

## Equality & Health Impact Assessment for

### Restraint in the care management of patients aged 16 years and over with impaired mental capacity policy and procedure

1.	For service change, provide the title of the Project Outline Document or Business Case and Reference Number	N/A
2.	Name of Clinical Board / Corporate Directorate and title of lead member of staff, including contact details	Medical Director MCA Manager, Patient Safety Team Te. 029 2183 6312
3.	Objectives of strategy/ policy/ plan/ procedure/ service	<p>The aim of this policy and procedure is to ensure that patients aged 16 years and over who lack capacity to consent to it are restrained lawfully, when restraint is required.</p> <p>Restraint to protect the patient from harm - which is a proportionate response to that harm, is in their best interests and is the least restrictive, appropriate, available intervention - is likely to be lawful.</p> <p>This policy aims to assist Cardiff and Vale UHB to meet its legal obligations regarding the care and treatment of patients who may lack mental capacity to make decisions about their treatment and care.</p> <p>As a public body providing healthcare, it is essential that the UHB complies with the law. All treatment and care provided to patients must be undertaken in compliance with the law.</p>
4.	Evidence and background information considered. For example	<ul style="list-style-type: none"> <li>This Policy applies to any patient aged 16 years and over who lacks capacity to consent to restraint that is needed to keep them</li> </ul>

	<ul style="list-style-type: none"> <li>• population data</li> <li>• staff and service users data, as applicable</li> <li>• needs assessment</li> <li>• engagement and involvement findings</li> <li>• research</li> <li>• good practice guidelines</li> <li>• participant knowledge</li> <li>• list of stakeholders and how stakeholders have engaged in the development stages</li> <li>• comments from those involved in the designing and development stages</li> </ul> <p>Population pyramids are available from Public Health Wales Observatory<sup>1</sup> and the UHB's 'Shaping Our Future Wellbeing' Strategy provides an overview of health need<sup>2</sup>.</p>	<p>safe from harm. If the Policy is not followed, staff may be acting unlawfully.</p> <ul style="list-style-type: none"> <li>• The EqIA completed for the previous version of this Policy found there to be no adverse impact on any of the equalities groups. As the law on consent and capacity has not substantially changed since then, it is most unlikely that the effect of this Policy on any of the equalities groups will have changed.</li> <li>• The UHB's usual arrangement with regard to consultation was followed (i.e. 28 days on the intranet).</li> <li>• A part of good practice, other policies from different organisations were considered.</li> <li>• Stakeholders were not engaged in the EHIA and/or policy development.</li> <li>• Mental Capacity Act 2005 <i>Code of Practice</i></li> <li>• Mental Capacity Act 2005 Deprivation of Liberty <i>Code of Practice</i></li> </ul>
5.	Who will be affected by the strategy/ policy/ plan/ procedure/ service	<p><b>Staff</b> – compliance with the law means that the risk of staff being sued or prosecuted in connection with restraint used in the care and treatment of patients (with the exception of clinical negligence) is reduced. Staff also have a defence if complaints are made about them in relation to the use of restraint as part of planned treatment and care (again, excepting clinical negligence) to - for example - the UHB or to</p>

		<p>their professional body.</p> <p><b>Patients</b> – the policy will benefit those patients who may lack mental capacity to make decisions about their treatment and care by ensuring that the decision to restrain a patient has been made in accordance with the law.</p>
--	--	---

EQIA / How will the strategy, policy, plan, procedure and/or service impact on people?

Questions in this section relate to the impact on people on the basis of their 'protected characteristics'. Specific alignment with the 7 goals of the Well-being of Future Generations (Wales) Act 2015 is included against the relevant sections.

<b>How will the strategy, policy, plan, procedure and/or service impact on:-</b>	<b>Potential positive and/or negative impacts</b>	<b>Recommendations for improvement/ mitigation</b>	<b>Action taken by Clinical Board / Corporate Directorate.</b> Make reference to where the mitigation is included in the document, as appropriate
<b>6.1 Age</b> For most purposes, the main categories are: <ul style="list-style-type: none"> <li>• under 18;</li> <li>• between 18 and 65; and</li> <li>• over 65</li> </ul>	There is no link between this policy and age. The Policy applies to all adult patients who lack mental capacity to agree to or refuse restraint that they may need to prevent them coming to harm.  The law permits different ways of authorising restraint for patients aged under 16 years.	N/A	N/A
<b>6.2 Persons with a disability as defined in the Equality Act 2010</b> Those with physical	Because the policy concerns the legal issues regarding providing safe treatment and care to people with impaired	N/A	N/A

