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: SP27 Patient Visitor Policy					
Directorate: Director of Security, Estates and Risk and Resilience Date: 14/10/2022					
Designation(s) of author(s): Clinical Security Liaison Manager					
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) / Outcome(s)	Wider Aim(s)				
To ensure, as far as reasonably practicable, the arrangements are in place to reduce the risk of individuals seeking to gain entry to the Hospits order to undermine patient care and wellbeing safety and security, public confidence and/or to create publicity. To enable patients to maintain relationships with friends, family and significant others throughout their stay in the Hospital.	Hospital (TSH) and the safety of everyone accessing this environment. To encourage and support patients' relationships with visitors				
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				

1. Staff	Positive	Clear guidelines promote consistency and fairness, and empower staff to deal with any security risks. Actively supports safety in respect of governance of restricted / prohibited items.
	Negative	May restrict access to visitors whom staff may feel should be involved in the care of the patient.
2. Patients	Positive	Actively supports safety in respect of governance of restricted / prohibited items. Protects patients from intrusion to privacy and potential media leaks. Encourages visitors to apply to maintain relationships.
	Negative	Restricts access to visitors whom patients may feel should be involved in their care and treatment.
3. Visitors	Positive	Actively supports safety in respect of governance of restricted / prohibited items. Protects visitors from potential media leaks. Actively supports the maintenance of relationships.
	Negative	Restricts access to patients for visitors who feel they should be involved in their care and treatment
4. Scottish Government	Positive	Provides reassurance of the robust approach to safeguarding the safety of everyone involved in the work of the Hospital.
		Acknowledges and enacts organisational responsibilities for the safety of everyone entering the Hospital.

4. Is a collaborative assessment with external partners required? No

Not required due to the nature of the policy.

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			Х	
Disability	X			Protects privacy and acknowledges the need to limit access to patients with a mental health diagnosis. Acknowledges specific needs of disabled visitors, those with sensory impairment, barriers to communication etc.
Gender	х			Highlights the need for rub down searches to be conducted by staff of the same gender as the visitor.
Gender Reassignment			х	
Marriage and Civil Partnership			х	
Pregnancy and Maternity	X			Acknowledges specific needs of pregnant visitors, including the unborn child.
Race/Ethnicity	x			Acknowledges specific needs of visitors for whom English is not the first language.
Religion and or Belief			х	
Sexual 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.

Policy applies to all staff in terms of co-ordinating and hosting visits, supported by Security colleagues with an expertise in this area and whose role it is to ensure the policy is applied consistently to ensure non-discriminatory practice in this respect.

Ensures risks to staff, patient and visitors' safety are limited in relation to preventing the opportunity for visitors to enter the environment with potentially dangerous items which may cause harm,

Patients, staff and visitors reassured of robust processes in place to safeguard their wellbeing.

The policy is applied consistently to all patient visitors, with clearly specified processes which ensure all visitors entering the Hospital are treated the same.

Wider stakeholders reassured of robust safeguarding processes in place.

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 financial impact of travelling to the Hospital, may be an issue due to socio-economic factors. A local system is in place to enable visitors to claim reimbursement of some of the associated costs. Additionally, the Hospital provides i-Pads to visitors unable to visit in person as well as offering video visiting facilities for those whose health needs may impact their ability to visit in person.

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 Risk and Resilience

Date: 08/11/2022

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

Approved by Person Centred Improvement Lead Date: 08/11/2022

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 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 Policy Approval Group as sensitive information), content should not include the names of any stakeholders and/or include any information which would identify individuals.