

Equality Impact Assessment

Section A: Assessment	
Name of Policy	Policies, Procedures and Written Control Documents Policy
Person/persons conducting this assessment with Contact Details	Melanie Westlake, Head of Corporate Risk and Governance
Date	13 June 2014

1. The Policy
<p>Is this a new or existing policy?</p> <p>Existing – this is version 4 of the policy. Version 1 was approved in September 2009.</p>
<p>What is the purpose of the policy?</p> <p>This policy and the supporting Policies, Procedures and Written Control Documents Procedure will provide a structure for the adoption of externally developed documents and for the internal development, approval and management of all policies and written control documents within the UHB.</p>
<p>How do the aims of the policy fit in with corporate priorities? i.e. Corporate Plan</p> <p>It sets out the commitment of the Board to make sure that there are documents which capture how the Health Board will deliver its aims, objectives, responsibilities and legal requirements transparently and consistently.</p> <p>Policies describe the Health Board's guiding principles that underpin our decisions, behaviours and actions for everything we do.</p> <p>Procedures and other written control documents translate these principles into more detailed instructions or guidance including individual responsibilities</p> <p>This Policy is linked with the following documents:</p> <ul style="list-style-type: none"> • Policies, Procedures and Other Written Control Documents Procedure • Records Management Policy • Records Retention and Destruction Protocol • Safety Notices and Important Documents Policy • Producing Written Information for Patients Guidance

Who will benefit from the policy?

This policy will benefit all staff, patients, visitors and stakeholders by setting out the commitment of the UHB to high standards of policy development.

What outcomes are wanted from this policy?

Achieving the objectives of this policy will enable consistency in the format, compilation and dissemination of all written control documents, ensuring that these are:

- Developed and reviewed when required;
- Subject to Equality Impact Assessments and Health Impact Assessments where required;
- Recorded, stored and archived in accordance with the UHB Records Management Retention and Destruction Protocol.
- Appropriately consulted on;
- Considered and approved by the appropriate forum/senior officer (with delegated powers);
- Shared with staff and stakeholders where required;
- Supported by appropriate learning, education and development where required; and,
- Available to the public, in line with Freedom of Information Act requirements and our Publication Scheme.

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

Some staff may require some support in the development of documents. This is provided by the Head of Corporate Risk and Governance.

There is not always an appreciation of the importance of written control documents. This will be re-enforced through the governance arrangements within the Clinical Boards and Directorates.

The Head of Corporate Risk and Governance is also available to provide support as required.

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)?

There was no specific equalities data available.

What quantitative data do you have on the different groups (e.g. findings from

discussion groups, information from comparator authorities)?

Data was collected relating to the ethnicity and disability of our staff.

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

Reference was made to the Equality Impact Assessment undertaken for the Recruitment and Selection Policy for which data had been gathered from the workforce profile of the Cardiff and Vale UHB and information was obtained from NHS Jobs.

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

Not applicable.

The following documents were referenced when undertaking this Equality Impact Assessment.

A search of the internet was undertaken on Monday 12th May 2014 using a number of different terms and all including the words "equality impact assessment" The search provided the following information.

a) North East London NHS Foundation Trust, 2011, *Policy for the Drafting and Implementation of Procedural Documents and Equality Impact Assessment*
http://www.nelft.nhs.uk/documentbank/Policy_on_Policies_v001_200812_Final_with_addendum.pdf

This Equality Impact Assessment found that there was an impact on service users whose first language was not English, and want to access clinical policies. Like the UHB their documents are written and published in English and are not routinely translated or written in a language that they understand.

They also highlighted the fact that documents are not routinely produced in Braille or easy read versions.

In response their final document made specific reference to the need for staff members to make sure that patients can access information in the medium required or understand the content.

b) Metropolitan Police Service, 2011, *The Management of Policy Development in the Metropolitan Police Service and Equality Impact Assessment*
http://www.met.police.uk/foi/c_policies_and_procedures.htm

This Equality Impact Assessment found that, by its very nature the policy impacted on all groups, communities and individuals. The assessment identified that the

impact would be addressed for individual policies and procedures through the completion of Equality Impact Assessments for the specific policy area.

c) Cumbria Partnership NHS Foundation Trust, January 2013, *Document Development Policy Equality Impact Assessment*
<http://www.cumbriapartnership.nhs.uk/uploads/Equality%20and%20Diversity/EIAs/EIA%20Policies/2013/Corporate/EIA%20-%20Document%20Development%20Policy.pdf>

This Equality Impact Assessment found the policy to be of low relevance across the range of protected characteristics. It concluded that as the document development policy only provided guidance on the development of policies within the Trust it did not directly impact any of the protected characteristics listed. However it is noted that the policy made reference to the equality impact assessment, and the need for all staff to complete one when developing a policy document.

d) Cardiff and Vale University Health Board, November 2013, *Recruitment and Selection Policy Equality Impact Assessment*,
<http://www.cardiffandvaleuhb.wales.nhs.uk/opendoc/238805>

This Equality Impact Assessment was used to inform the content of this Equality Impact Assessment. Particular reference was made to the race and disability characteristics.

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.**

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 – the policy does not have a direct impact on people because of their age as it should not affect their ability to read and understand the policy.

Do you think that the policy impacts on people because of their caring responsibilities?
No – the policy does not have a direct impact on people because of their caring responsibilities. It is an administrative document which does not impact on the individual working arrangements for staff.

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.)

Yes

Documents are not automatically published in braille or languages other than English. The primary source of circulation is via the internet or intranet. Software which will read the policy for the reader is now very common therefore documents should generally be accessible to those with a visual impairment.