<b>How will the strategy, policy, plan, procedure and/or service impact on:-</b>	<b>Potential positive and/or negative impacts</b>	<b>Recommendations for improvement/ mitigation</b>	<b>Action taken by Clinical Board / Corporate Directorate.</b> Make reference to where the mitigation is included in the document, as appropriate
impairments, learning disability, sensory loss or impairment, mental health conditions, long-term medical conditions such as diabetes	decision making, it is only relevant where people have a condition, illness or disability that affects their mental capacity. However, the policy merely reflects current England and Wales law.		
<b>6.3 People of different genders:</b> Consider men, women, people undergoing gender reassignment  <b>NB</b> Gender-reassignment is anyone who proposes to, starts, is going through or who has completed a process to change his or her gender with or without going through any medical procedures. Sometimes referred to as Trans or	There is no evidence of either positive or negative impact.	N/A	N/A

How will the strategy, policy, plan, procedure and/or service impact on:-	Potential positive and/or negative impacts	Recommendations for improvement/ mitigation	Action taken by Clinical Board / Corporate Directorate. Make reference to where the mitigation is included in the document, as appropriate
Transgender			
<b>6.4 People who are married or who have a civil partner.</b>	There is no evidence of either positive or negative impact.	N/A	N/a
<b>6.5 Women who are expecting a baby, who are on a break from work after having a baby, or who are breastfeeding.</b> They are protected for 26 weeks after having a baby whether or not they are on maternity leave.	There is no evidence of either positive or negative impact.	N/A	N/A
<b>6.6 People of a different race, nationality, colour, culture or ethnic origin including non-English speakers, gypsies/travellers, migrant</b>	There is no evidence of either positive or negative impact.	N/A	N/A

How will the strategy, policy, plan, procedure and/or service impact on:-	Potential positive and/or negative impacts	Recommendations for improvement/ mitigation	Action taken by Clinical Board / Corporate Directorate. Make reference to where the mitigation is included in the document, as appropriate
<b>workers</b>			
<b>6.7 People with a religion or belief or with no religion or belief.</b> The term 'religion' includes a religious or philosophical belief	There is no evidence of either positive or negative impact.	N/A	N/A
<b>6.8 People who are attracted to other people of:</b> <ul style="list-style-type: none"> <li>• the opposite sex (heterosexual);</li> <li>• the same sex (lesbian or gay);</li> <li>• both sexes (bisexual)</li> </ul>	There is no evidence of either positive or negative impact.	N/A	N/A
<b>6.9 People who communicate using the Welsh language in terms of correspondence, information leaflets, or</b>	There is no evidence of either positive or negative impact.	N/A	N/A

<b>How will the strategy, policy, plan, procedure and/or service impact on:-</b>	<b>Potential positive and/or negative impacts</b>	<b>Recommendations for improvement/ mitigation</b>	<b>Action taken by Clinical Board / Corporate Directorate.</b> Make reference to where the mitigation is included in the document, as appropriate
<b>service plans and design</b>  Well-being Goal – A Wales of vibrant culture and thriving Welsh language			
<b>6.10 People according to their income related group:</b> Consider people on low income, economically inactive, unemployed/workless, people who are unable to work due to ill-health	There is no evidence of either positive or negative impact.	N/A	N/A
<b>6.11 People according to where they live:</b> Consider people living in areas known to exhibit poor economic and/or health indicators, people unable to access services and facilities	There is no evidence of either positive or negative impact.	N/A	N/A

How will the strategy, policy, plan, procedure and/or service impact on:-	Potential positive and/or negative impacts	Recommendations for improvement/ mitigation	Action taken by Clinical Board / Corporate Directorate. Make reference to where the mitigation is included in the document, as appropriate
6.12 Consider any other groups and risk factors relevant to this strategy, policy, plan, procedure and/or service	N/A	N/A	N/A

**6. HIA / How will the strategy, policy, plan, procedure and/or service impact on the health and well-being of our population and help address inequalities in health?**

Questions in this section relate to the impact on the overall health of individual people and on the impact on our population. Specific alignment with the 7 goals of the Well-being of Future Generations (Wales) Act 2015 is included against the relevant sections.

How will the strategy, policy, plan, procedure and/or service impact on:-	Potential positive and/or negative impacts and any particular groups affected	Recommendations for improvement/ mitigation	Action taken by Clinical Board / Corporate Directorate Make reference to where the mitigation is included in the document, as appropriate
7.1 People being able to access the service offered: Consider access for those living in areas of deprivation	No impact	N/A	N/A

