## 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

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Name of the policy: HR40 Standards of Dress and Clinical/ Non-clinical Uniform Policy					
<b>Directorate:</b> Human Resources					
<b>Date:</b> 10/12/2021					
Designation(s) of Lead Author: Head of Human Resources					
Strategy Policy Protocol Project Other					
(*please provide details)					
New update to existing policy replacement					
(*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 support a standard approach to attire that applies to clinical and non-clinical staff, students and volunteers, regardless of whether or not a uniform is worn, which promotes public confidence through	The Policy has been reviewed and developed in line with Government documentation. CEL 42 (2010) which comprises three sections, National Uniform policy, the Dress Code and the Laundering policy updates and replaces the previously issued CEL 36 (2009), CEL 46 (2009) and CEL 53 (2008).				
a professional image.  To ensure that clothing is compatible with safe moving and handling practices, responding safely to PAA calls, reduces the risk of cross infection and is appropriate to the area in which people are providing input.	The NHS wants patients and the public to have absolute confidence in the services that it provides. In order that all State Hospital staff maintain and promote absolute confidence in the services they provide they must demonstrate high standards of personal cleanliness, hand hygiene and ensure a professional appearance at all times.				
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. Staff, volunteers, professional visitors, visitors, students and contractors	Positive	Ensures compliance with national legislation and guidance and puts in place processes to protect all those entering the Hospital environment.	
	Positive	Protection of stakeholders from the risk of cross infection. Dress is appropriate to the Hospital environment.	
	Positive	TSH covers the cost of all uniforms, saving wear and tear on other clothing. Ample supply of uniforms.	
External regulatory organisations (e.g. Scottish Government, Health Improvement Scotland), primary care service partners.	Negative	Limits freedom of expression through dress/ appearance. This is unavoidable, given the nature of this setting.	
	Positive	Ensures consistent approach to safeguarding all stakeholders.	

### 4. Have external partners / other relevant stakeholders contributed to this assessment? Yes / \*No

Given the nature of the environment, it is necessary to impose restrictions on the appearance of external visitors/ contractors etc.

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.

<sup>\*</sup> If not, please provide rationale

Protected Characteristic	Positive	Adverse / Negative	Neutral	Identified impact / inequality and rationale, including mitigating
	X	X	X	practice where appropriate
Age			Х	
Disability	Х			Protects people from patients whose index offence may relate to sexually motivated behaviour, which may be driven by inappropriate appearance.
Gender			X	
Gender Reassignment			Х	
Marriage and Civil Partnership			Х	
Pregnancy and Maternity			Х	Maternity tunics and trousers are available on request
Race/Ethnicity	X	X		Policy acknowledges the need to consider specific cultural practice in relation to dress. The organisation is sensitive to understanding individual need through a process which balances culture preference with risk relating to infection control health safety and security.
Religion and or Belief	X	Х		Policy acknowledges the need to consider specific religious practice in relation to dress. The organisation is sensitive to understanding individual need through a process which balances religious preference with risk relating to infection control health safety and security.
Sexual Orientation			Х	

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.

Applied equally to all stakeholders, protecting the health, wellbeing and safety of everyone accessing the Hospital.

Acknowledges the need to consider cultural / spiritual diversity.

Emphasises the need for a collaborative approach to ensuring the safety of all stakeholders, not limited to clinical staff.

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. Supply of uniforms alleviates wear and tear on personal clothing, potential saving money in the longer term.

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 HR and Wellbeing

**Date:** 10/12/21

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

**Approved by Person Centred Improvement Lead Date:** 14/12/21

#### 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.