

**Equality Impact Assessment (EIA) Stage 1**

<p><b>Policy or service being assessed:</b>  <b>1.46 Falls Policy</b></p>
<p><b>Lead Person:</b>  <b>Josey Povey</b></p>
<p><b>Person(s) responsible for carrying out the assessment (if not the Lead Person).</b></p>

<p><b>1. Is this a new or existing policy or service?</b></p>	<p>Existing policy</p>
<p><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>	<ul style="list-style-type: none"> <li>• All staff are aware of their responsibilities relating to Falls prevention and management.</li> <li>• Falls are managed safely and appropriately via appropriate risk assessment, that staff, service users and others are protected from accidents and that a safe environment is facilitated in which high quality clinical care can be provided.</li> </ul>
<p><b>3. Does this policy / service link to others? If yes please state link below:</b></p>	<ul style="list-style-type: none"> <li>• 5.04 manual handling policy</li> <li>• 5.33 slips, trips and falls policy</li> <li>• 1.62 physical assessment and examination policy</li> <li>• r02 guidelines for the safe use of bedrails rails protocol</li> <li>• 5.01 incident reporting policy</li> </ul>
<p><b>4. Who is intended to benefit from the policy / service? In what way?</b></p>	<p>This policy gives an overview of the importance of safe &amp; timely response in the management of Falls. It particularly is of relevance to patients and service users who are at higher risk of falls, such as those who are elderly or who have conditions or take medications which make them more susceptible to falls.</p>
<p><b>5. How is the policy / service to be put into practice? Who is responsible?</b></p>	<p>The policy clearly identifies and provides a detailed framework of roles and responsibilities to support the application of the policy.</p>

	<p>The policy actively supports the safe care planning and delivery for all patients and service users, but specifically older patients (&gt;65) and patients with disabilities which mean they are at heightened risk of falls and injury through falls. The policy covers falls prevention (management of the risks associated with slips, trips and falls) and response and review following a slip, trip or fall incident.</p>	
<p><b>6. How and where is information about the policy / service publicised? Example on the Trust Staff Information desk.</b></p>	<p>The policy will be accessible via the Trust intranet (SID)</p>	
<p><b>7. What regular consultation do you carry out with different communities and groups re the policy / service?</b></p>	<p>A copy of the policy is available on SID, it is reviewed by the Trust Falls Implementation Group which has representatives from all Directorates.</p>	
<p><b>8. Are there concerns that the policy / service could have an adverse impact because of:</b></p>	<p><u>Yes</u></p>	<p><u>No</u></p>
<p><b>Age</b></p>		<p>√</p>
<p>If YES to the above please state evidence (either presumed or otherwise)</p>	<p>Policy actively supports the safe care planning and delivery for older patients (&gt;65) who are at heightened risk of falls and injury through falls.</p>	
<p><b>Disability</b></p>		<p>√</p>
<p>If YES to the above please state evidence (either presumed or otherwise)</p>	<p>Policy actively supports the safe care planning and delivery for service users who are at risk of falls or at risk of serious injury from falls. Also includes patients/ service users who take medicines that may cause a higher propensity to falls.</p>	
<p><b>Gender</b></p>		<p>√</p>
<p>If YES to the above please state evidence (either presumed or otherwise)</p>		
<p><b>Ethnicity</b></p>		<p>√</p>
<p>If YES to the above please state evidence (either presumed or otherwise)</p>	<p>Patients/service users for whom English is not the primary language will require additional support to ensure that they receive information</p>	

	and support in an accessible format so that they are able to contribute fully to their falls risk assessment and management.	
<b>Sexual Orientation</b>		√
If YES to the above please state evidence (either presumed or otherwise)		
<b>Religion / Belief</b>		√
If YES to one or more of the above please state evidence (either presumed or otherwise) do you have for this?		
<b>9. Do the differences amount to discrimination and the potential for adverse impact in this policy?</b>		√
<b>10. 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>If YES, please give reasons:</b>		
<b>11. 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>	Yes, this policy details standards and framework for staff to work within in line with benchmarking and national standards, preventing and appropriately responding to slips, trips and falls. This is particularly important for patients and service users from some 'protected characteristic' groups eg the elderly and those with certain disabilities or taking medications that increase propensity to falls.	
<b>12. What approaches will you take to get feedback on your assessment?</b>	Review by Diversity and Inclusion Lead	

<b>13. Will the assessment link to other mainstream service planning or review processes?</b>	Links with Trust incident monitoring process
<b>14. Should there now be a Full Impact Assessment and if so, what are the reasons for this?</b>	Not required
<b>15. Date on which full assessment to be completed by.</b>	Not required
<b>16. What further data or information do you need to carry out a full assessment?</b>	Not required
<b>17. Do you need any additional assistance to help you carry out the full assessment?</b>	Not required
<b>18. Date of assessment:</b>	25.07.16
<b>Other points to consider at review</b>	/

### **GETTING FEEDBACK AND ADVICE**

Feedback should now be sought from the Diversity and Inclusion Team.

<b>What feedback / guidance was provided?</b>
<ul style="list-style-type: none"> <li>• Additional consideration of positive impact in relation to older patients (&gt;65 years of age) and on those with disabilities which may increase the risk of slips, trips and falls or increase the risk of serious harm following a slip, trip or fall.</li> <li>• Need to ensure service users with special communication needs (eg sensory or cognitive impairment; non-English speaker etc) receive information in an accessible format and are able to contribute fully to the planning of their falls risk assessment and management.</li> </ul>

**Signed (Lead Assessor)**



**Lesley Faux, Diversity & Inclusion Lead**

**Date**

**26/08/16**

**COMPLETED FORMS – Please forward to Diversity and Inclusion Team via email: [Diversity@northstaffs.nhs.uk](mailto:Diversity@northstaffs.nhs.uk)**