

# 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> SP33 Prevent Policy	
<b>Directorate:</b> Security, Estates & Resilience	
<b>Date:</b> 20/06/2021	
<b>Designation(s) of author(s):</b> Head of Risk and Resilience	
<b>Strategy</b> <input type="checkbox"/> <b>Policy</b> <input checked="" type="checkbox"/> <b>Protocol</b> <input type="checkbox"/> <b>Project</b> <input type="checkbox"/> <b>*Other</b> <input type="checkbox"/>	
(*please provide details)	
<b>New</b> <input type="checkbox"/> <b>update to existing policy</b> <input checked="" type="checkbox"/> <b>*replacement</b> <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>	
<p style="text-align: center;"><b>Aim(s) / Outcome(s)</b></p> <p>The purpose of this policy is to provide staff and volunteers with a clear framework to support and enable them to identify and report concerns regarding potential radicalisation.</p>	<p style="text-align: center;"><b>Wider Aim(s)</b></p> <p>The health sector has a non-enforcement approach to PREVENT and focuses on support for vulnerable individuals and healthcare organisations in an effort to stop them becoming terrorists or supporting terrorism.</p> <p>Healthcare professionals will treat people who may be vulnerable in terms of being drawn into violent and non-violent terrorism - which can create an atmosphere conducive to terrorism and can popularise views which terrorists exploit. People with mental health difficulties and other vulnerabilities may be more prone to attempted radicalisation and it is also accepted that healthcare professionals have been engaged in terrorist activity. As such, it is essential for all groups to be considered on a day to day basis with regards to the PREVENT agenda.</p>
<b>2. Please identify the scope of the policy</b>	

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
1. Staff	Positive Negative	Supports management of a safe and secure environment. Limits the risk of harm. Risk of violence / aggression as a result of undetected radicalisation.
2. Carers	Positive Negative	Supports management of a safe and secure environment. Provides reassurance around a commitment to provide a safe and secure environment. Risk of violence / aggression as a result of undetected radicalisation.
3. Patients	Positive	Acknowledges the importance of safety for every patient.
4. External Partners / Visitors	Positive Negative	Provides reassurance around a commitment to provide a safe and secure environment. The State Hospital has no part in clearance process.
5. Volunteers	Positive	Provides reassurance around a commitment to provide a safe and secure environment.
6. Students	Positive Negative	Provides reassurance around a commitment to provide a safe and secure environment. Students are cleared by the sending University. The State Hospital has no part in clearance process.
7. Service Level Agreements	Positive	Provides reassurance around a commitment to provide a safe and secure environment.
8. Honorary Agreements	Positive	Provides reassurance around a commitment to provide a safe and secure environment.

**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.**

<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>			The policy adds a support mechanism for those more susceptible to radicalisation. More patients are coming from custodial settings where opportunity to groom is available especially amongst the younger population.
<b>Disability</b>	<b>X</b>			The policy outlines a mechanism for support for those patients termed as vulnerable. Those with mental health issues. Including Intellectual Disability, are more susceptible to the opportunity to being radicalised and lead in different directions.
<b>Gender</b>			<b>X</b>	
<b>Gender Reassignment</b>			<b>X</b>	
<b>Marriage and Civil Partnership</b>			<b>X</b>	
<b>Pregnancy and Maternity</b>			<b>X</b>	
<b>Race/Ethnicity</b>		<b>X</b>		Race and Ethnicity can be part of the belief process but may not be the single point of focus. Stereotyping due to race or ethnicity should not be the main focus. The policy encourages open and transparent observation of all.

<b>Religion and or Belief</b>		<b>X</b>		Religion and Belief can be part of the extremism process but may not be the single point of focus. Stereotyping due to Religion or Belief should not be the main focus. Open and transparent observation of all is required.
<b>Sexual Orientation</b>			<b>X</b>	

**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.**

A safe and secure environment for all is key. This policy supports a robust approach to safeguarding all and encourages all stakeholders to be vigilant.

Staff cannot judge merely by stereotype. They must to be open to the fact that this can affect or change anyone despite religion, belief or ethnicity.

Stakeholders are reassured that there is a clear process in place to support a need to protect the Hospital and a mechanism to report any concerns.

The policy applies equally to patients, staff, volunteers and others supporting the work of the Hospital, demonstrating a robust process.

**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 Security, Estates and Resilience

**Date:** 07/07/2021

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

<b>Approved by Person Centred Improvement Lead</b>	<b>Date: 07/07/2021</b>
<b>Comments</b> Feedback incorporated. No requirement for detailed EQIA.	
<b>Detailed EQIA required. Please contact Person Centred Improvement Lead for advice / support</b>  <b>Date:     /     /</b>	

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.**