- A description of the aims of the policy
- The context in which the policy operates
- Who was involved in the EQIA?

The scope of the EQIA

- A brief account of how you assessed the likely effects of the policy
- The data sources and information used
- The consultation that was carried out (who with, how and a summary of the responses).

Key findings

- Describe the results of the assessment (based on the information that is included in the EQIA template).
- Identify any positive, negative or neutral impact for any equalities groups.

Recommendations

- Provide a summary of the overall conclusions
- State any recommended changes to the proposed policy as a result of the EQIA and plans for implementation/monitoring/review.

Appendix 4
Format for publication of EQIA results
Executive Summary

The responsibility for implementing the scheme falls to all employees and UHB Board members, volunteers, agents or contractors delivering services or undertaking work on behalf of the UHB.

After considering all the evidence indicated it is clear that the policy will have an overwhelming positive impact. This is the intention not

only of the equality, Welsh language and human rights legislation but also of this policy, which adheres to that legislation.

Background

Cardiff and Vale UHB is committed to ensuring that, as far as is reasonably practicable, the way we provide services to the public and the way we treat our staff, patients and others reflects their individual needs and does not discriminate, harass or victimise individuals or groups. These principles run throughout this specific policy.

The policy operates within the principles of the 2010 Equality Act, Human Rights Act 1998 and the Welsh Language Act 1993 and Welsh Language (Wales) Measure 2011 as well as other related UHB policies such as flexible working and Dignity at Work policies.

Involvement in the review included staff representatives as well as the Cardiff and Vale University Health Boards' Rainbow LGBT FFlag Network and through the Welsh Language Officer. It was also put out for consultation on the UHB intranet.

The scope of the EQIA

The likely affects were assessed through looking at statistical, research, previous and other related EQIA policies and through consultation through invested stakeholders. The data included workforce profile data broken down by protected characteristics which assisted with the underpinning inclusive and comparative approach. It was felt that the comments were received were valid, and necessary for the UHB us to demonstrate its commitment to equality, diversity and human rights as well as demonstrating that we would listen and act upon the views of others.

Key findings

There was overwhelming evidence and support for the need to have such a policy to demonstrate UHB commitment to the equality, diversity and human rights agenda. It was clear that the impact would overall be positive, particularly as the policy recognises that sometimes people need to be treated differently so as to achieve an inclusive workplace.

Some of the wording of the policy was changed and inclusive mention made of specific issues as a result of the consultation.

Recommendations

There were no significant changes to the proposed policy other than updating the terminology used to ensure more effective communication and clarity.

It is recommended that this policy is reviewed in line with the current guidelines of the UHB, unless there is a change in relevant legislation in which case, the policy should be reviewed within 6 months of any new legislation and changes made accordingly. The policy will be monitored and reviewed by the Equality, Diversity & Human Rights Sub Committee.

It will be issued via the intranet, administrator email and to Clinical Boards/Corporate areas management teams and lead trade union representatives.