

DISCHARGE AGAINST CLINICAL ADVICE (DACA) PROCEDURE – EQUALITIES IMPACT ASSESSMENT

Section A: Assessment

Name of Policy

Discharge Against Clinical Advice (DACA) Procedure

Person/persons conducting this assessment with Contact Details

Mental Capacity Act Manager

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Date 15th April 2014

1. The Policy

This is a new procedure.

The purpose of the procedure is to ensure that:

- Where patients express a wish to discharge themselves from hospital, clinical staff respond appropriately and lawfully
- Patients are treated in a dignified and respectful manner and are given appropriate support to help them discharge themselves safely

This procedure supports the UHB in promoting the safe, lawful, appropriate care of patients –“caring for people, keeping people well”, by ensuring that, where possible, patients receive an individual assessment of whether self-discharge can be supported by clinical staff.

Patients will benefit from this procedure, because it promotes safe, lawful, individually appropriate care.

Compliance with this procedure should mean that where patients wish to discharge themselves from hospital, their individual circumstances are assessed appropriately.

Implementation of the procedure may not be successful if dissemination is poor and/or leadership does not adequately stress the importance of following the procedure.

2. Data Collection

This procedure does not discriminate against any of the protected groups, because staff do not initiate self-discharge. The procedure merely provides guidance about how clinical staff should respond to a patient's wish to self-discharge.

The Equality Impact Assessments for self-discharge policies/procedures produced by other NHS organisations were reviewed on 8th April 2014 –

- Royal Cornwall Hospitals NHS Trust
- Peterborough and Stamford Hospitals NHS Trust
- Tameside Hospital NHS Trust
- North East London NHS Trust

There is no evidence from these that there are any negative impacts on protected groups.

The Vulnerable Adults Risk Management Working Group has been consulted about the impact on equalities groups and no further issues have been identified.

No gaps in data regarding equalities groups have been identified.

3. Impact

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. Assessment of people's age does not form part of the assessment regarding self-discharge. This procedure only applies to people aged 18 years and older.

Do you think that the policy impacts on people because of their caring responsibilities?

No. Assessment of people's caring responsibilities does not form part of the assessment regarding self-discharge.

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.)

Where patients are already detained under Mental Health Act 1983 or where patients lack mental capacity to decide to self-discharge, clinical staff must act according to the law. Both the Mental Health Act 1983 and Mental Capacity Act 2005 comply with human rights and equalities legislation.

Thus, this procedure does not impact on people because of their disabilities.

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

No. Assessment of gender reassignment does not form part of the assessment regarding self-discharge.

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

No. Assessment of people's marital/civil partnership status does not form part of the assessment regarding self-discharge.

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

No. Pregnancy and giving birth cannot be used to prevent self-discharge.

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. Assessment of people's race does not form part of the assessment regarding self-discharge.

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. Assessment of people's religion and beliefs does not form part of the assessment regarding self-discharge.

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

No. A person's gender is not considered when assessing for self-discharge.

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

No. Assessment of people's sexual orientation does not form part of the assessment regarding self-discharge.

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

No. Assessment of people's use of Welsh language does not form part of the assessment regarding self-discharge.

4. Summary.

There is no impact on the equality groups from this procedure.

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
Monitoring of use of procedure	Clinical Board Director	Datix : clinical incident reporting	Quarterly reports to Clinical Boards		

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

The EqIA will be published together with the procedure, once ratified, on the UHB's intranet and clinical portal.

Please record below when the EQIA will be subject to review.

This EqIA will be reviewed, together with the procedure, every three years, or sooner if appropriate.

Name of person completing Dense Shanahan
signed _____

Date: 15.05.14

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

Signed: _____

Date: _____