Dudley Group of Hospitals: Equality Impact Assessment

Screening Tool

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

1. Name of lead	Bradley Vaughan
1. Name of lead	Diadiey vaugilali
Contact number & email	07721 977537
o sinast names a small	bradley.vaughan@rsmtenon.com
Directorate or Department and Team	Finance/Local Counter Fraud
·	Specialist
2. Name of service or policy	Fraud Corruption Policy
Is this a new or existing piece of work?	Existing
3. Target audience	NHS Staff/Professional Health
e.g. patients and public; NHS staff;	Organisations/internal staff
professional health organisations;	
voluntary organisation; internal staff	
A Milest and the aircraft the agent of	To obtion of the Tweet actions will
4. What are the aims of the service/policy?	To advise of the Trust actions with regard to how any allegations of fraud
policy?	are handled
5. Does any part of this service/	No - All people are treated equally
policy have a positive impact on	under the policy
our duty to promote good race	, and panel
relations, eliminate discrimination	
and promote equality based on a	
person's age, disability, ethnic	
origin, gender, religion/belief or	
sexual orientation?	
sexual orientation? If No, please provide brief reasons.	
If No, please provide brief reasons.	No – as above
If No, please provide brief reasons. 6. Could any part of this	No – as above
If No, please provide brief reasons. 6. Could any part of this service/policy have an adverse	No – as above
If No, please provide brief reasons. 6. Could any part of this	No – as above
If No, please provide brief reasons. 6. Could any part of this service/policy have an adverse impact on our duty to promote good race relations eliminate discrimination and promote	No – as above
If No, please provide brief reasons. 6. Could any part of this service/policy have an adverse impact on our duty to promote good race relations eliminate discrimination and promote equality based on a person's age,	No – as above
If No, please provide brief reasons. 6. Could any part of this service/policy have an adverse impact on our duty to promote good race relations eliminate discrimination and promote equality based on a person's age, disability, ethnic origin, gender,	No – as above
If No, please provide brief reasons. 6. Could any part of this service/policy have an adverse impact on our duty to promote good race relations eliminate discrimination and promote equality based on a person's age, disability, ethnic origin, gender, religion/belief or sexual	No – as above
If No, please provide brief reasons. 6. Could any part of this service/policy have an adverse impact on our duty to promote good race relations eliminate discrimination and promote equality based on a person's age, disability, ethnic origin, gender, religion/belief or sexual orientation?	No – as above
If No, please provide brief reasons. 6. Could any part of this service/policy have an adverse impact on our duty to promote good race relations eliminate discrimination and promote equality based on a person's age, disability, ethnic origin, gender, religion/belief or sexual	No – as above
If No, please provide brief reasons. 6. Could any part of this service/policy have an adverse impact on our duty to promote good race relations eliminate discrimination and promote equality based on a person's age, disability, ethnic origin, gender, religion/belief or sexual orientation?	No – as above

7. Are there any factors that could lead to differential take-up, outcomes or satisfaction levels based on people's age, disability, ethnic origin, gender, religion/belief or sexual orientation?

If No, please provide brief reasons.

No – as above

If you have answered yes to any of questions 5-7, 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: Bradley Vaughan

Job Title: Local Counter Fraud Specialist

Date sent to Head of Service, Matron or Head of department: 5th July 2011

Date sent to Head of Communications, Trust HQ:

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