

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: Email Policy		
Directorate: Finance and eHealth		Date: 21 / 07 / 2021
Designation(s) of author(s): Senior IM&T Infrastructure Analyst & ITSO		
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 type="checkbox"/> *replacement <input checked="" type="checkbox"/> (*please advise what this policy is replacing) Part of current IT Security Policy (IG08)		
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) To outline the acceptable use of email and highlight legislative responsibilities.	Wider Aim(s) To comply with Network Information System Regulation (NIS) and General Data Protection Regulation (GDPR). New system put in place so policy has been created to match.	
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. Staff	Negative	Changes to the way email is currently used. Is explicit about use of the email system for person reasons during working hours. Prevents staff who may not have access to store files / photos etc on personal IT equipment from having this facility.

	Positive	Assurances that emails are secure. Protection from distressing emails. Limits volumes of emails received i.e. chain emails. Protects use of personal email addresses. Highlights the need to be cautious around use of distribution lists which share email contact details unnecessarily.
2. Patients	Positive	Highlights the risk of sharing confidential patient information. Protects patient identity.
3. The State Hospitals Board	Positive	Supports a robust approach to compliance with legislation. Protects the organisation from potential, significant communications issues in relation to a malicious emails. Provides a framework of expectations around personal use of email to inform potential investigations relating to staff conduct in this respect.
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 protects the confidentiality of patients with an age related condition e.g. Dementia.
Disability	X			The policy protects the confidentiality of patients with a mental health disorder / physical disability.
Gender			X	
Gender Reassignment			X	
Marriage and Civil Partnership			X	
Pregnancy and Maternity			X	
Race/Ethnicity	X			The policy protects individuals who may, as a result of their race / ethnicity be otherwise subject to racist behaviour / the subject of stereotypical email 'jokes'.
Religion and or Belief	X			The policy protects individuals who may, as a result of their religion / belief be otherwise subject to discriminatory behaviour / the subject of stereotypical email 'jokes'.
Sexual Orientation	X			The policy protects individuals who may, as a result of their sexual orientation be otherwise subject to discriminatory behaviour / the subject of stereotypical email 'jokes'.

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 is explicit in the content within section 4.2 Specific Obligations in relation to what has been described in terms of misuse of the email system, specifically in a way in which individuals may feel discriminated against, harassed and / or victimised.

All those with access to the email system are required to comply with the policy and there are safeguarding mechanisms in place through the use of passwords and monitoring which enables the organisation to identify individuals who may send offensive / inappropriate emails.

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 is explicit about storage of personal files / photos which may impact negatively on email users who have no access to store such files at home as a result of financial issues. When compared to others working for a different employer, this may be deemed inequitable. However, the policy is limited to those working within TSH.

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 Finance and eHealth

Date: 21 / 07 / 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: 28/07/21

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.