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- **Appendix 8**: Completed Example of Equality Impact Assessment for a Service
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- **Appendix 10**: Frequently Asked Questions
1. **INTRODUCTION:**

This Toolkit sets out the Trust's framework and guidance for undertaking an Equality Impact Assessment (EIA) and has been approved by the Equality & Diversity Board. This Toolkit is designed to assist Equality and Diversity (E&D) Champions, Managers and Staff who will have to undertake Equality Impact Assessments in the course of their work.

As a Public Authority, the Trust has a legal requirement to promote equality and set out how we plan to meet the 'general' and specific duties' specified in the Public Sector Equality Duty. Public Sector Equality Duties give public bodies legal responsibilities to demonstrate that they are taking action to promote equality in relation to policy making, the delivery of services and employment.

On 1st October 2010, the Government introduced the Equality Act. This Act brings together, harmonises and extends current equality law. It replaces the existing anti-discrimination laws with a single act. It simplifies the law, removing inconsistencies and making it easier for people to understand and comply with it. The Act makes it unlawful to discriminate (treat less favourably) either directly or indirectly because of a protected characteristic in relation to employment; supply of goods and services including education etc.

Public Authorities have a **legal** responsibility to assess their activities, and to set out how they will protect people from discrimination on the basis of the following 'protected characteristics':

- Age
- Disability
- Gender reassignment
- Marriage and civil partnership
- Pregnancy and maternity
- Race
- Religion or belief
- Sex
- Sexual orientation

In addition to these 9 ‘protected characteristics’, Carers and Human Rights will also be considered as part of the Trust's Equality Impact Assessment.

Throughout the document the term ‘protected characteristic’ should be taken to include all the above equality strands.

This Toolkit sets out the steps that will need to be undertaken in order to carry out Equality Impact Assessments on all Trust activities & policies. Further guidance is available from the Trust’s Equality and Diversity Service and Employment Leads (See Section 7).

2. **WHAT IS AN EQUALITY IMPACT ASSESSMENT (EIA)?**

The purpose of an Equality Impact Assessment (EIA) is to improve the work of the Trust by making sure it does not discriminate and that, where possible, promotes equality. It is a way to make sure individuals and teams think carefully about the likely impact of their work on service users and take action to improve activities, where appropriate.

The Equality Impact Assessment (EIA) focuses on systematically assessing and recording the likely equality impact of an activity or policy. There is a focus on assessing the impact on people with protected characteristics. This involves anticipating the consequences of activities on these groups and making sure that, as far as possible, any negative consequences are eliminated or minimised and opportunities for promoting equality are maximised.
The EIA is carried out by completing a form, drawing on existing research, monitoring information, and consultation. Once this has been completed, action plans can be drawn up and any decisions to change the delivery of an activity or policy can be made.

3. **WHY DO WE NEED TO CONDUCT EQUALITY IMPACT ASSESSMENTS (EIA)?**

- Public Authorities have a **legal** responsibility to assess their activities, and to set out how they will monitor any possible negative impact on (age, disability, gender reassignment, marriage and civil partnership, pregnancy and maternity, race, religion or belief, sex and sexual orientation) equality. They also have to consult on proposed activities and train their staff about relevant law and have a positive duty to promote good relationships among communities.

The key purpose of an Equality Impact Assessment is to:
- Promote all aspects of equality.
- Identify whether certain groups are excluded from any of our services.
- Identify any direct or indirect discrimination.
- Assess if there is any adverse (negative) impact on particular groups.
- Promote good relations between people of different equality groups.
- Act as a method to improve services.

Other reasons for Equality Impact Assessments are:
- It increases user/public/staff trust.
- It enhances value for money.
- It informs business plans.
- It increases social inclusion.
- It promotes understanding and sensitivity.

Equality Impact Assessment should not be seen as a separate exercise for Managers to undertake. It should be built in as an integral part of continuous service and performance review. Assessing for equality impact is an aspect of delivering service improvements. For some of the services, equality considerations may already be well integrated into service planning and review. The Equality Impact Assessment Process will simply enable services to document equality deliberations and conclusions and show transparency and accountability to the wider community.

4. **INSPECTING AND ENFORCING BODIES:**

Various bodies have legal remedy against the Trust for non-compliance with equality issues including the Commission for Equalities and Human Rights (CEHR) which in October 2007 became the new all all-embracing body for Equality and Human Rights in the UK, replacing the Disability Rights Commission, Commission for Racial Equality and the Equal Opportunities Commission.

The CEHR aims to secure and implement an effective legislative and regulatory framework for equality and human rights. The CEHR has advisory powers and continues to work with, and advise, public authorities in achieving compliance. However, they also have enforcement powers and can come into an organisation, scrutinise and issue Enforcement Orders.

Furthermore, the Audit Commission and the Care Quality Commission can also scrutinise Trusts and can report their findings to the CEHR. Inspecting frameworks are available to the commissions which they apply when visiting trusts. Equality issues are a key component of the Care Quality Commission’s Core Standards (**See Appendix 1 – Care Quality Commission – Essential Common Quality Standards**).
5. **WHICH ACTIVITIES & POLICIES SHOULD BE ASSESSED?**

All of the Trust’s health care activities and policies and procedures should be assessed as all of our activities are relevant to a varying degree.

An Equality Impact Assessment should be carried out when:

- **Developing:**
  - New Policies
  - New Guidelines
  - New Service / Function
  - Trust Tender
  - New Project

- **Reviewing:**
  - Existing Policies
  - Existing Guidelines
  - Existing Services / Functions

The points outlined in section a) - d) identify the key points that should be considered when undertaking an impact assessment:

a) Are the general duties of the Equality Act relevant to this activity or policy? (activity again meaning all that we do in employment or health care delivery) i.e.
   - Eliminate unlawful discrimination, harassment, victimisation.
   - Advance equality of opportunity between those covered by the Equality Act and those not covered, e.g. between disabled and non-disabled people.
   - Foster good relations between these groups.

b) Does the activity have implications regarding the accessibility of services to the whole community? Are reasonable adjustments to be made in particular circumstances in relation to people with disabilities?

c) Is there any reason to believe that people with protected characteristics could be adversely affected by this activity or policy?

d) Could this activity or policy disproportionately affect sub-groups with protected characteristics, e.g. different racial groups, different impairment groups, etc?

Assessing the relevance (i.e. the potential affect of this activity on people with protected characteristics) and proportionality (i.e. how strong the affect is) are important elements of Impact Assessment and should be on-going, and should be revisited at various stages.

6. **POSITIVE ACTION:**

Some activities are targeted at particular individuals/groups with protected characteristics and these by definition will have a differential impact. The assessment of this impact must take into account whether it is lawful or justifiable. Differential impact can be justified as part of a wider strategy of positive action in relation to particular groups, where the initiative is intended to encourage equality of opportunity for a particular group. Where this is the case it is necessary to justify actions and provide a clear and legal rationale for them.

(See also Appendix 2 - Glossary and Appendix 3 – Legislation).
7. **WHO IS RESPONSIBLE FOR AN EQUALITY IMPACT ASSESSMENT (EIA)?**

The Divisional Manager who holds responsibility for the policy / service is ultimately responsible for ensuring that an Equality Impact Assessment is undertaken and that it is satisfactory quality. However, although ultimately responsible, it is acceptable that Managers may not necessarily be the people undertaking the EIA and that this could also be a staff member who is responsible for that particular area of work.

An Equality Impact Assessment needs to be undertaken by someone with a good understanding of the service. Support and advice, however, is available from the Equality and Diversity Champions, Equality and Diversity Project Service and Employment Leads when required.

Divisional Managers, Divisional Equality and Diversity Champions and Designated Staff will be responsible for completing Equality Impact Assessments.

All Service Managers and Staff who think they may have to undertake an Equality Impact Assessment should be given training before they conduct any stage of an Equality Impact Assessment. Support and training is available from your Divisional Equality & Diversity Champions and Equality & Diversity Project Leads.

The Trust Equality and Diversity Champions support the Equality and Diversity Team to mainstream equality throughout the Trust, through the implementation of equality and diversity initiatives; sharing information about local issues, practice and perspectives; raising awareness of equality within Divisions, and, where appropriate providing advice and support to colleagues on equality issues. The Champions work towards ensuring that the promotion of Equality and Diversity becomes a mainstream activity, and is visible in the Trust’s day-to-day activities.

Each Division has designated Equality and Diversity Champions. For details of your Divisional E&D Champions, please refer to the Trust’s Equality and Diversity Web Pages on the Intranet.

Advice and support is available from the Trust’s Equality and Diversity Service and Employment Leads, and to whom equality reports will be sent to ensure overall monitoring of progress on equality.

<table>
<thead>
<tr>
<th>Equality &amp; Diversity Lead</th>
<th>Advice &amp; Guidance on:</th>
<th>Contact Number</th>
</tr>
</thead>
<tbody>
<tr>
<td>Debbie Jones</td>
<td>Service Issues</td>
<td>01942 822217</td>
</tr>
<tr>
<td>Emma Wood</td>
<td>HR Issues</td>
<td>01942 773863</td>
</tr>
</tbody>
</table>

8. **EQUALITY IMPACT ASSESSMENT PROCESS:**

The Trust’s approach is split into 2 stages:

- An Initial Equality Impact Assessment
- A Full Equality Impact Assessment
9. GATHERING AND USING DATA:

The use of data is vital in any Equality Impact Assessment.

The Initial EIA prompts those undertaking the assessment to undertake an analysis of existing data and consultation for possible evidence of differential impact on different groups. If an initial EIA has been undertaken, this can be built upon, but a more detailed analysis of local, regional and national data may be needed.

It is suggested that the following questions should be kept in mind when analysing data:

- What do I need/want to know?
- Who can help me determine what data is required and where to get this from?
- What data is needed to ensure that all perspectives are taken into account?
- What existing quantitative and qualitative data is available internally and externally?
- What additional information is required?

Various data collection techniques are likely to be used during an EIA, these may include:

- Knowledge
- Review of complaints made
- Surveys
- Evidence from consultations / community consultation
- Performance data / Inspection / audit / assessment
- Existing research
- Monitoring information
10. CONSULTATION EXERCISES WITHIN AN EQUALITY IMPACT ASSESSMENT:

A key element of an Equality Impact Assessment is consultation with people to determine how new or revised services will impact on particular groups of people to help develop any action plans that are needed. The nature and extent of the consultation will depend on the type of service being developed / reviewed and the level of relevance the service will have on different equality groups.

A Full Equality Impact Assessment requires consultation. If your findings have pointed to real concerns in terms of a negative impact on certain equality groups, then you will need to consult more widely in order to understand the impacts further, explore options, draw conclusions and make recommendations (in order to support the Equality Assessment Improvement Plan).

Consultation is a vital tool in learning more about our services and improving patient experience. Consultation should be viewed as the beginning of the process that seeks to encourage and deliver more direct proactive involvement and participation between equality groups and the Trust.

Consultation involves:

- Engaging with representatives with protected characteristics who are likely to be affected by the service / policy.
- Including staff or Trade Unions, or other public bodies and community groups.
- Consultation can be undertaken in the form of face-to-face meetings, focus groups, questionnaires, discussion papers etc.
- Encouraging a culture which regards patient and public involvement as a valued, ongoing process for solving problems and developing shared solutions, which contribute to improved, more accessible health services.

