

## Equality Impact Assessment (EIA) Stage 1

<b>Policy or Service being Assessed:</b> <ul style="list-style-type: none"> <li>Clinical Risk Assessment and Management Policy (Clinical folder)</li> </ul>		
<b>Lead Person:</b> <ul style="list-style-type: none"> <li>Executive Director of Medicine</li> </ul>		
<b>Person(s) responsible for carrying out the assessment (if not the Lead Person).</b> <ul style="list-style-type: none"> <li>Executive Director of Medicine</li> <li>Head of PPI/Equality</li> </ul>		
<b>1. Is this a new or existing policy or service?</b>	<b>New</b> ✓	<b>Existing:</b>
<b>2. What is the expected outcome of the service / policy? (E.g. aims, objectives and purposes of the service / policy, standards for practice).</b> <p>The assessment and management of risk is an essential element of the work undertaken within mental health and learning disability services, ensuring that we work effectively with individuals to manage and, where possible, reduce the risk of harm.</p> <p>This is further supported by a patient pledge within the NHS Constitution; Patient Pledge: <i>“The NHS commits to work in partnership with you, your family, carers and representatives.”</i></p>		
<b>3. Does this policy / service link to others? If yes please state link below:</b> <p><b>Yes: <u>ASSOCIATED POLICY AND PROCEDURAL DOCUMENTATION</u></b></p> <p>This policy is supported by a range of supporting policies as follows:</p> <ul style="list-style-type: none"> <li>Clinical Supervision Policy</li> <li>Trust protocol for the safeguarding of vulnerable adults</li> <li>Trust protocol for safeguarding Children</li> <li>Patients missing from Hospital/Absent without leave policy</li> <li>Policy and procedure for the safe and supportive observation of patients at risk</li> <li>Medical/Nursing policy for the management of violence and aggression using</li> </ul>		

Rapid Tranquillisation

- Observation of patient policy
- Physical assessment and examination overarching policy.

#### **4. Who is intended to benefit from the policy / service? In what way?**

##### **Patients:**

This policy outlines the process by which North Staffordshire Combined Healthcare Trust (the Trust) will assess and manage clinical risk posed by **patients on others or themselves**.

Undertaking to assess and manage risk also requires the taking of action, including multi-agency work, which is designed to protect potential victims from harm or to protect the individual from self harm.

- **support clinicians** in the assessment and management of clinical risk
- **ensure that the Trust** has an agreed process for clinical risk assessment and management
- **ensure that the Trust** can demonstrate that it complies with all national and commissioner guidance on clinical risk management.

#### **5. How is the policy / service to be put into practice? Who is responsible?**

Section 6 of the policy (pages 8 – 10) clearly details the roles and responsibilities for individual staff roles, groups and divisions. This includes:

- Chief Executive
- Trust Board
- Quality and Governance Committee
- Executive Lead
- Policy Lead
- Clinical Directors/Senior Nurses/Matrons
- Line Managers
- All Staff

#### **6. How and where is information about the policy / service publicised? Example on the Trust intra net, and the internet/portal.**

The Policy will be accessible via the Trust's intra net and Portal.

#### **7. What regular consultation do you carry out with different communities and groups re the policy / service?**

A copy of this policy will be filed on the intra-net in the Clinical policy folder. The policy has been consulted on with the following groups:

<ul style="list-style-type: none"> <li>• Period of 12 week consultation via the Trust intra net.</li> <li>• Review at the Trusts Quality and Information Governance Committee</li> </ul>		
<b>8. Are there concerns that the policy / service could have an adverse impact because of:</b>	<b>Yes:</b>	<b>No:</b>
<b>Age</b>	<b>Yes</b>	<b>No</b> ✓
If YES to the above please state evidence (either presumed or otherwise)		
<b>Disability</b>	<b>Yes</b>	<b>No</b>
If YES to the above please state evidence (either presumed or otherwise)		✓
<b>Gender</b>		
If YES to the above please state evidence (either presumed or otherwise)		✓
<b>Ethnicity</b>	<b>Yes</b>	<b>No</b>
If YES to the above please state evidence (either presumed or otherwise)		✓
<b>Sexual Orientation</b>	<b>Yes</b>	<b>No</b>
If YES to the above please state evidence (either presumed or otherwise)		✓
<b>Religion / Belief</b>	<b>Yes</b>	<b>No</b>
If YES to one or more of the above please state evidence (either presumed or otherwise) do you have for this?		✓
<b>Do the differences amount to discrimination and the potential for adverse impact in this policy? NO</b>		
<b>9. If YES could it still be justifiable e.g. on grounds of promoting equality of opportunity for one group? Or any other reason</b> i.e. Indirect discrimination can be justifiable sometimes when a service is being provided for a particular target group e.g. Asian women's breast screening, Gay men's sexual health clinic, gender specific services /environments	<b>Yes:</b> N/A	<b>No:</b>
<b>If YES, please give reasons:</b>	<b>Yes</b>	<b>No</b>

<p><b>10. Do you think this policy / service specifically contributes to promoting equality and diversity in North Staffordshire? If so, in what way? Please note any examples of good practice</b></p> <p>No, the policy provides a framework of detailed guidance for Trust staff to follow in respect of effective risk assessment and management.</p>	
<p><b>11. Should there now be a Full Impact Assessment and if so, what are the reasons for this?</b></p>	<p>No, this is not required.</p>
<p><b>12. Date on which full assessment to be completed by.</b></p>	<p><b>N/A</b></p>

**Signed (Lead Assessors) ...Val Stronach**

**Date: 14 September 2010**

**Review Date:** This policy will be reviewed every 3 years or sooner should new legislation/guidance be released. The equality Impact assessment will be reviewed in line with policy review.

