

# Dudley Group of Hospitals: Equality Impact Assessment

## Step 2 - Screening Tool

Please complete the following when screening your policy or service for potential impact on equality groups.

<b>1. Name of lead</b>	Ann Marsh
Contact number & email	<a href="mailto:Ann.Marsh@dgoh.nhs.uk">Ann.Marsh@dgoh.nhs.uk</a> 01384 244017 ext 2017
Directorate or Department and Team	Dietetics
<b>2. Name of service or policy</b>	Dietetics Service
Is this a new or existing piece of work?	Existing
<b>3. Target audience</b> e.g. patients and public; NHS staff; professional health organisations; voluntary organisation; internal staff	Patients and public; NHS staff; professional health organisations; voluntary organisation; internal staff
<b>4. What are the aims of the service/ policy?</b> i.e. what does the policy or service hope to achieve?	Improve nutritional well being and educate people about their diets
<b>5. Does any part of this service or policy have the potential to have an adverse impact based on a person's age, disability, ethnic origin, gender, religion/belief or sexual orientation?</b> <i>If No, please provide brief reasons.</i>	No this service is available to all patients referred to it
<b>6. Are there any factors that could lead to different outcomes or satisfaction levels based on people's age, disability, ethnic origin, gender, religion/belief or sexual orientation?</b> <b>If No, please provide brief reasons.</b>	Yes

If you have answered yes to any of questions 5 or 6, you must now complete a full Equality Impact Assessment using the proforma provided by the Trust.

If you have answered No to all of the above questions, a full assessment is not required. Please complete the following sign-off section and send a copy of this screening to your Head of Service, Matron or Head of Department as appropriate **and** to Liz Abbiss, Head of Communications at Trust HQ.

**Name of person completing this screening:** - Ann Marsh

**Job Title:** Dietetic Department manager

**Date sent to Head of Service, Matron or Head of department:** - 24/4/2010

**Date sent to Head of Communications, Trust HQ:**

For advice relating to completion of this screening, please contact Human Resources on 456111, ext 3251

# Dudley Group of Hospitals: Equality Impact Assessment

## Step 3: Assessment Tool

Name of Policy or Service being assessed: Dietetics

Directorate:	Professional Clinical Services
Service/ Department	Dietetics

Head of Service: Ann Marsh  
(who will sign off this EIA)

Lead Officer: Ann Marsh  
(completing this EIA)  
Date of EIA 23/4/2010

Names and roles of any other people supporting the EIA (e.g. advisory group)

Liz Hipkiss Dietetic Assistant

Sue Garrett Secretary

### **Section 1 - Introduction**

*Identify the aims of the Policy/Service and rationale behind its delivery*

The aim of this section is to state the aim, objective or purpose of the policy/service:

How does the policy fit in with the Trust's wider aims?	To provide a patient centred service
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<b>Is the policy/service delivered by one department/directorate or in conjunction with other departments, agencies etc? Which?</b>	One department
<b>State the underlying aims and objectives of the policy/service and what it is trying to achieve.</b>	To Improve nutritional status Educate and people and their families and carers about their nutritional and dietary needs
<b>Who are the main stakeholders in relation to this policy/service?</b>	Patients, DGOH and community services staff

***How is the policy/service delivered?***

<b>Is there a target group for this service or policy?</b>	Patients who need nutritional support to enable them to control their medical conditions to meet their dietary needs
<b>Are there any eligibility criteria? If so state</b>	no
<b>Is it in-patient/out-patient or staff service/policy?</b>	<b>in-patient/out-patients</b>
<b>Is the service in-house or contracted out?</b>	In house. We have an SLA with the PCT to provide a dietetic service to the community
<b>Is it delivered by staff directly employed by the Trust or agency staff?</b>	Trust staff

## Section 2 - Data collection and analysis

Impact assessment should aim to promote equality across the following six 'equality areas':

- Age
- Disability
- Ethnicity/Race
- Faith/religious belief
- Gender (includes gender identity)
- Sexual orientation.

*Note: Corporate data collection systems may not yet facilitate the collection of data for all these areas. Data collection may vary across service provision. (In some instances it may not be possible/appropriate to monitor each of the groups below. However, what data exists should inform the assessment and any gaps in data should be highlighted by the assessment).*

- **In the context of the policy or service being assessed, what equalities monitoring data is collected in relation to the following areas:**

*Note: this question may be more relevant to service areas than policies, should initially be applied to both).*

	Age	Disability	Ethnicity/ Race	Faith	Gender/ Gender identity	Sexual orientation
<b>Profile of service users</b>	√	√	√		√	
<b>Profile of staff delivering the service</b>	√	√	√	√	√	√
<b>Profile of any training available and who has taken it up</b>						
<b>[Other relevant areas]</b>						

Based on the above:

<b>What are the gaps in information required?</b>	No
<b>Do you have information on the profile of the local population (where relevant) or of the patient group or target group affected by the policy/service? Or do you know how to access this (this may be held corporately)?</b>	yes
<b>What steps need to be taken to address any of the above?</b>	

### Section 3 - Broad Needs Analysis of the Policy or Service Area

Please set out your understanding of the needs of your service users and any barriers to having these needs met and any barriers to accessing/delivering your service.