11. KEY POINTS TO REMEMBER WHEN ASSESSING THE POSSIBLE IMPACT OF THE POLICY / GUIDELINES / SERVICE / PROJECT:

- Could the Policy / Service or the way in which it is carried out have a negative impact on people with a particular protected characteristic? For example, does it put a particular group at a disadvantage on the grounds of age, disability, gender reassignment, marriage and civil partnership, pregnancy and maternity, race, religion or belief, sex and sexual orientation equality?

- Could the Policy / Service or the way in which it is carried out have a negative impact on relations between different groups?

- Is the negative impact, if any, unavoidable? Could it be considered to be unlawful discrimination? Can it be justified by the aims and importance of the Policy / Service? Are there other ways in which the Trust's aims can be achieved without causing a negative impact on some diverse groups?

- Could taking particular measures reduce the negative impact?

- Is further research or consultation necessary? Would this research be proportionate to the importance of the Policy / Service? Is it likely to lead to a different outcome?
The following are key points to consider when undertaking your EIA with regard to each of the following Protected Characteristics:

11.1 **AGE:**
- Any discriminatory employment practices including recruitment, personal development, promotion, entitlements and retention.
- Services should be provided, regardless of age, on the basis of clinical need alone.

11.2 **DISABILITY:**
- Reasonable steps that can be taken to accommodate the disabled persons requirements, including:
  - Physical access
  - Format of information
  - Time of interview or consultation event
  - Personal assistance
  - Interpreter
  - Induction loop system
  - Independent living equipment
  - Content of interview of course etc.
- Steps to make reasonable adjustments to service delivery and employment practices to ensure ‘accessible to all’.

11.3 **GENDER REASSIGNMENT:**
The process of transitioning from one gender to another.
- Equal access to recruitment, personal development, promotion and retention.
- Equality of opportunity in relation to health care for individuals irrespective of whether they are male or female.
- The maintenance of confidentiality about an individual’s sexuality.

11.4 **MARRIAGE AND CIVIL PARTNERSHIP:**
- Equal access to recruitment, personal development, promotion and retention.
- Equality of opportunity in relation to health care for individuals irrespective of whether they are single, divorced, separated, living together or married or in a civil partnership.
### 11.5 PREGNANCY AND MATERNITY:
- Equal access to recruitment, personal development, promotion and retention for female employees who are pregnant or on maternity leave.
- Equality of opportunity in relation to health care for women irrespective of whether they are pregnant or on maternity leave.
- Unlawful to treat a woman unfavourably because she is breast feeding.

### 11.6 RACE AND ETHNICITY:
- The provision of an interpreter for people whose first language is not English.
- Written communication and the use of language particularly jargon or colloquialisms etc.
- Respect in terms of religion, belief and culture.

### 11.7 RELIGION / BELIEF AND CULTURE:
- Prayer facilities for service users and staff.
- Dietary requirements.
- Gender of staff when caring for patients of opposite sex.
- Respect for requests from staff to have time off for religious festivals and strategies.
- Respect for dress codes (To view the Trust’s Dress Code, please visit the Trust’s Intranet Website, Policy Library, HR Policies) or click on the following link [Dress_Code_PolicyJan2008.pdf](#)

### 11.8 SEX / GENDER:
- Equal access to recruitment, personal development, promotion and retention.
- Childcare arrangements that do not exclude a candidate from employment and the need for flexible working.
- The provision of single sex facilities, toilets, wards etc.
- Equality of opportunity in relation to health care for individuals irrespective of whether they are male, female, single, divorced, separated, living together or married.

### 11.9 SEXUAL ORIENTATION:
- Recognition and respect of individual’s sexuality.
- Recognition of same sex relationships in respect to consent.
- The maintenance of confidentiality about an individual’s sexuality.
### CARERS
- Reasonable steps that can be taken to accommodate carer’s requirements, such as:
  - Time of meetings or interviews
  - Flexible working
  - Carer’s assessments

### 12. IMPACT ASSESSMENT SUMMARY

<table>
<thead>
<tr>
<th>MAPPING EXERCISE</th>
<th>Identify all formal and informal policies, practices, procedures and criteria to be Equality Impact Assessed.</th>
</tr>
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<tbody>
<tr>
<td>DATA GATHERING – FURTHER EVIDENCE</td>
<td>Identify what data is required to assess impact. Identify what data is available and what further data needs to be gathered.</td>
</tr>
<tr>
<td>ASSESS IMPACT</td>
<td>Determine if the policy / service has any positive impact. Determine if the policy / service has had or is likely to have an adverse (negative) impact on equality on the basis of the information gathered. Determine the nature of the negative (adverse) impact.</td>
</tr>
<tr>
<td>ELIMINATE OR MITIGATE ADVERSE IMPACT</td>
<td>Investigate why an adverse impact has occurred / could occur. Assess changes for adverse impact.</td>
</tr>
<tr>
<td>ACTION PLANNING &amp; REVIEW</td>
<td>Find measures to eliminate or reduce adverse impact. Equality Assessment Improvement Plan to be completed. Review Dates to be Stated. Amend the Policy / Service as appropriate.</td>
</tr>
<tr>
<td>EQUALITY ASSESSMENT IMPROVEMENT PLAN</td>
<td>Ensure that representatives with Protected Characteristics / Patients / Public / Carers / Staff with a range of perspectives are involved. Use a variety of accessible methods for consultation.</td>
</tr>
<tr>
<td>CONSULTATION</td>
<td>All forms to be sent to Debbie Jones, Equality &amp; Diversity Project Lead for Quality Review and Publishing.</td>
</tr>
<tr>
<td>PUBLICATION OF DATA</td>
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13. **GUIDANCE NOTES FOR INITIAL IMPACT ASSESSMENT FORM:**

The Initial Equality Impact Assessment is based mainly on what information you already have / what you already know in relation to the policy / service which may be in the form of gathered data or previous consultation. This stage does however, prompt you to engage in some consultation where you have little information available.

By using the information you have collated, the Initial Equality Impact Assessment will determine if the policy / service could have a negative impact on different Equality Groups (people with protected characteristics). In some cases no negative impact may be identified and in others the possible impact may be so great that a Full EIA may be necessary.

**Please note:** There are two separate Equality Impact Assessment Forms:

- Policy Equality Impact Assessment Form (Policies / Guidelines etc).
- Service Equality Impact Assessment Form (Services / Projects / Functions etc.)

Please ensure that you complete the correct form.

Please note All Sections of the Initial Impact Assessment Form must be completed when undertaking an Equality Impact Assessment of a Service.

Please note All Sections of the Initial Impact Assessment Form need to be completed when undertaking an Equality Impact Assessment of a Policy.

For a Full Explanatory Guide of how to complete an Initial Impact Assessment of a Service, please see Appendix 4.

For a Full Explanatory Guide of how to complete an Initial Impact Assessment of a Policy, please see Appendix 5.

14. **GUIDANCE NOTES FOR FULL IMPACT ASSESSMENT FORM:**

The Full Equality Impact Assessment may be undertaken as a natural progression from the initial Equality Impact Assessment when there are still real concerns about the Policy / Service.

A Full EIA is not different in nature from the Initial EIA Stage, but is a more in-depth analysis backed by formal consultation, further research, data collection and analysis.

**ALL Parts** of this form must be completed when undertaking a Full Equality Impact Assessment of a Service or Policy.

For a Full Explanatory Guide of how to complete an Initial Impact Assessment of a Service / Policy please see Appendix 6.

15. **PUBLICATION OF EQUALITY IMPACT ASSESSMENTS:**

Publishing results of Equality Impact Assessments shows commitment to promoting equality and demonstrates that the Trust is carrying out the specific duties of assessment, involvement, consultation and monitoring.
Wrightington, Wigan and Leigh NHS Foundation Trust will publish the results of all Equality Impact Assessments on the intranet. In the interim, it is the responsibility of the Equality and Diversity Project Leads to publish completed Equality Impact Assessments on the Trust Equality and Diversity Web Pages on the Internet and Intranet.

Copies of all completed Equality Impact Assessments and Improvement Plans therefore should be sent electronically to the Equality and Diversity Service and Employment Project Leads.

These will be checked for quality and will then be published on the Trust Website.

**Equality & Diversity Project Leads:**
Copies of all Equality Impact Assessments to be sent to:

<table>
<thead>
<tr>
<th>Equality Impact Assessment Relating To:</th>
<th>E&amp;D Project Lead</th>
<th>Contact Details</th>
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<tbody>
<tr>
<td>Services</td>
<td>Debbie Jones</td>
<td><a href="mailto:debbie.jones@wwl.nhs.uk">debbie.jones@wwl.nhs.uk</a></td>
</tr>
<tr>
<td>Employment</td>
<td>Emma Wood</td>
<td><a href="mailto:emma.wood@wwl.nhs.uk">emma.wood@wwl.nhs.uk</a></td>
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APPENDIX 1
Care Quality Commission - Core Standards
APPENDIX 1

CARE QUALITY COMMISSION (CQC)

‘ESSENTIAL COMMON QUALITY STANDARDS’ - 2009/10

The CQC will ensure that NHS trusts are complying with the new ‘Essential Common Quality Standards’, which replaced the ‘Standards for Better Health’. These standards have been designed to enable Trusts to ensure services are assessed / categorised as ‘good’ and that they meet the needs of service users.

The Care Quality Commission recognises that services need to encourage respect within services for people’s human rights and for their diversity, and to promote action to reduce inequalities in people’s health and experiences of healthcare. In line with the intention of Standards for Better Health, The Care Quality Commission expects healthcare organisations to interpret and implement the standards in ways which challenge, discrimination, promote equality of access and quality of services, reduce inequalities in health, and which respect and protect human rights.

All NHS organisations are asked to assess their performance against the Government’s 24 Core Standards for Better Health. They then have to declare this information publicly in a ‘Core Standards Declaration’ coordinated by the Care Quality Commission.