How will the strategy, policy, plan, procedure and/or service impact on:-	Potential positive and/or negative impacts and any particular groups affected	Recommendations for improvement/ mitigation	Action taken by Clinical Board / Corporate Directorate Make reference to where the mitigation is included in the document, as appropriate
<p>and/or those experiencing health inequalities</p> <p>Well-being Goal - A more equal Wales</p>			
<p><b>7.2 People being able to improve /maintain healthy lifestyles:</b> Consider the impact on healthy lifestyles, including healthy eating, being active, no smoking /smoking cessation, reducing the harm caused by alcohol and /or non-prescribed drugs plus access to services that support disease prevention (eg immunisation and vaccination, falls prevention). Also consider impact on access to supportive services including smoking cessation services, weight</p>	<p>No impact.</p>	<p>N/A</p>	<p>N/A</p>

How will the strategy, policy, plan, procedure and/or service impact on:-	Potential positive and/or negative impacts and any particular groups affected	Recommendations for improvement/ mitigation	Action taken by Clinical Board / Corporate Directorate Make reference to where the mitigation is included in the document, as appropriate
management services etc  Well-being Goal – A healthier Wales			
<b>7.3 People in terms of their income and employment status:</b> Consider the impact on the availability and accessibility of work, paid/ unpaid employment, wage levels, job security, working conditions  Well-being Goal – A prosperous Wales	No impact.	N/A	N/A
<b>7.4 People in terms of their use of the physical environment:</b> Consider the impact on the availability and accessibility of transport, healthy food,	No impact.	N/A	N/A

How will the strategy, policy, plan, procedure and/or service impact on:-	Potential positive and/or negative impacts and any particular groups affected	Recommendations for improvement/ mitigation	Action taken by Clinical Board / Corporate Directorate Make reference to where the mitigation is included in the document, as appropriate
<p>leisure activities, green spaces; of the design of the built environment on the physical and mental health of patients, staff and visitors; on air quality, exposure to pollutants; safety of neighbourhoods, exposure to crime; road safety and preventing injuries/accidents; quality and safety of play areas and open spaces</p> <p>Well-being Goal – A resilient Wales</p>			
<p><b>7.5 People in terms of social and community influences on their health:</b> Consider the impact on family organisation and roles; social support and social networks; neighbourliness and sense of belonging; social isolation; peer</p>	No impact.	N/A	N/A

How will the strategy, policy, plan, procedure and/or service impact on:-	Potential positive and/or negative impacts and any particular groups affected	Recommendations for improvement/ mitigation	Action taken by Clinical Board / Corporate Directorate Make reference to where the mitigation is included in the document, as appropriate
<p>pressure; community identity; cultural and spiritual ethos</p> <p>Well-being Goal – A Wales of cohesive communities</p>			
<p><b>7.6 People in terms of macro-economic, environmental and sustainability factors:</b> Consider the impact of government policies; gross domestic product; economic development; biological diversity; climate</p> <p>Well-being Goal – A globally responsible Wales</p>	No impact.	N/A	N/A

<p><b>8.1 Please summarise the potential positive and/or negative impacts of the strategy, policy, plan or service</b></p>	<p>On reviewing the previous policy and writing the latest version, improvements have been made in people who communicate using the Welsh language, people with a religion or belief or with no religion or belief. Overall, there appears to be very limited impact on the protected characteristics and health inequalities as a result of this policy.</p>
--	---

### Action Plan for Mitigation / Improvement and Implementation

	Action	Lead	Timescale	Action taken by Clinical Board / Corporate Directorate
<p><b>8.2 What are the key actions identified as a result of completing the EHIA?</b></p>	<p>Overall, there is no evidence that this Policy adversely affects any of the equalities groups.</p>			
<p><b>8.3 Is a more comprehensive Equalities Impact Assessment or Health Impact Assessment required?</b></p> <p>This means thinking about relevance and proportionality to the Equality Act and asking: is the impact significant enough that a more formal and full consultation is required?</p>	<p>No.</p>			

	Action	Lead	Timescale	Action taken by Clinical Board / Corporate Directorate
<p><b>8.4 What are the next steps?</b></p> <p>Some suggestions:-</p> <ul style="list-style-type: none"> <li>• Decide whether the strategy, policy, plan, procedure and/or service proposal: <ul style="list-style-type: none"> <li>○ continues unchanged as there are no significant negative impacts</li> <li>○ adjusts to account for the negative impacts</li> <li>○ continues despite potential for adverse impact or missed opportunities to advance equality (set out the justifications for doing so)</li> <li>○ stops.</li> </ul> </li> <li>• Have your strategy, policy, plan, procedure and/or service proposal approved</li> <li>• Publish your report of this impact assessment</li> <li>• Monitor and review</li> </ul>	<p>Policy and EHIA will be put out to consultation for 28 days. All comments will be considered and, where appropriate, incorporated into the policy, procedure and EHIA.</p> <p>The policy, procedure and EHIA will be placed on the agenda for a future Mental Health and Capacity Legislation Committee meeting.</p> <p>The policy, procedure and EHIA will be reviewed and re-approved within 3 years.</p>			