<p><b>Does the customer profile of your service reflect the local population (where relevant) or the target group for the service/policy? (You may wish to refer to information held corporately by the Trust that has been drawn from census data).</b></p>	<p>Service is on demand we have no control over the mix</p>
<p><b>How are people from each equality group reflected in the policy/take-up of services? Is there any under or over representation by certain groups? Are there any known explanations for this?</b></p>	<p>Service is on demand we have no control over the mix</p>
<p><b>Are staff trained in equality awareness and cultural awareness relevant to the needs of your service user group? (Where staff are the 'user group', are managers trained)?</b></p>	<p>Yes</p>
<p><b>Are there any factors about the policy or the way the service is delivered that could have an equalities impact? Consider referral routes; physical access; translation and interpreting services etc.</b></p>	<p>Do not have an induction loop Translating services are limited and we do not have a language line telephone</p>
<p><b>What methods do you use to ensure that people from diverse groups and communities are reflected in the policy/have access to the service?</b></p>	<p>Service is on demand we have no control over the mix</p>

<p><b>Are there any measures in place, if appropriate, to ensure that traditionally excluded communities (e.g. minority ethnic groups, people with learning disabilities etc) are not excluded from the policy/have access to the service?</b></p>	<p>Service is on demand we have no control over the mix</p>
<p><b>Has the policy/service been subject to any complaints, which involve equality issues?</b></p>	<p>No</p>
<p><b>What relevant consultation exercises have been carried out over the last two years and/or are planned in the near future? (e.g. Patient Forums, community groups, special interest groups etc)</b>  (You may need to consult with groups as part of this assessment or as part of the action plan arising from the assessment)</p>	<p>Survey of home patients on artificial enteral feeding</p>
<p><b>Were there/are there any implications for equalities groups arising from these consultations?</b></p>	<p>no</p>





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<b>How does the policy / service contribute to better community cohesion and good community relations?</b>						

<b>Are there are groups other than the six 'equality groups' already considered that may be adversely affected by the policy?</b>	No
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## Section 5 - Adverse Impact and recommended actions

Based on the above analysis:

<p><b>What if any, are the main areas where adverse impact has been identified/requiring improvement?</b></p>	
<p><b>Does the adverse impact amount to potential or actual discrimination? (If Yes, or you are not sure, please refer to your line manager or to Human Resources Dept for further advice and guidance.</b></p>	<p>Potential</p>
	<p><b>ACTION PLAN</b></p>
<p><b>What measures that can be taken to remove or minimise any adverse impact identified or how adverse impact could be avoided in the future?</b> Please list the specific actions and timescales for progressing these measures.</p>	<p>Explore feasibility of having an induction loop by June 2010</p> <p>Get more customer feedback, adapted Pulse survey is already being trailed in therapy out patients. To roll this out to dietetics one evaluation has been completed. Target summer 2010</p>
<p><b>What areas of good practice have been identified through the EIA process that could be replicated elsewhere?</b></p>	<p>Home visits for housebound patients</p> <p>New service for severely obese patients.</p> <p>Dietetic assistant working alongside the paediatric dietitian</p> <p>New service for community patients with neurological conditions</p> <p>Community and hospital service managed by one organisation</p> <p>Patient centred care</p>

## Section 6 - Monitoring and Review of policy

<b>The results of the EIA and action plan should be sent to the Medical Service Head, Matron or Head of Department as appropriate, so it can inform service planning and development.</b>	Date sent: 23/4/2010
<b>Each policy/service has to be reviewed for equality impact every three years.</b>	Date for next review: April 2013

## Section 7 – Signing off

<b>Does this policy or service need to be referred for further assessment/legal advice?</b> <b>If Yes, please state what date your line manager and HR manager have been notified.</b>	Date:

**Lead officer** completing the assessment:

Name: Ann Marsh

**Head of Service, Matron or Head of Department** to sign off the assessment:

Name:

Signed: 

Date: 5th May 2010

## **Section 8 –Publishing the results**

**We have a specific statutory duty to publish the results of EIAs and to have available results of the EIA and monitoring of any actions agreed.** This will include access to the assessment via the Trust's website. As well as sending your completed EIA to your Head of Service, Matron or Head of Department **please also send it to:**

**Liz Abbiss, Head of Communications, Trust HQ.**

**Date sent:**

Thank you.

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