Equality, Diversity and Human Rights is a theme through all our efforts to provide a quality service. The Core Standards referred to below make specific reference to Equality and Diversity:

Core Standards 2009/10

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<tr>
<td>C6</td>
<td>Healthcare organisations co-operate with each other and social care organisations to ensure that patients’ individual needs are properly managed.</td>
</tr>
<tr>
<td>C7 (e)</td>
<td>Healthcare organisations challenge discrimination, promote equality and respect human rights.</td>
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<td>C8 (b)</td>
<td>Healthcare organisations support their staff through organisational and personal development programmes which recognise the contribution and value of staff, and address, where appropriate, under-representation of minority groups.</td>
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<tr>
<td>C13 (a)</td>
<td>Healthcare Organisations have systems in place to ensure that staff treat patients, their relatives and carers with dignity and respect.</td>
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<tr>
<td>C14 (b)</td>
<td>Healthcare organisations have systems in place to ensure that patients, their relatives and carers are not discriminated against when complaints are made.</td>
</tr>
<tr>
<td>C15</td>
<td>Where food is provided, healthcare organisations have systems in place to ensure that:</td>
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<td>• Patients are provided with a choice and that it is prepared safely and provides a balanced diet.</td>
</tr>
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<td>• Patients’ individual nutritional, personal and clinical dietary requirements are met, including any necessary help with feeding and access to food 24 hours a day.</td>
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<tr>
<td>C16</td>
<td>Healthcare organisations make information available to patients and the public on their services, provide patients with suitable and accessible information on the care and treatment they receive and, where appropriate, inform patients on what to expect during treatment, care and after-care. To provide suitable and accessible information on the services it provides and in languages and formats relevant to its service population.</td>
</tr>
<tr>
<td>C17</td>
<td>The views of patients, their carers and others are sought and taken into account in designing, planning, delivering and improving healthcare services.</td>
</tr>
<tr>
<td>C18</td>
<td>Healthcare organisations enable all members of the population to access services equally and offer choice in access to services and treatment equitably.</td>
</tr>
<tr>
<td>C22</td>
<td>Healthcare organisations promote, protect and demonstrably improve the health of the community services and narrow health inequalities.</td>
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Developmental Standards:

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<tr>
<td>D2</td>
<td>Patients receive effective care and treatment that takes into account their individual requirements and meet their physical, cultural, spiritual and psychological needs and preferences.</td>
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APPENDIX 2
Glossary
GLOSSARY

A

Activity
This is the expression we have chosen for the purpose of Equality Impact Assessment. It means any Policy, Function, Guidelines, Procedure, Service, Trust Tender or initiative within the Trust in connection with the delivery of healthcare and the employment of our workforce.

Adverse Impact
A Negative Impact on individuals / groups with any of the following protected characteristics:

- Age
- Disability
- Gender reassignment
- Marriage and civil partnership
- Pregnancy and maternity
- Race
- Religion or belief
- Sex
- Sexual orientation

For example: A significant difference in patterns of representation or outcomes between racial groups, with the difference amounting to a detriment for one or more racial groups.

Age
An age group includes people of the same age and people of a particular range of ages. An age group would include “over fifties” or twenty-one year olds. Age equality aims to ensure that in everything we do, we make every effort to eliminate unlawful discrimination and promote equality of opportunity for all age groups.

B

Burden of Proof
The burden of proving discrimination was changed in 2001 by the Burden of Proof Regulations 2001. Once an individual can show that there is an issue of potential discrimination, the burden of proof shifts to the employer to defend the case and show that the reason for difference in treatment is justifiable and not discriminatory. This represents an important change: previously the complainant had to prove that they had been discriminated against, now the employer needs to prove that they did not discriminate.

C

Carers
Carer does not mean care-worker or care staff of any kind who are paid to provide care as part of a contract of employment. By carers we mean people who look after a relative or friend who need support because of age, physical or learning disability or illness, including mental illness. There are nearly 5.7 million carers in Great Britain.

**Parent Carer** - By parent carer we mean a parent of a disabled child. Parents will often see themselves as parents rather than carers, but their child will have additional care needs and may be entitled to additional services.

**Young Carers** - This means carers who are under the age of 18. The person receiving care is often a parent but can be a brother or sister, grandparent or other relative who needs support. There are estimated to be between 20 and 50,000 plus young carers in the UK. [http://www.carers.gov.uk/whatis.htm](http://www.carers.gov.uk/whatis.htm)
Consultation
Asking for views on policies or services from staff, colleagues, service-users, or the general public. Different circumstances call for different types of consultation. For example, consultation includes public meetings, focus groups, surveys and questionnaires, and meeting with experts.

D

Direct Discrimination
Direct discrimination occurs when a person is treated less favourably than another on the grounds of their protected characteristic (i.e. race / age etc.). No justification is possible for this type of discrimination. Example: Failing to offer a man a job because he is gay.

Disabled
The law says that a disabled person is someone with 'a physical or mental impairment which has a substantial and long-term adverse effect on his ability to carry out normal day-to-day activities.' Examples include cancer, diabetes, multiple sclerosis and heart conditions; hearing or sight impairments, or a significant mobility difficulty; and mental health conditions or learning difficulties. However, only the courts can say if a particular individual is defined as disabled under legislation.

Disability can mean different things to different people, and can include:

- people who are disabled for a short time or who are disabled for a long time,
- people who have been disabled since they were born and people who became disabled when they were older
- people who describe themselves as 'disabled' and people who do not describe themselves as disabled.

E

Equality Groups
Now referred to as individuals / groups with 'protected characteristics'. The Equality Act 2010, brings together all of the previous Equality Legislation and sets out on what grounds groups of people are protected. These protected characteristics are:

- Age
- Disability
- Gender Reassignment
- Marital and Civil Partnership
- Maternity and Pregnancy
- Race
- Religion or Belief
- Sex (gender)
- Sexual Orientation

F

Focus Group
Focus group research involves organised discussion with a selected group of individuals, to obtain information about their views and experiences on a particular topic. Focus group interviews are particularly suited for obtaining several perspectives about the topic.

Functions
The full range of activities carried out by a public authority to meet its duties.
Gender Reassignment
This is where a person has proposed, started or completed a process to change his or her sex. A transsexual person also has the protected characteristic of gender reassignment.

General and Specific Duties
All Public Authorities are legally required to have in place, an Equality Scheme which sets out how they plan to meet the ‘general and specific duties’ (legislative requirements) contained in the Equality Act 2010

These duties ensure public authorities have a legal responsibility when carrying out their functions to have ‘due regard’ to the need to:
- Eliminate unlawful discrimination, harassment, victimisation;
- Advance equality of opportunity between those covered by the Equality Act and those not covered, e.g. between disabled and non-disabled people;
- Foster good relations between these groups.

Genuine Occupational Requirement (GOR)
In strictly limited situations, anti-discrimination legislation allows for a job to be restricted to a person of a particular gender/race or ethnic or national origin/disability status/sexual orientation/religion or belief/[age] if it is proportionate to apply a GOR to the job. GOR supersedes the term ‘Genuine Occupational Qualification’.

Harassment
Unwanted conduct that violates people’s dignity or creates an intimidating, hostile, degrading, humiliating or offensive environment.

This definition applies to harassment on grounds of age, disability, gender reassignment, marriage and civil partnership, pregnancy and maternity, race, religion or belief, sex and sexual orientation equality.

Impact Assessment
A thorough and systematic analysis of a policy or service, whether that policy is written or unwritten, formal or informal and irrespective of the scope of that policy.

Indirect Discrimination
The use of an apparently neutral practice, provision or criterion which puts people with a particular protected characteristic at a disadvantage compared with others who do not share that characteristic, and applying the practice, provision or criterion cannot be objectively justified

The concept of ‘provision, criterion or practice’ covers the full breadth of formal and informal practice. Practice may be defined as the customary ways in which an intention or policy is actually carried out. It includes attitudes and behaviour that could amount to discrimination through unwitting prejudice, ignorance, thoughtlessness and racist stereotyping. To find discrimination it will be sufficient to show that a practice is likely to affect the group in question adversely.

Institutional Racism
This is a term that came from the McPherson Inquiry report into the death of Stephen Lawrence and is defined as follows:
“The collective failure of an organisation to provide an appropriate and professional service to people because of their colour, culture, or ethnic origin. It can be seen in or detected in processes, attitudes and behaviour which amount to discrimination through unwitting prejudice, ignorance, thoughtlessness and racial stereotyping which disadvantage minority ethnic people.”

M

Marriage and Civil Partnership
People who are married or have a civil partner are in a marriage or civil partnership. A married man and a woman in a civil partnership both share the protected characteristic of marriage and civil partnership.

Mentorship
Mentoring is a form of human development, where one person invests time, energy and personal know-how to assist another person to grow and to fulfil their true potential, and to increase their capacity for learning.

P

Policies
Policies are the sets of principles or criteria that define the different ways in which an organisation carries out its role or functions and meets its duties. Policies also include formal and informal decisions made in the course of their implementation.

Positive Action
Refers to a range of lawful actions that seek to overcome or minimise disadvantages (e.g. in employment opportunities) that people who share a protected characteristic have experienced, or to meet their different needs.

Examples:
• Providing facilities or services (in training, education or welfare) to meet the particular needs of people from a particular racial group, for example English language classes.
• Targeting job training at racial groups that have been under-represented in particular work during the previous 12 months.

Positive Discrimination
Selecting someone for a job/promotion/training/transfer/etc purely on the basis of their age, disability, gender reassignment, marriage and civil partnership, pregnancy and maternity, race, religion or belief, sex and sexual orientation equality, not on their ability to do the job. This is illegal under anti-discrimination legislation*.

*There is one instance where UK anti-discrimination legislation permits a specific type of positive discrimination - "reasonable adjustment". Under the Equality 2010, employers are required to make ‘reasonable adjustments’ for disabled people - i.e. a change made specifically because of disability.

Pregnancy and Maternity
For women this is when they are pregnant or during maternity, as distinct from their sex, in specified situations outside work. It protects a woman from discrimination because of her current or a previous pregnancy. It also protects her from maternity discrimination, which includes treating her unfavourably because she is breast-feeding, for 26 weeks after giving birth and provides that pregnancy or maternity discrimination as defined cannot be treated as sex discrimination.
**Protected Characteristic**
Previously known as Equality Target Groups / Equality Strands.
The Equality Act 2010, brings together all of the previous Equality Legislation and sets out on what grounds people are protected. These protected characteristics are:
- Age
- Disability
- Gender Reassignment
- Marital and Civil Partnership
- Maternity and Pregnancy
- Race
- Religion or Belief
- Sex (gender)
- Sexual Orientation

**Public Authority**
Organisations and individuals that carry out public functions - this would include government departments, local authorities, health authorities and hospitals, schools, prisons, and police for example.

**Q**

**Qualitative Data**
Information gathered from individuals about their experiences. Qualitative data usually gives less emphasis to statistics.

**Quantitative Data**
Statistical information in the form of numbers normally derived from a population in general or samples of that population. This information is often analysed using descriptive statistics, which consider general profile distributions and trends in the data, or using inferential statistics, which are used to determine significance within relationships of differences in the data.

**R**

**Race**
Race includes colour, nationality and ethnic or national origins. People who have or share characteristics of colour, nationality or ethnic or national origins can be described as belonging to a particular racial group. A racial group can be made up of two or more different racial groups.

**Religion**
This may be philosophical belief, or a religion which has a clear structure and belief system. Denominations or sects within a religion can be considered to be a religion or belief, such as Protestants and Catholics within Christianity. It also includes a lack of religion or belief.

**S**

**Sex**
This means being a man or a woman, and that men share this characteristic with other men, and women with other women.

**Sexual Orientation**
This is a person’s sexual orientation towards:
- people of the same sex as him or her (gay man or a lesbian)
- people of the opposite sex from him or her (the person is heterosexual)
- people of both sexes (the person is bisexual).
Specific Duty
All Public Authorities are legally required to have in place, an Equality Scheme which sets out how they plan to meet the ‘general and specific duties’ (legislative requirements) contained in the Equality Act 2010.

