

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: Food Allergen Management Policy		
Directorate: Nursing, AHP and Operations		Date: 17/05/22
Designation(s) of author(s): Lead Dietitian		
Strategy <input type="checkbox"/> Policy <input checked="" type="checkbox"/> Protocol <input type="checkbox"/> Project <input type="checkbox"/> *Other <input type="checkbox"/> (*please provide details)		
New <input type="checkbox"/> update to existing policy <input checked="" type="checkbox"/> *replacement <input type="checkbox"/> (*please advise what this policy is replacing)		
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 ensure that food provided within the Hospital is stored, handled, prepared and served to ensure it is safe for patients who have identified food allergens. To safeguard patients who have a food allergen when in TSH.	To highlight the difference between allergy and intolerance. To ensure all relevant staff understand their role and responsibilities in managing food allergens. To support reporting and DATIX of food allergens.	
2. Please identify the scope of the policy		
Forensic Network wide <input type="checkbox"/> Hospital wide <input checked="" type="checkbox"/> Service specific <input type="checkbox"/> Discipline specific <input type="checkbox"/> *Other <input type="checkbox"/> (*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	It is a priority for any patient with a food allergy to be supported to safely manage the associated risks.
	Negative	Some patients may lack the capacity to understand.
2. Staff	Positive	Knowledge and understanding to support staff to safely manage a patient's food allergy. Clearly highlighted responsibilities.

	Negative	<p>Safeguards healthy pregnancy protects against risk of miscarriage relating to allergies.</p> <p>May impact on therapeutic relationship if food items are prohibited and patient lacks understanding of why this is required.</p>
3. Carers	Positive	<p>Supports carers to continue to bring food/fluid items to visits.</p> <p>Reassures carers/visitors that the patients allergy is managed safely.</p> <p>Carers will be provided with information to safely support the patient with any foods that they may be providing as gifts. Deters patients from requesting items which may contain allergens.</p>
	Negative	<p>Carers on a low income may find alternative food/fluid items more expensive and/or less available in their local home environment requiring them to travel to purchase the same.</p>
4. Volunteers	Positive	<p>Process in place to ensure that volunteers do not make gifts of food / fluids to patients mitigating the risk of inadvertently offering a patient with an allergen foods / fluids he is unable to tolerate.</p>
<p>4. Is a collaborative assessment with external partners required? No. Patient information shared with step down services includes details of any allergies and, where required, emergency medication travels with the patient and left with the receiving unit during overnights stays (if required).</p> <p>* If not, please provide rationale</p>		
<p>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.</p>		

Protected Characteristic	Positive X	Adverse / Negative X	Neutral X	Identified impact / inequality and rationale, including mitigating practice where appropriate
Age			X	
Disability	X	X		<p>If a patient lacks understanding of reasoning to prohibit a food item due to risk of anaphylaxis. Individually tailored care and treatment plans and close therapeutic relationships with the key worker supports a robust approach to safeguarding the patient.</p> <p>Policy supports those with sensory impairment to receive the information in a format appropriate to their needs.</p>
Gender			X	
Gender Reassignment			X	
Marriage and Civil Partnership			X	
Pregnancy and Maternity	X		X	Safeguards pregnant staff and the unborn child.
Race/Ethnicity	X			<p>Policy supports those whom English is not their first language to receive information in their preferred language.</p> <p>Processes are in place to provide translation/interpretation input where required.</p>
Religion and or Belief			X	Patients with a food allergen impacting on preferred choice of menu relating to faith will be supported to identify alternative items where possible to support individual need.
Sexual Orientation			X	

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.

Any restrictions put in place are due introduced to prevent an allergic reaction/anaphylaxis reaction that may require acute hospital care or could result in death. Due to the seriousness of safely managing a potential or known food allergen, any changes in a patient's care plan are considered vital for the safety of that patient. Although individual patients may therefore be prevented from consuming food / fluid items which cause a risk of harm, this practice, due to the significant risk of death in some cases, is not considered discriminatory, but proportionate to the risk identified. The policy supports staff to take such difficult decisions and fosters good relationships with patients / carers / visitors through clear communication processes.

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.

Carers on a low income may find alternative food/fluid items more expensive and/or less available in their local home environment requiring them to travel to purchase the same.

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

Service Lead / Director Designation: Lead AHP

Date: 06/06/22

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

Approved by Person Centred Improvement Lead **Date:** 9/6/22

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 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 Policy Approval Group as sensitive information), content should not include the names of any stakeholders and/or include any information which would identify individuals.