

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: Patient Food and Fluid Refusal Policy	
Directorate: Nursing, AHP & Operations	Date: 07/12/21
Designation(s) of Lead Author: 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?	
<p style="text-align: center;">Aim(s) / Outcome(s)</p> <p>To provide TSH staff with knowledge to support food, fluid refusal by patients within the Hospital setting.</p> <p>To provide guidance regarding nutritional requirements and how these should be managed following physical health assessment.</p> <p>To guide staff regarding the legal aspects of supporting food and fluids when patients refuse.</p>	<p style="text-align: center;">Wider Aim(s)</p> <p>These guidelines provide advice to medical and nursing staff at the point at which physical health is compromised by food or fluid refusal. They explain the roles, responsibilities and process for the management of fluid and food refusal.</p>
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 Negative	Supports nutritional intake May contradict patient wishes regarding being fed and supporting life/physical health needs.
2. Carers	Positive Negative	Supports physical and mental health of patient May cause emotional distress seeing the patient physically deteriorate when not eating/drinking and necessitating the need for tube feeding.
3. Staff	Positive Negative	Supports the patient's nutritional care and therefore health and wellbeing. Provides opportunity to learn new skills. May impact on the therapeutic relationship. Need for additional staff training and competency.
4.		
5.		
6.		
<p>4. Have external partners / other relevant stakeholders contributed to this assessment?</p> <p style="text-align: right;">No</p> <p>* If not, please provide rationale</p> <p>There was contribution to the initial policy development, due to minimal changes no requirement to engage with the external stakeholders as part of this review.</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	Adverse/Negative	Neutral	Identified impact / inequality and rationale, including mitigating practice where appropriate
	X	X	X	
Age	X			Clear guidance in place which supports the nutritional needs of patients, regardless of age.
Disability	X			Responds to needs which may arise as a result of deterioration of mental health e.g. Anorexia Nervosa, depression, suicidal ideation.
Gender			X	
Gender Reassignment			X	
Marriage and Civil Partnership			X	
Pregnancy and Maternity			X	
Race/Ethnicity	X	X		Individually tailored care and treatment plans highlight any barriers to communication, e.g. language. Access to interpreter / translator services. There may be a delay in providing information in relation to providing nutritional support if the patient's first language is not English. Normally within nutritional products, there is a product available which will support ethnic preferences.

Religion and or Belief	X			Individualised care and treatment plans highlight needs relating to religion, culture and ethnicity. Normally within nutritional products, there is a product available which will support religious / faith related preferences.
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.

Ensures the health and wellbeing needs of patients who require nutritional support, due to food and or fluid refusal compromising their physical health, are supported through the development of individually tailored care plans. Supports consistency of practice and continuity of care provided by TSH staff locally. Takes account of individual needs and acknowledges the need to involve carers whom the patient has identified as important to supporting him, therefore promoting good relationships between all those involved.

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.

None identified.

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

Service Lead / Director Designation:

Director of Nursing, AHPs and Operations

Date: 08/12/21

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

Approved by Person Centred Improvement Lead	Date: 08/12/21
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.