The documents may also not be easily understood by those who have difficulty deciphering or reading the written word e.g. dyslexia.

Do you think that the policy impacts on people because of Gender reassignment? (This includes Trans transgender and transvestites)

No – the policy does not have a direct impact on people because of gender reassignment. It is an administrative document which does not impact on the individual working arrangements for staff.

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

No – the policy does not have a direct impact on people because of their being married or in a civil partnership. It is an administrative document which does not impact on the individual working arrangements for staff.

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

No – the policy does not have a direct impact on people because of their being pregnant or just having had a baby. It is an administrative document which does not impact on the individual working arrangements for staff.

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.)

Yes

Whilst there was no data available regarding the first language of our staff information shows that 78% of our current workforce is classified as white, meaning that 22% are either not white or they have not indicated their ethnicity.

There is an impact for service users whose first language is not English, and who may want to access our policies. The policies on the Health Board website are all written and published in English and are not routinely translated into a language that they may understand.

Documents will be written in plain language appreciating the diversity of our population. Where there is a need for a service user to have access to a policy or other written control document consideration will be given to the possibility of providing a translation based on the individual's needs. If it is not reasonable to translate the document it will be the responsibility of the health care professional to ensure that the patient understands the content of the document.

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)

No – the policy does not have a direct impact on people because of their religion, belief or non-belief. It is an administrative document which does not impact on the individual working arrangements for staff.

Do you think that the policy impacts on men and woman in different ways?

No – the policy does not have a direct impact on men or women in different ways. It is an administrative document which does not impact on the individual working arrangements for staff.

Do you think that the policy impacts on people because of their sexual orientation? (This includes Gay men, heterosexuals, lesbians and bisexuals)

No – the policy does not have a direct impact on people because of their sexual orientation. It is an administrative document which does not impact on the individual working arrangements for staff.

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

Yes, whilst we are committed to providing quality healthcare through the medium of Welsh the Welsh Language Scheme does not require the production of policies and other written control documents in Welsh. This is because they are primarily aimed at our staff.

Where patients wish to access services through Welsh our staff will make sure that they understand the impact of any policies or other written control documents that are relevant to their care if they need to be aware of these. If it is identified that it is necessary for the patient or service user to have access to a document in Welsh it will be translated on request. Where the demand for translation is likely to be high a Welsh version will automatically be made available.

4. Summary

The policy aims to ensure that the Health Board has appropriate policies, procedures and other written control documents to allow it to fulfil its responsibilities. There is an impact on service users whose first language is not English and those with visual impairment or difficulty reading or deciphering the written word.

The procedure developed in support of this document requires staff to take responsibility for ensuring that the principles of the policies and written control documents are explained to service users via an interpreter, translated as appropriate or explained to them with the use of a hearing loop where available if they are aware that the publication of documents in English may cause a difficulty.

Where there is also difficulty reading or deciphering the written word there is also a need to ensure that individuals are able to understand the content of documents where required.

Impact expected to be **positive**. The supporting procedure seeks to address any issues regarding language and disability.

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?)
- What **monitoring/evaluation** will be required to further assess the impact of any changes on equality target groups?

Equalities Impact Assessment Implementation Mitigation/Action Plan

Issue to be addressed	Responsible Officer	Action Required	Timescale for completion	Action Taken	Comments
Ensure that patients and staff are able to understand the content of documents where required.	Melanie Westlake	Policies, Procedure and Written Control Documents Procedure to clearly state responsibilities of staff to ensure this.	3 months		
Consider alternative media and formats of documents where it is identified that the audience would benefit from this.	Melanie Westlake	Policies, Procedure and Written Control Documents Procedure to clearly state responsibilities of staff to ensure this.	3 months		

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)			
Please record details of where and when EQIA results will be published On UHB intranet and internet site			
Please record below when the EQIA will be subject to review. 2 years after approval of policy, or earlier if required by changes to legislation or best practice			
Name of person completing	Melanie Westlake		
Signed			
Date	13 June 2014		
Name of Responsible Executive/Clinical Board Director Authorising Assessment and Action Plan for publication	Alison Gerrard Board Secretary		
Signed		Date	1 July 2014

Executive Summary

Background

This policy and the supporting Policies, Procedures and Written Control Documents Procedure will provide a structure for the adoption of externally developed documents and for the internal development, approval and management of all policies and written control documents within the UHB.

It sets out the commitment of the Board to make sure that there are documents which capture how the Health Board will deliver its aims, objectives, responsibilities and legal requirements transparently and consistently.

The scope of the EQIA

EQIAs from other NHS organisations and the Metropolitan Police were accessed when completing this EQIA. Reference was also made to the EQAI for the UHB Recruitment and Selection Policy to identify sources of information that were relevant to this EQIA.

Key findings

There is an impact on service users whose first language is not English and those with visual impairment or difficulty reading or deciphering the written word. The procedure developed in support of this document requires staff to take responsibility for ensuring that the principles of the policies and written control documents are explained to service users via an interpreter, translated as appropriate or explained to them with the use of a hearing loop where available if they are aware that the publication of documents in English may cause a difficulty.

Where there is also difficulty reading or deciphering the written word there is also a need to ensure that individuals are able to understand the content of documents where required.

Recommendations

The Policies, Procedures and Written Control Documents Management Policy has, overall, a positive impact on those wishing to access these documents. To support this staff will need to take responsibility for ensuring that the content is explained to patients and staff as appropriate where they have difficulty understanding or deciphering the content.