These duties ensure public authorities have a legal responsibility when carrying out their functions to have 'due regard' to the need to:

- Eliminate unlawful discrimination, harassment, victimisation;
- Advance equality of opportunity between those covered by the Equality Act and those not covered, e.g. between disabled and non-disabled people;
- Foster good relations between these groups.

Transsexual / Transgender People
Refers to a person who has the protected characteristic of gender reassignment. This may be a woman who has transitioned or is transitioning to be a man, or a man who has transitioned or is transitioning to be a woman. The law does not require a person to undergo a medical procedure to be recognised as a transsexual.

Victimisation
Treating people less favourably because they have made a complaint or intend to make a complaint about discrimination or harassment or have given evidence or intend to give evidence relating to a complaint about discrimination or harassment.
APPENDIX 3
Legislation
Summary of Key Equality Legislation and Guidance

**Human Rights Act 1998**

The Human Rights Act 1998 incorporates the principles of the European Convention on Human Rights (1953) and Fundamental Freedoms (ECHR) into English domestic law and is directly enforceable against state and public authorities.

The Human Rights Act allows individuals and organisations to go to court or to a tribunal to seek a remedy if they believe that the rights conferred on them by the European Convention have been violated by a public authority. The ECHR gives people three types of rights: Absolute Rights (no exceptions) / Limited Rights and Qualified Rights.

Every public authority - including courts and tribunals – have to comply with the Act (and therefore with the European Convention).

The Act provides service users with a vehicle through which they can ensure that their human rights are fully taken into account when decisions regarding access to treatment and services are taken.

The Act also covers the right to life or quality of life by providing a mechanism for demanding life saving treatment and for non-life saving treatment where denial would have a severe impact upon the quality of that individual's life. Failure to facilitate equal access to health care can also breach The Human Rights Act.

**Equality Act 2010**

On 1st October 2010, the Government introduced the Equality Act. This Act brings together, harmonises and extends current equality law. It replaces the existing anti-discrimination laws with a single act. It simplifies the law, removing inconsistencies and making it easier for people to understand and comply with it.

The Equality Act 2010 consolidates existing legislation on sex, race, disability, sexual orientation, religion or belief and age and brings together over 116 separate pieces of legislation into one Single Act. It strengthens the law to tackle discrimination and inequality. The aim of the Equality Act is to fight discrimination in all its forms and help to make equality a reality for everyone.

**The 9 main pieces of legislation that have merged are:**
- The Equal Pay Act 1970
- The Sex Discrimination Act 1975
- The Race Relations Act 1976
- The Disability Discrimination Act 1976
- The Employment Equality (Religion or Belief) Regulations 2003
- The Employment Equality (Sexual Orientation) Regulations 2003
- The Employment Equality (Age) Regulations 2006
- The Equality Act 2006, Part 2
- The Equality Act (Sexual Orientation) Regulations 2007

**One Single Public Sector Equality Duty.**

All Public Authorities must in the exercise of its functions have due regard to the need to:

- Eliminate discrimination, harassment, victimisation, and any other conduct prohibited under the Act.
- Advance equality of opportunity between persons who share a relevant protected characteristic and those who do not;
- Foster good relations between persons who share a relevant protected characteristic and those who do not.
The ‘Grounds’ upon which discrimination is unlawful has been replaced by the term ‘Protected Characteristics’. Under the Equality Act 2010, it is unlawful to discriminate (treat less favorably) either directly or indirectly because of a protected characteristic in relation to employment; supply of goods and services including education etc.

Protected Characteristics:
- Age
- Disability
- Gender Reassignment
- Marriage and Civil Partnership
- Pregnancy and Maternity
- Race
- Religion or Belief
- Sex
- Sexual Orientation.

The Equality Act 2010 has strengthened and extended the types of discrimination in order to eliminate discrimination, harassment, victimisation.

These include:
- Direct Discrimination
- Indirect Discrimination
- Associative Discrimination
- Perception
- Victimization
- Harassment
- Third Party Harassment

What the Equality Bill Does:
- Introduces a new public sector duty to include reducing socio economic inequalities.
- Using public procurement to improve equality.
- Revising definition of gender reassignment.
- Banning age discrimination outside the work place.
- Requiring gender pay and employment equality publishing.
- New equality duty on public bodies.
- Extending the scope to use positive action to recruit a wider range of people.
- Strengthening the powers of employment tribunals.
- Protecting people from discrimination by association (e.g. carers / partners of transsexual people) from discrimination.
- Offering new mothers stronger protection when breast feeding.
- Banning discrimination in Private Members Clubs.
- Strengthening protection from discrimination for disabled people. Requires “reasonable adjustments” to be made in particular circumstances in relation to people with disabilities.
- Protecting people from dual discrimination (direct discrimination because of a combination of two protected characteristics)
- Providing new protection if you experience discrimination because you are wrongly thought to have a protected characteristic.
APPENDIX 4
Explanatory Guide – Equality Impact Assessment Form (Services)
## STAGE 1 – INITIAL ASSESSMENT (PART 1)

<table>
<thead>
<tr>
<th>Division:</th>
<th>Specify the Division within which the assessment is being undertaken.</th>
<th>Department:</th>
<th>Specify the Department within which the assessment is being undertaken.</th>
</tr>
</thead>
<tbody>
<tr>
<td>Person(s) completing this form:</td>
<td>State the full name(s) of the person(s) completing the assessment. Minimum of 2/3 people required to be involved in the Equality Impact Process.</td>
<td>Tel No:</td>
<td>Specify the Contact Telephone Number of the person(s) completing the form.</td>
</tr>
<tr>
<td>Others involved:</td>
<td>List the full names of all of the people involved with the assessment.</td>
<td>Start date of this assessment:</td>
<td>State the date the form was completed.</td>
</tr>
<tr>
<td>Title of service being assessed:</td>
<td>State the title of the service being assessed.</td>
<td>Service implementation date:</td>
<td>If new service, state the proposed implementation date of the service.</td>
</tr>
<tr>
<td>What is the main purpose (aims / objectives) of this service?</td>
<td>Services should have a clear set of aims and objectives. Summarise and list the overall aims and objectives of the service.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Is the service existing &amp; being reviewed or a new service?</td>
<td>Existing &amp; Being Reviewed</td>
<td>A NEW Service</td>
<td></td>
</tr>
<tr>
<td>Will patients, carers, the public or staff be affected by this service?</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Patients</td>
<td>Yes</td>
<td>No</td>
<td>Indicate Yes or No, by deleting the appropriate box.</td>
</tr>
<tr>
<td>Carers</td>
<td>Yes</td>
<td>No</td>
<td></td>
</tr>
<tr>
<td>Public</td>
<td>Yes</td>
<td>No</td>
<td></td>
</tr>
<tr>
<td>Staff</td>
<td>Yes</td>
<td>No</td>
<td>If staff, how many individuals / Which Groups of Staff are likely to be affected?</td>
</tr>
<tr>
<td></td>
<td></td>
<td>State the approximate number of staff likely to be affected, i.e. All patient Admin Staff, Paediatric Out-Patient Nurses etc.</td>
<td></td>
</tr>
<tr>
<td>Have patients, carers, the public or staff been involved in the development of this service?</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Patients</td>
<td>Yes</td>
<td>No</td>
<td>Indicate Yes or No, by deleting the appropriate box.</td>
</tr>
<tr>
<td>Carers</td>
<td>Yes</td>
<td>No</td>
<td></td>
</tr>
<tr>
<td>Public</td>
<td>Yes</td>
<td>No</td>
<td></td>
</tr>
<tr>
<td>Staff</td>
<td>Yes</td>
<td>No</td>
<td></td>
</tr>
<tr>
<td>If yes, who have you involved and how have they been involved:</td>
<td>Name any groups that you have involved or consulted with during the Equality Impact Assessment. Provide a brief summary of how they have been involved and what they said – positive or negative.</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>For example, asking disabled people about access issues and gender groups about gender specific issues before a service is introduced. Involving Equality Groups in training, policy review, satisfaction surveys etc.</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>Help and advice on how to consult and involve people, and groups who can be consulted is available – Please Refer to Appendix 6.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>What consultation method(s) did you use?</td>
<td>For example: focus groups, face-to-face meetings, questionnaires etc.</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>The purpose of the consultation is to outline to the specific groups how the implementation of the service will affect them and to raise awareness between the groups. State how you will do this. e.g. focus groups, face-to-face meetings, questionnaires etc.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>How are any changes / amendments to the service communicated?</td>
<td>For example: Meetings / Focus / Email etc.</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>State how any changes/amendments to the service will be communicated. State how the service is made aware to all concerned. i.e. Meetings / Focus / Email etc.</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
DATA COLLECTION AND CONSULTATION

1a) Do you currently record any data regarding service users or staff in relation to this service, in relation to gender, race, age, religion, physical disability, hearing impairment / sensory impairment / mental illness / learning disabilities / sexual orientation / gender reassignment / marriage & civil partnership / pregnancy & maternity and carer status?

Such as recruitment monitoring, PAS data, service monitoring, research findings, analysis of complaints, national census, etc.

If Yes, please specify

State what existing data you currently have on people who share a protected characteristic (such as race, age etc.) that you can use in this assessment. For example, recruitment monitoring, national census, service monitoring, demographic data and other statistics, research findings, consultation and survey results, analysis of complaints etc.

1b) What does this data say about each Equality Group?

List what the data tells you in terms of the different Equality Groups (people with protected characteristics, i.e. race / age etc.). You may need to gather and analyse this information to see what it says in terms of trends in service.

1c) Are you aware of any consultation of involvement events that have been held with individuals or organisations from Equality Groups that could have influence on the service being assessed?

Consultation could include formal events such as face to face meetings, focus groups, questionnaires, documentation, use of website or e-mail.

Consider what consultation you have previously undertaken and how you can draw upon this to support your assessment (face to face meetings, focus groups, questionnaires, documentation, use of website or e-mail).

You should then gather and analyse this to see what people have said that might identify any issues.

ACCESS TO SERVICES:

2a) Can your services be accessed directly by users (users are defined as: Staff / Patients not referred by GPs)

Yes
No

Please tick the relevant box

2b) If Answered Yes to Question 2a, Please Specify:

State which users can access the services being assessed.

2c) Would you know prior to arrival if a service user had any of the following needs?

<table>
<thead>
<tr>
<th>Requirements</th>
<th>Yes</th>
<th>No</th>
</tr>
</thead>
<tbody>
<tr>
<td>Interpreter (language)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Interpreter or hearing loop (signer)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Disability (including learning disability / mental illness)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Support Worker</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
2d) What are your standard methods of communicating with service users?

<table>
<thead>
<tr>
<th>Communication Methods</th>
<th>Yes</th>
<th>No</th>
</tr>
</thead>
<tbody>
<tr>
<td>Face to Face Verbal Communication</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Telephone</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Printed Information (e.g. leaflets / posters)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Written Correspondence</td>
<td></td>
<td></td>
</tr>
<tr>
<td>E-mail</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Other (Please specify)</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

2e) If the service user is unable to communicate via your standard method of communication, how would you identify this?

What alternative methods do you have available to identify this?

State how you would identify if a service user was unable to communicate via your standard method of communication, i.e. research / complaint.

