## 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: Fire S  | Safety Policy |  |  |  |  |  |  |
|---|---------------|--|--|--|--|--|--|
| Directorate: Security   |               | Date: 06/02/2020   |  |  |  |  |  |
| Designation(s) of author(s): Head of Estates & Facilities   |               |  |  |  |  |  |  |
| 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) / Outcom   | e(s)          | Wider Aim(s)   |  |  |  |  |  |
| To ensure the organisation is equipped to comply with legislative requirements in relation to fire safety.  |               | Compliance with national legislation and codes of practice including:<br>The Fire (Scotland) Act 2005 as amended and the                               |  |  |  |  |  |
| To ensure that all staff are aware of their responsibilities in the event of a fire.  |               | Fire Safety (Scotland) Regulations 2006; The Fire Safety Policy for NHS Scotland; CEL11(2011).   |  |  |  |  |  |
| 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  |  |  |  |  |  |
| Staff   | Positive      | Ensures compliance with national<br>legislation and guidance and puts in place<br>processes to protect all those entering the<br>hospital environment. |  |  |  |  |  |
| Patients  | Positive      | Ensures compliance with national   |  |  |  |  |  |

|   |                   | legislation and guidance and puts in place<br>processes to protect all those entering the<br>hospital environment.                                    |
|---|-------------------|---|
| Volunteers  | Positive          |   |
| Visitors (including<br>professionals, carers,<br>contractors) | Positive          | Ensures compliance with national<br>legislation and guidance and puts in place<br>processes to protect all those entering the<br>hospital environment |
| 4. Is a collaborative as                                      | ssessment with ex | ternal 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<br>Characteristic          | Positive<br>X | Adverse/Negative<br>X | Neutral<br>X | Identified impact /<br>inequality and rationale,<br>including mitigating<br>practice where appropriate   |
|--------------------------------------|---------------|-----------------------|--------------|--|
| Age                                  |               |                       | x            | Policy makes explicit reference<br>to supporting development of a<br>Personal Evacuation Plan for<br>any stakeholder who may, as a<br>result of age related cognitive<br>issues have a lack of<br>understanding which would<br>impact on ability to engage in<br>safe evacuation of buildings. |
| Disability                           |               |                       | x            | Policy makes explicit reference<br>to supporting development of a<br>Personal Evacuation Plan for<br>any stakeholder with a<br>disability which would impact<br>on ability to either understand<br>or engage in safe evacuation of<br>buildings.   |
| Gender                               |               |                       | x            |  |
| Gender<br>Reassignment               |               |                       | X            |  |
| Marriage and<br>Civil<br>Partnership |               |                       | x            |  |
| Pregnancy<br>and Maternity           |               |                       | х            |  |
| Race/Ethnicity                       |               |                       | X            | Policy makes explicit reference<br>to supporting development of a<br>Personal Evacuation Plan for<br>any stakeholder with language<br>barriers which would impact on<br>ability to either understand or<br>engage in safe evacuation of<br>buildings.  |
| Religion and or Belief               |               |                       | х            |  |
| Sexual<br>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.

Personal Evacuation Plans (where required) ensure stakeholders are treated as individuals in terms of supporting safety of everyone.

7. Thinking about the key stakeholders you have identified in no. 3, please identify potential inequalities of outcome which may arise in relation to socioeconomic 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 Security

Date: 06/02/2020

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

| Approved by Person Centred Improvement Lead                | Date: 10/2/20 |
|--|---------------|
| Comments   |               |
| Feedback incorporated. No requirement for a 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 SMT 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.

You should ensure the EQIA section of the SBAR Monitoring Form is completed appropriately in order to reflect completion of this assessment.

Please note, as policy and EQIA documents are within the public domain, via the Hospital's website (unless identified by SMT as sensitive information), content should

not include the names of any stakeholders and/or include any information which would identify individuals.