

# 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

<b>Name of the policy:</b> Health Records Policy		
<b>Directorate:</b> Medical	<b>Date:</b> 04 / 06 / 2021	
<b>Designation(s) of author(s):</b> Associate Medical Director / Caldicott Guardian Health Records Manager		
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)		
<b>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?</b>		
<b>Aim(s) / Outcome(s)</b>	<b>Wider Aim(s)</b>	
To implement systematic and planned arrangements for the management of Health Records within The State Hospital (TSH) which comply with legislation.	To ensure TSH has policies and procedures in place for staff to manage health records, including the sharing of information and retention/destruction of data. To support a robust approach to protecting confidentiality of patient information.	
<b>2. Please identify the scope of the policy</b>		
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)		
<b>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?</b>		
<b>Stakeholder(s)</b>	<b>Impact</b>	<b>Rationale</b>
1. Patients	Positive	Personal and sensitive confidential data will be managed safely and securely by TSH staff. Appropriately shared data alleviates the need for duplicate

	Negative	<p>conversations and supports a risk management approach which enables care and treatment to be delivered adopting least restrictive security practice. Less likely to be breaches of confidentiality to the media as a direct result of systems which highlight if staff have accessed patient records inappropriately.</p> <p>Immediate access to electronic records unavailable for patients, some of whom experience challenges with understanding the need for processes to be adhered to and resulting time delay in responding to requests.</p>
<b>2. Staff</b>	Positive	<p>Staff are aware of their responsibilities in relation to health records and are provided with guidance and contacts for further support. A chronological real-time patient record within RiO progress notes supports staff to deliver safe and effective care and treatment.</p> <p>Appropriately shared risk management plans via RiO support a safer working environment.</p>
<b>3. Named persons/ carers identified as patients' representatives</b>	Positive	<p>Provides reassurance around protecting patient confidentiality and appropriate recording of feedback from this group.</p> <p>Supports a robust approach to ensuring all relevant staff are aware of the patient's representative's preferred language.</p>
<b>4. Volunteers</b>	Positive	<p>Appropriately shared risk management plans via RiO support staff to manage potential risks to volunteers providing direct input with patients.</p>
<b>5. Third parties</b>	Positive	<p>Protects anonymity e.g. access to and sharing of witness statements.</p>

<b>6.</b> External regulatory organisations, e.g. Scottish Government, Information Commissioner's Office	Positive	Provides reassurance of a robust approach to compliance with legislation.
<b>4. Is a collaborative assessment with external partners required?</b> No		
<b>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.</b>		

<b>Protected Characteristic</b>	<b>Positive X</b>	<b>Adverse/Negative X</b>	<b>Neutral X</b>	<b>Identified impact / inequality and rationale, including mitigating practice where appropriate</b>
<b>Age</b>	<b>x</b>			In addition to protecting personal data relating to age, the framework supports safe management of personal information which may include diagnosis of age related health conditions e.g. Dementia.
<b>Disability</b>	<b>x</b>			Framework supports safe management of personal information which may include diagnosis of physical / mental health related disability e.g. Schizophrenia, sensory impairment.  Policy supports safe sharing of information to support a cohesive approach to providing care and treatment.
<b>Gender</b>	<b>x</b>			Framework supports safe management of personal information including gender.
<b>Gender Reassignment</b>	<b>x</b>			Framework supports safe management of personal information including gender reassignment.  Through monitoring of progress notes, a patient's decision to be recognised as a female will highlight if gender specific language is used which fails to recognise the patient's rights in this respect.

<b>Marriage and Civil Partnership</b>			<b>x</b>	
<b>Pregnancy and Maternity</b>			<b>x</b>	
<b>Race/Ethnicity</b>	<b>x</b>			<p>Protects the inappropriate sharing of personal data relating to race / ethnicity.</p> <p>Supports a process to ensure that translated documents are stored within RiO. accessible to appropriate members of staff.</p> <p>Provides a secure system to record the preferred language of the patient's representative to support meaningful involvement.</p>
<b>Religion and or Belief</b>	<b>x</b>			<p>Protects inappropriate sharing of personal data including religion / belief.</p> <p>RiO used as a safe way of recording patient interactions with spiritual and pastoral care team, ensuring relevant staff can support this element of care and treatment and understand potential relevance to risk management e.g. religious ideation as a trigger for decline in mental health / violence / aggression.</p>
<b>Sexual Orientation</b>	<b>x</b>			Protects confidentiality of information relating to a patient's 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.**

Staff will be more aware of their responsibilities with regard to information management, including personal sensitive information which, although not specific to discrimination, harassment and victimisation, ensures that data is less likely to be unintentionally leaked or inaccurate.

Relationships with patients and their representatives will be more effective as a result of trust relating to safe recording and storage of confidential information.

**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:** Associate Medical Director

**Date:** 9/6/21

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

**Approved by Person Centred Improvement Lead**

**Date:** 9/6/21

**Comments**

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.**