Do you have any alternative methods to identify this? If so what are these alternative methods?

2f) Are Patient Letters / Service Documentation / etc. available in the following formats?

<table>
<thead>
<tr>
<th>Service Documentation / Letters etc.</th>
<th>Yes</th>
<th>No</th>
</tr>
</thead>
<tbody>
<tr>
<td>Easy Read Format</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Braille</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Audio Tape / Video Tape</td>
<td></td>
<td></td>
</tr>
<tr>
<td>British Sign Language</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Different Languages</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Statement included, acknowledging interpretation services and availability of other formats are available if requested.</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Are staff aware, how to access language interpreter and translation services?
<table>
<thead>
<tr>
<th>Access Question</th>
<th>Yes</th>
<th>No</th>
<th>Comments</th>
</tr>
</thead>
<tbody>
<tr>
<td>Is the building where the service is located wheelchair accessible?</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Does the reception area have an induction loop system?</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Does the building where the service is located have a unisex wheelchair accessible ‘disabled' toilet?</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Does the building have car parking space reserved for Blue Badge Holders?</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Does the building have any additional facilities for disabled people such as a wheelchair, hoist, specialist bath, etc?</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Does the building / hospital site where the service is provided have any other facilities for people from Equality Groups such as prayer and faith resources?</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Is there anything else that has been undertaken to support equality and diversity, such as guidelines, policies etc?</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
INITIAL ASSESSMENT (PART 2)

EQUALITY IMPACT ASSESSMENT TABLE - NOTES

Do you have any evidence or a belief that the design / implementation of this service, has a positive or negative impact on:

- Age Equality
- Disability Equality
- Gender Reassignment Equality
- Marriage & Civil Partnership Equality
- Pregnancy & Maternity Equality
- Religion or Belief Equality
- Sex Equality
- Sexual Orientation Equality
- Race Equality

QUESTIONS TO CONSIDER when completing the following Equality Impact Assessment Table:

- Are there any barriers which could impact on how different groups might benefit from this service?
- Does this service promote the same choices for different groups as everybody else?
- Could any of the following group’s experience of this service be different?
- Does this service address the needs and potential barriers of these groups?

Please state where you think that the service could have a positive impact on any of the Equality Groups or contribute to promoting equality, equal opportunities or improving relations within Equality Groups.

Examples of Positive Impacts:

- Designated play areas are provided for children.
- Guide Dogs are allowed. Volunteers are available to support patients with visual impairments / other disabilities.
- Patient information can be made available on request in audio, large, print, braille and other languages.

For more examples of positive impacts please see following table:

Please state where you think that the service could have a negative impact on any of the Equality Groups i.e. it could disadvantage them.

Examples of Negative Impacts:

- No induction loop available on unit where service is provided (for patients with hearing impairments).
- No separate bathroom and toilet facilities for males and females.
- All patients treated on same ward, no separate rooms available. Unable to respect a patient’s privacy in respect of their cultural belief.
- Out-Patient Letters do not include a statement on the footer of the letter on how to obtain copies in other formats, i.e. large print, audio and braille.

For more examples of negative impacts please see following table:
### Positive Impacts – Examples

**EXAMPLE ONE:**
A targeted training programme for black and minority ethnic women would have a positive differential impact on black and minority women, compared with its impact on white women or all men. It would not, however, necessarily have a negative impact on white women or men.

**EXAMPLE TWO:**
An organisation identifies that it has low levels of interest in vacancies among some racial groups. To tackle these findings, the organisation decides to send out information about what it does and career opportunities to Community Centres, in various languages and formats. Recruitment and Selection criteria is reviewed to ensure that there are no barriers to appointment for people from different cultural backgrounds.

**EXAMPLE THREE:**
A service is to be delivered from a particular building. The building has undergone a full access audit, and is accessible for people with both physical and sensory disabilities.

**EXAMPLE FOUR:**
An organisation ensures that all service user information can be made available on request in audio, large, print and Braille - This would have a positive impact on service users with hearing and visual impairments.

**EXAMPLE FIVE:**
A targeted health improvement campaign for young men between the ages of 15 to 21 would have a positive differential impact on this age group, compared with its impact on other age groups and women. It would not, however, necessarily have an adverse impact on the other age groups or on women.

### Negative Impacts – Examples

**EXAMPLE ONE:**
An event held in a building with no loop facilities would have a negative impact for attendees with hearing impairments.

**EXAMPLE TWO:**
If an organisation would only accept complaints in writing, this would have a negative impact on some people. This may include people with learning disabilities, people who do not use English as their first language and people whom written communication is not a strong cultural norm such as British Sign Language Users.

**EXAMPLE THREE:**
Information about the service/policy is published and contains jargon and small print. May have a negative impact on visually impaired people, those with learning disabilities and for people whose preferred language is not English.

**EXAMPLE FOUR:**
A Recruitment Drive scheduled during Ramadan (usually mid October to mid November) may have a negative impact on Muslims who fast during the hours of daylight.

**EXAMPLE FIVE:**
Where the choice of venue for a staff social event precludes members of a particular faith or belief group from participating.
## EQUALITY IMPACT ASSESSMENT TABLE – SERVICES

<table>
<thead>
<tr>
<th>Equality Group (Protected Characteristic)</th>
<th>Positive Impact High / Low</th>
<th>Negative Impact High / Low</th>
<th>Reason/Comments for Positive Impact (Why it could benefit any / all of the Equality Groups)</th>
<th>Reason/Comments for Negative Impact (Why it could disadvantage any / all of the Equality Groups)</th>
<th>Resource Implication Yes / No</th>
</tr>
</thead>
<tbody>
<tr>
<td>Men</td>
<td></td>
<td></td>
<td>Does this service provide any positive impact for men? If so what is this?</td>
<td>Does this service provide any negative impact for men? If so what is this?</td>
<td></td>
</tr>
<tr>
<td>Women</td>
<td></td>
<td></td>
<td>Does this service provide any positive impact for women? If so what is this?</td>
<td>Does this service provide any negative impact for women? If so what is this?</td>
<td></td>
</tr>
<tr>
<td>Younger People (17-25) and Children</td>
<td></td>
<td></td>
<td>Does this service provide any positive impact for younger people or children? If so what is this?</td>
<td>Does this service provide any negative impact for younger people or children? If so what is this?</td>
<td></td>
</tr>
<tr>
<td>Older People (60+)</td>
<td></td>
<td></td>
<td>Does this service provide any positive impact for older people? If so what is this?</td>
<td>Does this service provide any negative impact for older people? If so what is this?</td>
<td></td>
</tr>
<tr>
<td>Race or Ethnicity</td>
<td></td>
<td></td>
<td>Does this service provide any positive impact for people from a particular race? If so what is this?</td>
<td>Does this service provide any negative impact for people from a particular race? If so what is this?</td>
<td></td>
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<tr>
<td>Learning Difficulties</td>
<td></td>
<td></td>
<td>Does this service provide any positive impact for people with learning disabilities? If so what is this?</td>
<td>Does this service provide any negative impact for people with learning disabilities? If so what is this?</td>
<td></td>
</tr>
<tr>
<td>Hearing Impairment</td>
<td></td>
<td></td>
<td>Does this service provide any positive impact for people with hearing impairments? If so what is this?</td>
<td>Does this service provide any negative impact for people with hearing impairments? If so what is this?</td>
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<tr>
<td>Visual Impairment</td>
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<td>Does this service provide any positive impact for people with visual impairments? If so what is this?</td>
<td>Does this service provide any negative impact for people with visual impairments? If so what is this?</td>
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<tr>
<td>Physical Disability</td>
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<td></td>
<td>Does this service provide any positive impact for people with physical disabilities? If so what is this?</td>
<td>Does this service provide any negative impact for people with physical disabilities? If so what is this?</td>
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<tr>
<td>Mental Health Need</td>
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<td></td>
<td>Does this service provide any positive impact for people with mental health needs? If so what is this?</td>
<td>Does this service provide any negative impact for people with mental health needs? If so what is this?</td>
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<tr>
<td>Gay/Lesbian/ Bisexual</td>
<td></td>
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<td>Does this service provide any positive impact for people who are gay, lesbian etc.? If so what is this?</td>
<td>Does this service provide any negative impact for people who are gay, lesbian etc.? If so what is this?</td>
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<td>Transgender</td>
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<td></td>
<td>Does this service provide any positive impact for people who are transgender If so what is this?</td>
<td>Does this service provide any negative impact for people who are transgender If so what is this?</td>
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<tr>
<td>Faith Groups (please specify)</td>
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<td>Does this service provide any positive impact for people from different faith groups? If so what is this?</td>
<td>Does this service provide any negative impact for people from different faith groups? If so what is this?</td>
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<tr>
<td>Marriage &amp; Civil Partnership</td>
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<td>Does this service provide any positive impact for people who are married or have a civil partner?</td>
<td>Does this service provide any negative impact for people who are married or have a civil partner?</td>
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<tr>
<td>Pregnancy &amp; Maternity</td>
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<td></td>
<td>Does this service provide any positive impact for women who are pregnant or on maternity leave?</td>
<td>Does this service provide any negative impact for women who are pregnant or on maternity leave?</td>
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<tr>
<td>Carers</td>
<td></td>
<td></td>
<td>Does this service provide any positive impact for people who are carers? If so what is this?</td>
<td>Does this service provide any negative impact for people who are carers? If so what is this?</td>
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<tr>
<td>Other Group (please specify)</td>
<td></td>
<td></td>
<td>Does this service provide any positive impact for any other group of people – if so please specify,</td>
<td>Does this service provide any negative impact for any other group of people – if so please specify,</td>
<td></td>
</tr>
<tr>
<td>Applies to ALL Groups</td>
<td></td>
<td></td>
<td>Does this service provide any positive impact for all of the above Equality Groups? If so what is this?</td>
<td>Does this service provide any negative impact for all of the above Equality Groups? If so what is this?</td>
<td></td>
</tr>
</tbody>
</table>

Please refer to Scoring Table on the following page

Please state whether there is a resource implication for any of the negative impacts identified.
**HOW TO COMPLETE THE HIGH / LOW, POSITIVE / NEGATIVE IMPACTS TABLE:**

<table>
<thead>
<tr>
<th>FACTOR SCORE</th>
<th>HIGH</th>
<th>LOW</th>
<th>NONE</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>POSITIVE</strong></td>
<td><strong>HIGH</strong></td>
<td><strong>LOW</strong></td>
<td><strong>NONE</strong></td>
</tr>
<tr>
<td>Example:</td>
<td>Highly likely to promote equality of opportunity and good relations.</td>
<td>Unlikely to promote equality of opportunity and good relations.</td>
<td>No Impact on Equality Groups.</td>
</tr>
<tr>
<td></td>
<td>A targeted health improvement campaign for young men between the ages of 15-21 would have a positive differential impact on this age group, compared with its impact on other age groups and women. It would not, however, necessarily have a negative impact on the other age groups or on women.</td>
<td>Service users who do not speak the English language, can only obtain translated information on request – Although this information can be accessed, it is not readily available. It is important to take into account however, available data (i.e. Wigan’s population is predominately White British (98.7%). In this instance, this would be categorised as a Low Impact.</td>
<td>The implementation of a new Call Centre would have NO Positive impact on male and female patients.</td>
</tr>
<tr>
<td></td>
<td>A hospital providing an Interpreter Service 24 hours a day, 7 days a week.</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

| **NEGATIVE** | Highly likely to have a Negative Impact (there is a significant evidence of a negative impact or potential for a negative impact). The Policy / Service has consequences for and affects significant numbers of people and/or has the potential to make a significant contribution to promoting equality. | Highly likely to have a Minimal impact - There is anecdotal or little evidence to suggest a negative impact. However, need to consider actions to minimise and review in agreed timescale. | No Impact on Equality Target Groups. |
| Example:     | A Clinic held on the 2nd floor of a building with no lift access would have a High Negative Impact on disabled patients / mums with children (prams) / older patients etc. | Assessment of the service shows that the impact on the intended outcome may have differential impact (different effects on different groups of people), but these do not have a disproportionate outcome and can be reasonably justified – See example below. The service operates mainly within a small unit and affects few people. | The implementation of a new Call Centre would have NO Negative Impact on male and female patients. |

---
INITIAL ASSESSMENT (PART 3)

(a) In relation to each group, are there any areas where you are unsure about the impact and more information is needed?

