

Appendix 2 - Equality Impact Assessment - Standard Assessment Template

Section A: Assessment

Name of Policy: New Procedures

Person/persons conducting this assessment with Contact Details: Joy Whitlock joy.whitlock@wales.nhs.uk

Date

1. The Policy

Is this a new or existing policy? Existing policy – updated.

What is the purpose of the policy?

To protect patients/citizens and help clinicians, and the UHB to introduce new procedures appropriately.

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

The UHB must be assured that all practitioners are competent in all the activities that they undertake and that appropriate funding and other resources are agreed in advance. As part of this requirement, there is a responsibility to ensure that all new clinical techniques and procedures that are introduced into clinical practice are safe and effective, and in particular, in line with, and in support of NICE Interventional Procedures requirements and NICE Medical Technologies requirements.

Who will benefit from the policy?

Patients/citizens, clinicians, UHB

What outcomes are wanted from this policy?

- To protect people by ensuring that there is a consistent approach to the introduction of new clinical procedures within the UHB.
- To ensure competence, consent, and reporting arrangements for current practice wherever there are issues of patient safety.
- To assist staff with identifying their roles and responsibilities in ensuring that appropriate actions are taken by individuals, groups and committees with regard to ensuring patient safety, clinical effectiveness and best outcome.
- To ensure people receive the most appropriate interventions available.

- To ensure appropriate commissioning arrangements are made and to manage resources in accordance with NHS Wales Prioritisation Framework.

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

Section 4 of the new procedures procedure covers commissioning arrangements and makes reference to the *All Wales Prioritisation Framework* and *All Wales Policy for Individual Patient Funding Requests*.

Section 7 of the new procedures procedure covers training and competencies. Commissioning arrangements are required as part of the policy.

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)? Each proposed new procedure will require data collection

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?)

Paperwork was received for one new procedure to be introduced to the UHB in the last 12 months. No data have been collected specifically for this policy. New procedures will be closely monitored by use of an agreed dataset. A central database of new procedures and outcomes will continue to be maintained by the Clinical Audit Department. Incident reports must be completed for any untoward events.

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) The policy does not impact on people because of their age. Decisions about recipients of new procedures will be individual based on clinical need and risk management.

Do you think that the policy impacts on people because of their caring responsibilities? Decisions about recipients of new procedures will be individual based on clinical need and risk management. Caring responsibilities will be a discussion point to ensure appropriate arrangements are in place but should not sway clinician decisions about suitability for a new procedure.

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.) Individuals will be assessed according to clinical need and risk. People with disabilities may benefit from the introductions of new procedures pertinent to their condition.

Do you think that the policy impacts on people because of Gender reassignment? (This includes Trans transgender and transvestites) Gender reassignment may be taken in to consideration on grounds of clinical need and associated risks but in itself would not be affected by this policy.

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

Decisions about which people are recipients of new procedures will be done on an individual basis based on clinical benefits and risks, not on social circumstances.

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

Decisions about which people are recipients of new procedures will be done on an individual basis based on clinical benefits and risk management, not on social circumstances.

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.). Decisions about which people are recipients of new procedures will be done on an individual basis based on clinical benefits and risks, not on heritage.

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).

Decisions about which people are recipients of new procedures will be done on an individual basis based on clinical benefits and risks management, not on their beliefs.

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

Decisions about which people are recipients of new procedures will be made on an individual basis based on clinical benefits and risk management. New procedures may be gender dependent.

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

Decisions about which people are recipients of new procedures will be made on an individual basis based on clinical benefits and risk management not on sexual orientation.

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

Translation services may be required for anyone who does not have a comprehensive understanding of English – particularly given that new procedures may need very specific and detailed explanation. Health literacy would not have an impact on clinical decisions under this policy.

4. Summary.

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

Is the policy directly or indirectly discriminatory under the equalities legislation?

If the policy is indirectly discriminatory can it be justified under the relevant legislation?

No equality groups are affected by this policy. The introduction of new procedures may have a positive impact for some.

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?)
- 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
None regarding this policy					
Each new procedure may impact on equalities.	Clinical Director	Assess the equalities impact for new procedures	Prior to authorisation of the new procedure.		

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

Please record below when the EQIA will be subject to review – 3 years

Name of person completing Joy Whitlock

Signed _____

Date: March 2015

Name of Responsible Executive/Clinical Board Director Authorising Assessment and Action Plan for publication ____

Dr Graham Shortland, Medical Director

Signed: _____

Date: _____