The State Hospital Equality Impact Assessment (EQIA)

The 'Guidance to Support Completion of the Equality Impact Assessment' should be read prior to completing this template.

Please note, the EQIA should be proportionate to the significance and coverage of the proposed policy, strategy, protocol, project, service or function and should take cognisance of the nature of the environment and patient group.

Screening questions to determine if the document requires a detailed EQIA.

Name of the proposal for assessment: SP12 Keys and Locks Policy								
Directorate: Security								
Date: July 2023								
Designation(s) of author(s): Deputy Physical Security Manager								
What is being assessed:								
Policy 🛛 Strategy 🗆 Protocol 🗆 Project 🗆								
Other 🔲 (please provide details)								
ls it new □ ls it an update ⊠								
ls it a replacement \Box (please advise what is being replaced)								
Is it a replacement \Box (please advise what is being replaced)								
1. What are the main aims and outcomes of what is being assessed and how do these fit								
in with the wider a	ims of the organisati		gislation and national drivers?					
Aim(s) / Outcome(s)			Wider Aim(s)					
To ensure that locks and keys are used correctly			The policy aims to maintain the security of					
and that the correct locks are in the correct location to provide the appropriate level of			the State Hospital and the safety of staff, patients, volunteers and visitors.					
security for that location.								
2. Please identify the scope of what is being assessed:								
Forensic Network wide								
Discipline specific Other (please provide details)								
3. Who are the key stakeholders potentially affected? Will the impact on these groups be positive and/or negative and/or neutral way? Why do you say this?								
Stakeholder(s)	Impact	way:	Rationale					
Staff	Positive	The impact of this policy is to safeguard anyone						
		accessing the Hospital. Additionally, provision is						
		made to ensure that any issues relating to locks and keys result in a process which enables the						
	organisation to learn from and act on intelligence							

		in terms of prevention of reoccurrences which may impact on the safety of all stakeholders. Access is tailored to individual need in relation to roles / input demonstrating a person-centred
		approach. Individual training is undertaken which can be tailored to individual need, which ensures a clear understanding of responsibilities.
		There is clear accountability and governance supporting processes which ensures consistency of approach.
Patients	Negative	Restricts freedom of movement and access to WC's.
Carers / Patient Visitors	Negative	Restricts freedom of movement and access to WC's.
Volunteers	Positive	The impact of this policy is to safeguard anyone accessing the Hospital. Additionally, provision is made to ensure that any issues relating to locks and keys result in a process which enables the organisation to learn from and act on intelligence in terms of prevention of reoccurrences which may impact on the safety of all stakeholders.
		Access is tailored to individual need in relation to roles / input demonstrating a person-centred approach.
		Individual training is undertaken which can be tailored to individual need, which ensures a clear understanding of responsibilities.
		There is clear accountability and governance supporting processes which ensures consistency of approach.
Students	Positive	The impact of this policy is to safeguard anyone accessing the Hospital. Additionally, provision is made to ensure that any issues relating to locks and keys result in a process which enables the organisation to learn from and act on intelligence in terms of prevention of reoccurrences which may impact on the safety of all stakeholders.
		Access is tailored to individual need in relation to roles / input demonstrating a person-centred approach.
		Individual training is undertaken which can be tailored to individual need, which ensures a clear understanding of responsibilities.

				ting process	untability and governance es which ensures consistency		
External / Professional Visitors / Contractors	Positive		Individual training is undertaken which can be tailored to individual need, which ensures a clear understanding of responsibilities. Where individuals have received this training.				
	Negative	Negative		Where contractors have not received this training it can restrict freedom of movement			
General public	Positive	Positive		The policy supports wider security systems which safeguard the general public in terms of restricting access to and from the Hospital.			
4. Is a collaborative (If No, please provide ra	tionale)			-	ired? Yes ⊠ No □ ease identify whether the		
impact will be po support of your o practice in place	sitive, nega lecision. Ple which mitig	itive and/or ease also d jates aspec	neutra escribe ts of th	l on these g any identif e proposed	roups, providing rationale in ied inequality and indicate policy, strategy, protocol, pact or inequality.		
Protected	Positive	Adverse		Neutral	Identified impact/inequality		
Characteristic	(X)	Negativ (X)		(X)	and rationale, including mitigating practice where appropriate		
Age			Х				
Disability		X			The State Hospital is committed to being an inclusive employer, physical disability may impact on ability to readily access and safely use keys within a high secure environment'		
Gender			X				
Gender Reassignment			X				
Marriage and Civil Partnership			X				
Pregnancy and Maternity			X				
Race/Ethnicity			Х				
Religion and or Belief			Х				
the proposal being unlawful discrim	ng assessed ination, hara	d supports t assment an	the organd the organd	identified in anisation to nisation of 1	n no. 3, please explain how eliminate any potential hese groups, promoting		
equality of oppor	tunity and f	ostering go	ood rela	itionships b	etween all stakeholders.		

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

Designation of Service Lead/Director: Director of Security, Estates & Resilience

Date: 18/07/2023

If a **detailed EQIA** is required please contact the Director of Nursing and Operations for information.

Please note: as EQIA documents are within the public domain via the Hospital's website (unless identified as sensitive information) content should not include the names of any stakeholders and/or include any information which would identify individuals.