State whether you are unsure about the impact of any Equality Group and whether you feel more information is required to undertake the assessment.

(b) How are you going to gather this information?

State how you are going to collate this information and from where.

(c) Following completion of the Stage 1 Assessment, is Stage 2 (a Full Assessment) necessary?

Have you identified any issues that you consider could have an adverse (negative) impact on people from the following Equality Groups?

Indicate Yes or No, by deleting the appropriate box.

<table>
<thead>
<tr>
<th></th>
<th>YES</th>
<th>NO</th>
</tr>
</thead>
<tbody>
<tr>
<td>Age (Younger People (17-25) and Children / Older People (60+)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Gender (Men / Women)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Race</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Disability (Learning Difficulties / Hearing Impairment / Visual Impairment / Physical Disability / Mental Illness)</td>
<td>YES</td>
<td>NO</td>
</tr>
<tr>
<td>Religion / Belief</td>
<td>YES</td>
<td>NO</td>
</tr>
<tr>
<td>Sexual Orientation (Gay / Lesbian / Bisexual)</td>
<td>YES</td>
<td>NO</td>
</tr>
<tr>
<td>Gender Re-assignment</td>
<td>YES</td>
<td>NO</td>
</tr>
<tr>
<td>Marriage &amp; Civil Partnership</td>
<td>YES</td>
<td>NO</td>
</tr>
<tr>
<td>Pregnancy &amp; Maternity</td>
<td>YES</td>
<td>NO</td>
</tr>
<tr>
<td>Carer</td>
<td>YES</td>
<td>NO</td>
</tr>
<tr>
<td>Other</td>
<td>YES</td>
<td>NO</td>
</tr>
</tbody>
</table>

(Please delete as appropriate)

Any Other Comments

Please use this box to add any additional comments relevant to the assessment.

IF ‘NO IMPACT’ IS IDENTIFIED Action: No further documentation is required.

IF ‘YES IMPACT’ IS IDENTIFIED Action: Full Equality Impact Assessment Stage 2 Form must be completed.

Initial Assessment Completed By: .................... Date Completed: ............

PLEASE RETURN COMPLETED FORM TO DEBBIE JONES, EQUALITY AND DIVERSITY PROJECT LEAD (SERVICES) debbie.jones@wwl.nhs.uk
## EXPLANATORY GUIDE

### POLICIES - EQUALITY IMPACT ASSESSMENT FORM

**STAGE 1 – INITIAL ASSESSMENT (PART 1)**

<table>
<thead>
<tr>
<th>Division:</th>
<th>Specify the Division within which the assessment is being undertaken.</th>
</tr>
</thead>
<tbody>
<tr>
<td>Department:</td>
<td>Specify the Department within which the assessment is being undertaken.</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Person(s) completing this form:</th>
<th>State the full name(s) of the person(s) completing the assessment. Minimum of 2/3 people required to be involved in the Equality Impact Process.</th>
</tr>
</thead>
<tbody>
<tr>
<td>Tel No:</td>
<td>Specify the Contact Telephone Number of the person(s) completing the form.</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Others involved:</th>
<th>List the full names of all of the people involved with the assessment.</th>
</tr>
</thead>
<tbody>
<tr>
<td>Start date of this assessment:</td>
<td>State the date the form was completed.</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Title of policy being assessed:</th>
<th>State the title of the policy / guidelines etc. being assessed.</th>
</tr>
</thead>
<tbody>
<tr>
<td>Policy implementation date:</td>
<td>If new policy, state the proposed implementation date of the policy.</td>
</tr>
</tbody>
</table>

### What is the main purpose (aims / objectives) of this service?

Policies / Guidelines etc. should have a clear set of aims and objectives. Summarise and list the overall aims and objectives of the policy.

<table>
<thead>
<tr>
<th>Is the policy existing &amp; being reviewed or a new policy? (Tick the relevant box)</th>
<th>Existing &amp; Being Reviewed</th>
<th>A NEW Policy</th>
</tr>
</thead>
</table>

<table>
<thead>
<tr>
<th>Will patients, carers, the public or staff be affected by this policy?</th>
</tr>
</thead>
<tbody>
<tr>
<td>Patients</td>
</tr>
<tr>
<td>Carers</td>
</tr>
<tr>
<td>Public</td>
</tr>
<tr>
<td>Staff</td>
</tr>
<tr>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Have patients, carers, the public or staff been involved in the development of this policy?</th>
</tr>
</thead>
<tbody>
<tr>
<td>Patients</td>
</tr>
<tr>
<td>Carers</td>
</tr>
<tr>
<td>Public</td>
</tr>
<tr>
<td>Staff</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>If yes, who have you involved and how have they been involved:</th>
</tr>
</thead>
<tbody>
<tr>
<td>Name any groups that you have involved or consulted with during the Equality Impact Assessment. Provide a brief summary of how they have been involved and what they said – positive or negative.</td>
</tr>
<tr>
<td>For example, asking disabled people about access issues and gender groups about gender specific issues before a service is introduced. Involving people with protected characteristics in training, policy review, satisfaction surveys etc.</td>
</tr>
<tr>
<td>Help and advice on how to consult and involve people, and groups who can be consulted is available – Please Refer to Appendix 6.</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>What consultation method(s) did you use?</th>
</tr>
</thead>
<tbody>
<tr>
<td>For example: focus groups, face-to-face meetings, questionnaires etc.</td>
</tr>
<tr>
<td>The purpose of the consultation is to outline to the specific groups how the implementation of the policy will affect them and to raise awareness between the groups. State how you will do this. e.g. focus groups, face-to-face meetings, questionnaires etc.</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>How are any changes / amendments to the policy communicated?</th>
</tr>
</thead>
<tbody>
<tr>
<td>For example: Meetings / Focus / Email etc.</td>
</tr>
<tr>
<td>State how any changes/amendments to the policy will be communicated. State how the policy is made aware to all concerned. i.e. Meetings / Focus / Email etc.</td>
</tr>
</tbody>
</table>
INITIAL ASSESSMENT (PART 2)

EQUALITY IMPACT ASSESSMENT TABLE - NOTES

Do you have any evidence or a belief that the design / implementation of this policy / guidelines, has a positive or negative impact on:

- Age Equality
- Disability Equality
- Gender Reassignment Equality
- Marriage & Civil Partnership Equality
- Pregnancy & Maternity Equality
- Religion or Belief Equality
- Sex Equality
- Sexual Orientation Equality
- Race Equality

QUESTIONS TO CONSIDER when completing the following Equality Impact Assessment Table:

- Are there any barriers which could impact on how different groups might benefit from this policy?
- Does this policy promote the same choices for different groups as everybody else?
- Could any of the following group’s experience of this policy be different?
- Does this policy address the needs and potential barriers of these groups?

Please state where you think that the policy could have a positive impact on any of the Equality Groups or contribute to promoting equality, equal opportunities or improving relations within Equality Groups.

Examples of Positive Impacts:
- Within Section 7.8 of the Trust’s Access Policy: Offer of Appointment - Tolerances for religious festivals will be recognised when booking patient’s appointments. (this would have a positive impact on patients from specific faith groups).
- Patient information can be made available on request in audio, large, print and braille (this would have a positive impact on service users with hearing and visual impairments).

For more examples of positive impacts please see following table:

Please state where you think that the service could have a negative impact on any of the Equality Groups i.e. it could disadvantage them.

Examples of Negative Impacts:
- There is no Equality Section within the Policy to ensure that managers / staff apply the policy equitably.
- There is no Accessibility Section, explaining that the Policy can be made available in other formats.
- ‘Patient’ Letters referred to in the Policy are not available in different formats. Letter Template does not include a statement at the footer of the letter on how to access a copy of the letter in other formats, i.e. large print, braille, audio and other languages.

For more examples of negative impacts please see following table:
**EXAMPLES OF POSTIVE AND NEGATIVE IMPACTS**

<table>
<thead>
<tr>
<th>POSTIVE IMPACTS (It could benefit)</th>
<th>NEGATIVE IMPACTS (It could disadvantage)</th>
</tr>
</thead>
</table>
| The policy service may have a positive impact on any of the Equality Groups in relation to:  
  - Promoting equal opportunities and equality.  
  - Improving relations within Equality Target Groups.  
  - Providing ‘target need’ service to highlighted groups. | The policy / service may have an adverse (negative) impact upon any of the Equality Groups (i.e. disadvantage them in any way). |

**Positive Impacts – Examples**

**EXAMPLE ONE:**
A targeted training programme for black and minority ethnic women would have a positive differential impact on black and minority women, compared with its impact upon white women or all men. It would not, however, necessarily have a negative impact on white women or men.

**EXAMPLE TWO:**
An organisation identifies that it has low levels of interest in vacancies among some racial groups. To tackle these findings, the organisation decides to send out information about what it does and career opportunities to Community Centres, in various languages and formats. Recruitment and Selection criteria is reviewed to ensure that there are no barriers to appointment for people from different cultural backgrounds.

**EXAMPLE THREE:**
A service is to be delivered from a particular building. The building has undergone a full access audit, and is accessible for people with both physical and sensory disabilities.

**EXAMPLE FOUR:**
An organisation ensures that all service user information can be made available on request in audio, large, print and Braille - This would have a positive impact on service users with hearing and visual impairments.

**EXAMPLE FIVE:**
A targeted health improvement campaign for young men between the ages of 15 to 21 would have a positive differential impact on this age group, compared with its impact on other age groups and women. It would not, however, necessarily have an adverse impact on the other age groups or on women.

**Negative Impacts – Examples**

**EXAMPLE ONE:**
An event held in a building with no loop facilities would have a negative impact for attendees with hearing impairments.

**EXAMPLE TWO:**
If an organisation would only accept complaints in writing, this would have a negative impact on some people. This may include people with learning disabilities, people who do not use English as their first language and people whom written communication is not a strong cultural norm such as British Sign Language Users.

