

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: Corporate Records Policy		
Directorate: Finance and eHealth		Date: 22/09/2021
Designation(s) of Lead Author: 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 type="checkbox"/> *replacement <input checked="" type="checkbox"/>		
(*please advise what this policy is replacing)		
Management, Retention and Destruction of Admin Records Policy		
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 implement systematic and planned arrangements for the management of Corporate Records within The State Hospital (TSH) which comply with legislation.	To ensure TSH has policies and procedures in place for staff to manage corporate records, including the sharing of information (both internally and externally) and retention/destruction of data. To support a robust approach to protecting confidentiality of (sensitive) personal information.	
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		Staff are aware of their responsibilities in relation to corporate records and are provided with contacts and guidance for further support.

		<p>Management of corporate records will provide evidence for practice in various areas.</p> <p>Corporate records management supports the administration of rights of access to information held about staff members.</p>
2. Patients	Positive	<p>Corporate records management ensures that sensitive and personal information out with the clinical record is handled in a safe and secure manner.</p> <p>Corporate records management supports administration of the rights of access to information held about patients.</p>
3. Carers/Named Persons/relatives/third parties	Positive	Provides reassurance of integrity and confidentiality of information held and processes being managed in line with legislation.
4. External regulatory bodies (e.g. Scottish Government, Information Commissioner's Office)	Positive	Provides reassurance of a robust approach to compliance with legislation.
5. Partner companies (e.g. contractors, suppliers)	Positive	Provides reassurance of a robust approach to compliance with legislation and confidential management of data.
6. Other healthcare providers	Positive	Provides reassurance of a robust approach to compliance with legislation and confidential management of data.
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			Framework supports safe management of personal information including age.
Disability	X			Framework supports safe management of personal information including disability. Framework supports safe sharing of information to provide a cohesive approach to care.
Gender	X			Framework supports safe management of personal information including gender.
Gender Reassignment	X			Framework supports safe management of personal information including gender reassignment.
Marriage and Civil Partnership	X			Framework supports safe management of personal information including marital/civil partnership status.
Pregnancy and Maternity	X			Framework supports safe management of personal information including pregnancy/maternity status.
Race/Ethnicity	X			Framework supports safe management of personal information including race/ethnicity.
Religion and or Belief	X			Framework supports safe management of personal information including religion or beliefs.
Sexual Orientation	X			Framework supports safe management of personal information including sexual orientation status.

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 between patients and staff and staff and carers will be more effective as a result of trust relating to safe recording and storage of confidential information.

Relationships with external governing bodies and other healthcare suppliers will be more secure as evidence is available to support the confidential management of data. Contractors and others working in partnership with TSH will also have the same assurances.

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 Finance and eHealth

Date: 04/10/2021

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

Approved by Person Centred Improvement Lead

Date: 05/10/21

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.