

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: Theft, Fraud & Other Financial Irregularities Policy & Response Plan		
Directorate: Finance & Performance Management		Date: 07/01/20
Designation(s) of author(s): Acting Head of Financial Accounts		
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)		
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 provide detailed direction and help to those staff who find themselves dealing with cases of suspected theft, fraud or bribery.	Sets out a response framework which centres on immediate discussions and agreement with CFS in respect of how each case would be taken forward.	
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. Audit Committee	Positive	Ensures compliance with Health Board Partnership Agreement 2019-22 which forms a key element of the Scottish Government's determination to reduce fraud.

2. Staff	Positive	Provides a clear process to ensure staff are aware of their responsibility to protect the assets of the Board
3. Volunteers	Positive	Provides volunteers with processes and actions required in respect of a suspicion of fraud
4. Patients	Positive	Provides safeguards for patients in the care of the Board through compliance with the policy framework.
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	
Disability	X			Provides safeguards for patients through compliance with the policy framework.
Gender			X	
Gender Reassignment			X	
Marriage and Civil Partnership			X	
Pregnancy and Maternity			X	
Race/Ethnicity			X	
Religion and or Belief			X	
Sexual Orientation			X	

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 process is applied equally to any stakeholder who may be required to act on a suspicion of theft, fraud or other financial irregularity.

Provides clear processes to support stakeholders and ensure compliance with The State Hospital's Standing Financial Instructions, Standing Orders and Operational Procedures.

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

Please discuss with the Service Lead / Director and complete below to indicate this person is in agreement with your findings.

Service Lead / Director Designation: Finance & Performance Management Director

Date: 09/01/2020

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

Approved by: Director of Nursing and AHPs

Date: 13/01/2020

Amended by: Person Centred Improvement Lead

Date: 3/2/20

Comments

13/1/20 - Detailed EQIA required. Please contact Person Centred Improvement Lead for advice / support

3/2/20 – No requirement for detailed EQIA.

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.