**EXAMPLE THREE:**
Information about the service/policy is published and contains jargon and small print. May have a negative impact on visually impaired people, those with learning disabilities and for people whose preferred language is not English.

**EXAMPLE FOUR:**
A Recruitment Drive scheduled during Ramadan (usually mid October to mid November) may have a negative impact on Muslims who fast during the hours of daylight.

**EXAMPLE FIVE:**
Where the choice of venue for a staff social event precludes members of a particular faith or belief group from participating.
<table>
<thead>
<tr>
<th>Equality Group</th>
<th>Positive Impact</th>
<th>Negative Impact</th>
<th>Reason/Comments for Positive Impact</th>
<th>Reason/Comments for Negative Impact</th>
<th>Resource Implication</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>High</td>
<td>Low</td>
<td>(Why it could benefit any / all of the Equality Groups)</td>
<td>(Why it could disadvantage any / all of the Equality Groups)</td>
<td>Yes / No</td>
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<td>Equality Group</td>
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<td>Does this policy provide any positive impact for people with learning disabilities? If so what is this?</td>
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<td></td>
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<td>Does this policy provide any positive impact for people who are married or have a civil partner?</td>
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<tr>
<td>Does this policy provide any positive impact for women who are pregnant or on maternity leave?</td>
<td>Does this policy provide any negative impact for women who are pregnant or on maternity leave?</td>
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<tr>
<td>Does this policy provide any positive impact for people who are carers? If so what is this?</td>
<td>Does this policy provide any negative impact for people who are carers? If so what is this?</td>
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<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Does this policy provide any positive impact for all of the above Equality Groups? If so what is this?</td>
<td>Does this policy provide any negative impact for all of the above Equality Groups? If so what is this?</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Please refer to Scoring Table on the following page

Please state whether there is a resource implication for any of the negative impacts identified.
### HOW TO COMPLETE THE HIGH / LOW, POSITIVE / NEGATIVE IMPACTS TABLE:

<table>
<thead>
<tr>
<th>FACTOR SCORE</th>
<th>HIGH</th>
<th>LOW</th>
<th>NONE</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>HIGH</strong></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>POSITIVE</strong></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Example:</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Highly likely to promote equality of opportunity and good relations.</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>A targeted health improvement campaign for young men between the ages of 15-21 would have a positive differential impact on this age group, compared with its impact on other age groups and women. It would not, however, necessarily have a negative impact on the other age groups or on women.</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>A hospital providing an Interpreter Service 24 hours a day, 7 days a week.</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>NEGATIVE</strong></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Example:</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Highly likely to have a Negative Impact (there is a significant evidence of a negative impact or potential for a negative impact).</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>The Policy / Service has consequences for and affects significant numbers of people and/or has the potential to make a significant contribution to promoting equality.</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>A Clinic held on the 2nd floor of a building with no lift access would have a High Negative Impact on disabled patients / mums with children (prams) / older patients etc.</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>LOW</strong></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Unlikely to promote equality of opportunity and good relations.</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Service users who do not speak the English language, can only obtain translated information on request – Although this information can be accessed, it is not readily available. It is important to take into account however, available data (i.e. Wigan’s population is predominately White British (98.7%). In this instance, this would be categorised as a Low Impact</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>NONE</strong></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>No Impact on Equality Groups.</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>The implementation of a new Call Centre would have NO Positive impact on male and female patients.</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>HIGH</strong></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Highly likely to have a Minimal impact - There is anecdotal or little evidence to suggest a negative impact. However, need to consider actions to minimise and review in agreed timescale.</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Assessment of the policy / service shows that the impact on the intended outcome may have differential impact (different effects on different groups of people), but these do not have a disproportionate outcome and can be reasonably justified – See example below.</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>The policy operates mainly within a small unit and affects few people.</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>The implementation of a Dress Code Policy for staff might have an impact on employees from Equality Target Groups with strict cultural beliefs regarding clothing. These however are necessary to ensure patient safety, infection control compliance and should not prevent the implementation of the policy.</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>NEGATIVE</strong></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Highly likely to have a Minimal Impact - There is anecdotal or little evidence to suggest a negative impact. However, need to consider actions to minimise and review in agreed timescale.</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Assessment of the policy / service shows that the impact on the intended outcome may have differential impact (different effects on different groups of people), but these do not have a disproportionate outcome and can be reasonably justified – See example below.</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>The policy operates mainly within a small unit and affects few people.</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>The implementation of a Dress Code Policy for staff might have an impact on employees from Equality Target Groups with strict cultural beliefs regarding clothing. These however are necessary to ensure patient safety, infection control compliance and should not prevent the implementation of the policy.</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
INITIAL ASSESSMENT (PART 3)

(a) In relation to each group, are there any areas where you are unsure about the impact and more information is needed?

State whether you are unsure about the impact of any Equality Group and whether you feel more information is required to undertake the assessment.

(b) How are you going to gather this information?

State how you are going to collate this information and from where.

(c) Following completion of the Stage 1 Assessment, is Stage 2 (a Full Assessment) necessary?

Have you identified any issues that you consider could have an adverse (negative) impact on people from the following Equality Groups?

Indicate Yes or No, by deleting the appropriate box.

<table>
<thead>
<tr>
<th>Group</th>
<th>YES</th>
<th>NO</th>
</tr>
</thead>
<tbody>
<tr>
<td>Age (Younger People (17-25) and Children / Older People (60+))</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Gender (Men / Women)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Race</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Disability (Learning Difficulties / Hearing Impairment / Visual Impairment / Physical Disability / Mental Illness)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Religion / Belief</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Sexual Orientation (Gay / Lesbian / Bisexual)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Gender Re-assignment</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Marriage &amp; Civil Partnership</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Pregnancy &amp; Maternity</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Carer</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Other</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

(Please delete as appropriate)

Any Other Comments

Please use this box to add any additional comments relevant to the assessment.

IF ‘NO IMPACT’ IS IDENTIFIED  Action: No further documentation is required.

IF ‘YES IMPACT’ IS IDENTIFIED  Action: Full Equality Impact Assessment Stage 2 Form must be completed.

Initial Assessment Completed By: ………………. Date Completed: …………

PLEASE RETURN COMPLETED FORM TO DEBBIE JONES, EQUALITY AND DIVERSITY PROJECT LEAD (SERVICES) debbie.jones@wwl.nhs.uk
APPENDIX 6
Consultation – Help & Advice Contacts
CONSULTATION (HELP & ADVICE CONTACTS)

Help and advice on how to consult and involve people, and groups who can be consulted is available from:-

Head of Engagement
Patient & Public Engagement
Royal Albert Edward Infirmary
Wigan Lane
Wigan
WN1 2NN
01942 822193
andrea.arkwright@wwl.nhs.uk

Equality & Diversity Project Lead (Services)
Patient & Public Involvement
Royal Albert Edward Infirmary
Wigan Lane
Wigan
WN1 2NN
01942 822217
debbie.jones@wwl.nhs.uk

Equality & Diversity Project Lead (Employment)
Human Resources Department
Buckingham Row
Brick Kiln Lane
Wigan
WN1
01942 773863
emmma.wood@wwl.nhs.uk
APPENDIX 7
Explanatory Guide – Full Equality Impact Assessments (Services & Policies)
# EXPLANATORY GUIDE (Services & Policies)

## STAGE 2 – FULL ASSESSMENT (PART 1)

<table>
<thead>
<tr>
<th>Title of Service / Policy being assessed:</th>
<th>State the title of the policy / service being assessed.</th>
</tr>
</thead>
<tbody>
<tr>
<td>Implementation date:</td>
<td>State the proposed implementation date.</td>
</tr>
<tr>
<td>Is the service / policy aimed at a specific group of users</td>
<td>State whether the policy / service is aimed at a specific group of users. (for example: men, women, older people etc.)</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Equality Group (Protected Characteristic)</th>
<th>What adverse (negative) impacts were identified in Stage 1 and which groups were affected?</th>
<th>What changes or actions do you recommend to improve the policy / service to eradicate or minimise the negative impacts on the specific groups identified?</th>
</tr>
</thead>
<tbody>
<tr>
<td>Men</td>
<td></td>
<td>Once you have assessed the impact of a policy/service, it is important to identify options and alternatives to reduce or eliminate any negative impact. Options considered could be adapting the policy or service, changing the way in which it is implemented or introducing balancing measures to reduce any negative impact.</td>
</tr>
<tr>
<td>Women</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Younger People (17-25) and Children</td>
<td></td>
<td>When considering each option you should think about how it will reduce any negative impact, how it might impact on other groups and how it might impact on relationships between groups and overall issues around community cohesion.</td>
</tr>
<tr>
<td>Older People (50+)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Race or Ethnicity</td>
<td></td>
<td>You should clearly demonstrate how you have considered various options and the impact of these. You must have a detailed rationale behind decisions and a justification for those alternatives that have not been accepted.</td>
</tr>
<tr>
<td>Learning Difficulties</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Hearing Impairment</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Visual Impairment</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Physical Disability</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Mental Health Need</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Gay/Lesbian/Bisexual</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Transgender</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Faith Groups (please specify)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Marriage &amp; Civil Partnership</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Pregnancy &amp; Maternity</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Carers</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Other Group (please specify)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Applies to ALL Groups</td>
<td></td>
<td></td>
</tr>
<tr>
<td>How do you intend to communicate or consult in relation to the actions and proposals for improvements?</td>
<td>A Full Equality Impact assessment requires consultation. Consultation must be carried out with the relevant departments, working groups, public bodies, voluntary etc. with an interest in the matter. In this section you must clearly outline who you have and who you intend to consult with.</td>
<td></td>
</tr>
<tr>
<td>---</td>
<td>---</td>
<td></td>
</tr>
<tr>
<td>How will actions and proposals be monitored to ensure their success? Will the results of the monitoring be reported to a committee? Please state.</td>
<td>State how actions and proposals will be monitored to ensure success. If the results of the assessment are to be reported to a committee, please state the name of the committee (i.e. Service Improvement Team).</td>
<td></td>
</tr>
<tr>
<td>When is the date of the next review?</td>
<td>State the date of the next review.</td>
<td></td>
</tr>
</tbody>
</table>
| Who will be responsible for monitoring these actions? | Name:  
Job Title:  
Contact Tel.No |

**Date Assessment Completed:** ........................................

**Assessment Completed By:** ........................................

**Stage 3 - Equality Assessment Improvement Plan, must now be completed and reviewed within your Divisions. Please submit a copy with your completed Equality Impact Assessment Form.**
## STAGE 3 – EQUALITY ASSESSMENT IMPROVEMENT PLAN

<table>
<thead>
<tr>
<th>Title of service / policy being assessed:</th>
<th>State the Title of the policy / service being assessed.</th>
</tr>
</thead>
<tbody>
<tr>
<td>Date Equality Impact Assessment Completed:</td>
<td>State the date the Equality Impact Assessment was completed.</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Equality Group Affected</th>
<th>Area(s) of Negative Impact</th>
<th>Assessment Recommendations</th>
<th>Action</th>
<th>Lead</th>
<th>Time-Scale</th>
</tr>
</thead>
<tbody>
<tr>
<td>State each Equality Group Affected individually.</td>
<td>Summarise here your main conclusions from the assessment, clearly identifying areas of negative impact.</td>
<td>Taking in to account your conclusions and that of any consultation, identify what changes or practical measures would reduce negative impact on Equality Groups. For example: Changes in: communication methods, language support, disability facilities, assessment tools etc. Increased awareness amongst staff, training requirements etc.</td>
<td>Taking in to account your conclusions and that of any consultation, identify what actions you are going to take. How does each action reinforce or challenge discrimination and promote equality of opportunity.</td>
<td>State the Name of the Person who will be leading on this action.</td>
<td>State Date by which action should be undertaken.</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Date Due for Review:</th>
<th>State Review Date.</th>
</tr>
</thead>
<tbody>
<tr>
<td>Added to file for Publishing of Results:</td>
<td>State the date forwarded to Debbie Jones, Equality and Diversity Project Lead.</td>
</tr>
<tr>
<td>Resource Implications:</td>
<td>Provide comments on any resource implications.</td>
</tr>
<tr>
<td>Person Responsible for Arranging Review:</td>
<td>State the name of the person(s) who will be responsible for arranging / monitoring the review.</td>
</tr>
</tbody>
</table>
APPENDIX 8
Example of Completed Equality Impact Assessment (Services)

TO FOLLOW
APPENDIX 9
Example of Completed Equality Impact Assessment (Policies)

TO FOLLOW
1. **WHAT IS EQUALITY?**

   Equality is about ensuring that the individual requirements of different people and different communities are taken into account.

