The State Hospital Equality Impact Assessment (EQIA)

You should read the guidance document prior to completing this template.

Please note, the EQIA should be proportionate to the significance and coverage of the policy and should take cognisance of the nature of the environment and patient group.

Step 1: Screening to determine if the policy requires a detailed EQIA

Name of the policy: Adult Support and Protect	Name of the policy: Adult Support and Protection Policy			
Directorate: Nursing, AHP and Operations	Date:	13/07/2021		
Designation(s) of author(s): Social Work Te	am Leader			
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Strategy Policy Rotocol	roject	*Other		
(*please provide details)				
New update to existing policy	repl	acement		
(*please advise what this policy is replaci	ng)			
1. What are the main aims and outcomes of the policy and how do these fit in with the wider aims of the organisation, legislation and national drivers?				
Aim(s) / Outcome(s) Wider Aim(s)				
To support the delivery of adult protection work within The State Hospital, ensure statutory duties are met and to raise awareness of our responsibilities in this respect. To promote the health, safety and welfare appropriately supported and empowered to safeguard their wellbeing, property, rights other interests.				
2. Please identify the scope of the policy				
Forensic Network wide 🗌 Hospital wide 🔀 Service specific 🗌				
Discipline specific *Other				
(*please provide details)				
3. Who are the key stakeholders potentially affected by the policy? Will the policy impact on these groups in a positive and/or negative and/or neutral way? Why do you say this?				
Stakeholder(s)	Impact	Rationale		
1. Patients	Positive	Ensures that patients are supported and enabled to safeguard their wellbeing, property, rights and / or other interests.		

		Promotes patients' rights and
		provides a framework for
		ensuring their safety from harm.
		Practice is tailored to meet the
		needs of the individual within
		this environment.
		this environment.
	Newsters	Statutory duty to report
	Negative	concerns may impact
		negatively on staff/patient
		therapeutic relationships.
2. Staff	Positive	Confirms a robust approach to
		adult protection and compliance
		with legislative duties. Ensures
		staff are aware of
		responsibilities and empowered
		to address concerns
		appropriately.
	Norotivo	The statutory duty to report
	Negative	harm, even where consent is
		not provided, may have the
		potential to negatively impact
		therapeutic relationships.
3. RMO	Positive	Provides reassurance to the
		RMO that the patients for whom
		they are responsible has
		access to appropriate
		safeguarding measures.
		0 0
	Negative	The statutory duty to report
	Negative	harm, even where consent is
		not provided, may have the
		potential to negatively impact
		therapeutic relationships.
4. Carers	Positive	Provides assurance to carers
		that the person they care for
		has access to appropriate and
		robust safeguarding measures
		to protect them from harm.
	Negative	May cause distress should
E Social Workers	Decitive	upsetting material be disclosed.
5. Social Workers	Positive	Supports SW staff to undertake
		robust ASP inquiries and
		investigations.
	Negative	Potential impact on therapeutic
	litegative	relationships as a consequence
		of statutory duty to report
		concerns that an adult is at risk
		of harm.
		Potential impact on professional
		relationships when inquiries
		pertain to staff conduct.
March 2021		

6. Volunteers	Negative	Potential impact on therapeutic relationships as a consequence of statutory duty to report concerns that an adult is at risk of harm.		
7. Patient Advocacy Service	Positive	Supports the role of PAS and patient rights to access this service.		
	Negative	Potential impact on therapeutic relationships as a consequence of statutory duty to report concerns that an adult is at risk of harm.		
		Potential impact on professional relationships when inquiries pertain to staff conduct.		
 External Regulatory / Partner Organisations 	Positive	Provides assurance to external stakeholders of a robust approach to safeguarding and legislative duties.		
4. Is a collaborative assessment with external partners required? No				
5. Specifically, in relation to the protected characteristics, please identify whether the policy impacts positively, negatively and / or neutrally on these groups, providing rationale in support of your decision. Please also describe any identified inequality and indicate practice in place which mitigates aspects of the policy contributing to any adverse impact or inequality.				

Protected Characteristic	Positive X	Adverse/Negative X	Neutral X	Identified impact / inequality and rationale, including mitigating practice where appropriate
Age	X			The policy applies to all patients regardless of age and offers equal protection. Adults with an age related disability e.g. Dementia are safeguarded through the principles of the policy.
Disability	X			Policy seeks to protect patients who may be more vulnerable as a result of their mental health. Provides the framework to respond to individual needs and support positive communication for all patients including those with intellectual disability, autism, sensory impairment or other barriers which may impact on their ability to communicate effectively.
Gender			X	
Gender Reassignment	X			Patients who may be transitioning may be more vulnerable to emotional / psychological harm. The policy provides a protective framework in this respect.

Marriage and Civil Partnership		X	
Pregnancy and Maternity		X	
Race/Ethnicity	X		The policy supports the safety and wellbeing of all patients. Racial abuse would be considered a form of emotional / psychological harm and therefore acted on within the terms of the policy, protecting ethnic minority groups.
Religion and or Belief	X		Faith related verbal abuse would be considered a form of emotional / psychological harm and therefore acted on within the terms of the policy.
Sexual Orientation	X		The policy seeks to promote the safety and welfare of patients who may be more vulnerable to emotional / psychological / harm directly related to their sexual orientation.

6. Thinking about the key stakeholders you have identified in no. 3, please explain how the policy supports the organisation to eliminate any potential unlawful discrimination, harassment and victimisation of these groups, promoting equality of opportunity and fostering good relationships between all stakeholders.

The policy implementing the national legislation applies to all identified stakeholders. The policy explicitly supports anti discriminatory practice, is based upon the rights of the individual and the principles of benefit to the adult and the least restrictive intervention. Interventions must take account of the views of the adult and adults should be supported to participate as fully as possible. Section 2 of the act, referenced within the policy, emphasises the importance of having regard to the adult's abilities, background and characteristics.

All staff have responsibilities under the Act to promote positive, professional working practices. All staff have access to training to support their awareness and knowledge of the processes.

Positive relationships are fostered by having patients and their carers reassured that there are clear frameworks to protect all patients from harm in addition to the transparency in relation to independent investigation of reported incidents of potential harm.

External stakeholders are reassured of robust process which are in place to support and uphold statutory responsibilities and duties under the Act.

7. Thinking about the key stakeholders you have identified in no. 3, please identify potential inequalities of outcome which may arise in relation to socio-economic disadvantage (low income), including material deprivation.

The policy specifically seeks to raise awareness of power imbalances and the potential, where these exist, to offer protection to those at risk of harm. The policy offers safeguards to those at risk of financial harm.

Please discuss with the Service Lead / Director and complete below to indicate this person is in agreement with your findings.

Service Lead / Director Designation:

Professional Nurse Advisor on behalf of Director of Nursing, AHPs and Operations

Date: 12/07/2021

Then forward this screening document and your policy document to the Person Centred Improvement Lead for approval.

Approved by Person Centred Improvement Lead	Date: 13/07/2021
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Comments

Feedback incorporated. No requirement for detailed EQIA.

Detailed EQIA required. Please contact Person Centred Improvement Lead for advice / support Date: / /

Following consultation, this EQIA should be attached to the policy document and included within the paperwork for consideration by the Policy Approval Group (PAG) prior to implementation. If any changes to the EQIA are required as a result of feedback from the consultation, please contact the Person Centred Improvement Lead.

Please note, as policy and EQIA documents are within the public domain, via the Hospital's website (unless identified by the PAG as sensitive information), content should not include the names of any stakeholders and/or include any information which would identify individuals.