   It is important to note that equality does not simply mean treating everyone the same, but recognising and respecting each others differences. Tackling discrimination in all its forms.

   For example: providing a service for patients only on a Friday, may adversely (negatively) affect religious groups.

2. **WHAT IS DIVERSITY?**

   The Term ‘Diversity’ is used to describe the uniqueness of each individual in the population. It refers to all of the characteristics that make individuals different from each other.

   Diversity is the many distinct characteristics that staff, patients, carers and families bring to our organisation.

   These distinct characteristics bring variations of thinking, communication styles, skills and personalities that are respected and valued.

3. **WHAT IS AN EQUALITY IMPACT ASSESSMENT (EIA)?**

   An Equality Impact Assessment (EIA) is a mechanism that supports managers to analyse all of our work (this could be a policy, procedure, project, service or strategy) in relation to how it impacts on various groups of people within the community.

   The processes involved in undertaking an Equality Impact Assessment, should not be looked on as an end in itself. The overall aim of the assessment is to promote equality of opportunity and thus the outcomes and improvements from the assessment are central. Good Equality Impact assessment will lead to actions which can either be implemented immediately or will need to be carried forward – unless there is evidence that there is no negative impact on any groups.

   **An Equality Impact Assessment is a tool, not a burden! Carrying out an assessment should help services understand how to deliver best practice.**
4. **WHERE DO EIAS COME FROM?**

Public Authorities have a **legal** responsibility to assess their activities (undertake Equality Impact assessments) under Equality Legislation.

The Equality Act 2010 consolidates existing legislation on sex, race, disability, sexual orientation, religion or belief and age and brings together over 116 separate pieces of legislation into one Single Act. It strengthens the law to tackle discrimination and inequality. The 9 main pieces of legislation that have merged under the Act are:

- The Equal Pay Act 1970
- The Sex Discrimination Act 1975
- The Race Relations Act 1976
- The Disability Discrimination Act 1976
- The Employment Equality (Religion or Belief) Regulations 2003
- The Employment Equality (Sexual Orientation) Regulations 2003
- The Employment Equality (Age) Regulations 2006
- The Equality Act 2006, Part 2
- The Equality Act (Sexual Orientation) Regulations 2007

5. **WHAT ARE THE AIMS OF AN EQUALITY IMPACT ASSESSMENT?**

To assess how a particular policy or service will affect different groups of people, based on the following protected characteristics:

- Age
- Disability
- Gender Reassignment
- Marriage & Civil Partnership
- Pregnancy & Maternity
- Religion or Belief
- Sex
- Sexual Orientation
- Race
- Carer Status

To identify any negative impact.

To identify alternative approaches, which might mitigate any negative impact and help bring about greater equality in our services.

To help manage and improve our relations between different groups of people.

To help to improve our services and the overall patient experience.
6. **WHAT ARE PROTECTED CHARACTERISTICS / EQUALITY GROUPS?**

By *Equality Groups* we mean groups of people who may experience particular forms of discrimination, whether or not the discrimination is intentional.

The government aims to protect these groups from discrimination by targeting them with equality legislation.

The Equality 2010 provides individuals / groups of people with protection from discrimination on the basis of a range of *protected characteristics*. These are:

- Age
- Disability
- Gender reassignment
- Marriage and civil partnership
- Pregnancy and maternity
- Race
- Religion or belief
- Sex
- Sexual orientation

In addition to these 9 ‘protected characteristics’, Carers and Human Rights will also be considered as part of the Trust’s Equality Impact Assessment.

7. **WHEN SHOULD I CARRY OUT AN EQUALITY IMPACT ASSESSMENT?**

An Equality Impact Assessment should be carried out when:

- Developing:
  - New Policy
  - New Guidelines
  - New Service / Function
  - Trust Tender
  - New Project

- Reviewing:
  - Existing Policies
  - Existing Guidelines
  - Existing Services / Functions

8. **DO I NEED TO ASSESS BOTH EXISTING AND NEW SERVICES AND POLICIES?**

**YES** – All current policies and services – both new and existing must be monitored and regularly reviewed for relevance and checked for their impact.

However, when deciding what existing policies or services to review, Divisions should take a proportionate approach – assessing the equalities impact of the policy should be proportionate to the likely impact of the policy itself. Issues for consideration should include the number of people likely to be affected, the financial and human resources involved, the extent of the proposed change and the wider public policy implications.
9. WHAT MATERIALS ARE REQUIRED TO UNDERTAKE AN EQUALITY IMPACT ASSESSMENT?
As much evidence as possible. This can include:-

- Knowledge
- Complaints
- Surveys
- Evidence from consultation
- Performance Data
- Inspection / audit / assessment
- Anecdotal evidence
- Existing research
- Monitoring information
- Community consultation

10. WHAT DO I NEED TO CONSIDER WHEN COMPLETING AN EQUALITY IMPACT ASSESSMENT?
- Whether there is a negative impact on an Equality Group. You need to question whether the policy / service puts an Equality Group at a disadvantage.
- Whether the adverse impact, if any, can be avoided?
- Is there a need for more research / consultation in order to ensure that the policy / service can be deemed non-discriminatory?

11. HOW DO I DO AN EQUALITY IMPACT ASSESSMENT?
You need to complete the Equality Impact Assessment Template. There are two Equality Impact Assessment Templates. One for policies and one for services. There are a number of supporting documents that can assist you in carrying out an Impact Assessment, including Equality Impact Assessment Toolkit – Please refer to the Trust’s E&D Web Pages on the Trust Intranet.

12. HOW DO I KNOW WHICH SERVICES TO ASSESS IN MY DEPARTMENT / WARD / AREA?
- Divide your Department / Ward / Area into functions / services.
- Prioritise your functions / services to be Equality Impact Assessed.
- Apply the Equality Impact Assessment Pro-Forma to each function / service separately.
- Where you have identified a negative impact, you must complete the Full Assessment.
- When you have completed the Full Equality Impact Assessment, you should develop an action plan to eliminate or reduce the discrimination.
13. **HOW DO I PRIORITISE WHICH SERVICES / POLICIES NEED TO BE ASSESSED?**

To help you decide how to prioritise which services / policies to Equality Impact Assess first, the following questions are offered as a prompt – please note however these are not definitive. It is important that you use your own knowledge and experience to identify priorities.

- What causes us the most problems? What do people complain about?
- Does a particular service work well? Are we delivering against its core principles? If it doesn’t always feel right, what areas do we need to improve?
- Do service users value a particular service? If not, why not? Who is not getting involved or playing their full part?
- Do we know how people feel about a particular service? Who do we need to talk to? What do we need to find out? How can we do that?
- What would make everyone’s lives a lot easier around a particular service? Why are we not doing it? Are there opportunities that we are missing to be even better.
- Are the right decisions being made about a service? If we have got it wrong in the past, what was the reason for this? Do we need to understand more?
- What new services / policies have you got planned? What are the big projects / issues you need to deal with? Are we ready for this? What other work might we do to prepare?
- What are our goals for a particular service? Are we heading in the right direction? Have we got evidence of all the good work going on?

14. **WHERE CAN I FIND AN EQUALITY IMPACT ASSESSMENT TEMPLATE?**

The EIA templates are published on the Trust’s Intranet Website.  
www.wwl.nhs.uk/Equality/impact_assessments.asp

15. **WHAT ABOUT MAJOR DECISIONS OR URGENT POLICY CHANGES?**

There will be times when it is not practical to delay making a decision or adapting a policy so that an EIA can be completed, for example, Medicines Management. Therefore in such cases, a plan should be agreed for how and when the policy will be assessed, usually as part of the arrangements for monitoring and review.

It is important to note, EIAs are intended to aid good decision making, not to prevent decisions being made.
16. **WHAT ABOUT JOINT ARRANGEMENTS & PARTNERSHIP WORKING?**

When working on joint policies, it is the Policy / Service Lead that should be ultimately responsible for the Equality impact Assessment. However, even in partnership arrangements we must be able to demonstrate we as an organisation are fulfilling our duties, even where we are not the lead organisation.

17. **WHAT NEEDS TO BE DONE WHEN AN EIA IS COMPLETED AND NO ADVERSE IMPACT IS FOUND?**

The policy / service can be introduced or continued, BUT ensure that arrangements are in place to monitor and review its impact in the future.

18. **WHAT DO I DO WITH MY COMPLETED EQUALITY IMPACT ASSESSMENT?**

Copies of all completed Equality Impact Assessments and Improvement Plans should be sent electronically (via e-mail) to Debbie Jones, Equality & Diversity Project Manager. These will be checked for quality and will then be published on the Trust’s Website.

Please retain a paper / electronic copy of your completed EIA Template and Improvement Plan for monitoring and audit purposes.

19. **WHO CAN I SPEAK TO IF I AM UNSURE ABOUT SOMETHING?**

The Trust’s Equality and Diversity Project Leads are:

<table>
<thead>
<tr>
<th>Service Issues</th>
<th>Debbie Jones</th>
<th>01942 822217</th>
</tr>
</thead>
<tbody>
<tr>
<td>HR Issues</td>
<td>Emma Wood</td>
<td>01942 773863</td>
</tr>
</tbody>
</table>

They are happy to help with any queries you may have regarding EIAs.

The Trust has Divisional Equality and Diversity Champions for each Division. For details of your Divisional Champions, please refer to the Trust’s E&D Web Pages on the Trust Intranet.

20. **IS THERE A MINIMUM NUMBER IF PEOPLE WHO NEED TO BE INVOLVED IN THE IMPACT ASSESSMENT PROCESS?**

It is recommended that a minimum of 2/3 people are involved in the Equality Impact Assessment Process.