# The Dudley Group

**NHS Foundation Trust** 

#### **Equality Impact Assessment**

#### Step 3: Assessment Tool

Name of Policy or Service being assessed:

# Management of Cancer Related Venous ThromboembolismPolicy version:1Expiry Date:

Directorate:	Haematology/Oncology	
Service/Department	Anticoagulation Nurse Service	
<b>Head of Service:</b> (who will sign off this EIA)	Dr Savio Fernandes	
Lead Officer: (completing this EIA)	Sarah Hughes	
Date of EIA	15/04/13	

Name and roles of any other people supporting the EIA (e.g. advisory group)		
Thrombosis Group		
Chaplaincy		
Muslim Chaplin		

#### Section 1 – Introduction

Identify the aims of the Policy or Service and rationale behind its delivery and objective or purpose of the policy/service.

Outcomes are covered by this policy/service? Is the Policy/Service delivered by one department/directorate or	Outcome 4 – Care and welfare of people who use services Outcome 9 – Management of services Outcome 16 –Assessing and monitoring the quality of service provision Pharmacy All clinical Areas
in conjunction with other departments, agencies etc? Please state which.	
State the underlying aims and objectives of the Policy/Service and what it is trying to achieve.	To provide appropriate anticoagulation relating to clinical need
Linked Procedural documents	GUIDELINES ON ANTICOAGULATION USING WARFARIN AND HEPARIN

#### How is the Policy/Service delivered?

Is there a target group for this Service or Policy?	All clinical staff
Are there any eligibility criteria? If so please state:	No
Is this Service/Policy for in-patient/out- patient/community and Trust staff	All service areas
Is it delivered by staff directly employed by the Trust or Agency Staff?	Both

#### Section 2 – Data Collection and analysis

The Impact assessment should aim to promote equality across the following nine protected characteristics; as identified in the Equality Act 2010:

- Race
- Sex
- Disability
- Age
- Gender reassignment
- Religion or Belief
- Sexual orientation
- Pregnancy and Maternity
- Marriage and Civil Marriages

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 and/or appropriate to monitor each of the protected characteristics. However, what data exists should be recorded within the assessment and any identify gaps in data within the assessment and the following action undertaken:

- Where it is possible to proactively commence monitoring of data, to close any gaps that have been identified and include the objective in the action plan.
- Where it is not possible or appropriate to gather data on any identified gap this will be recorded on the EIA as a gap and reasons provided for omission of this data.

In the context of the policy or service being assessed, what equalities monitoring data is collected in relation to the following areas for your service/policy: (Note: this question may be more relevant to service areas than policies, but should initially be applied to both).

	Patients Y/N	Staff Y/N	If Yes, what is collected?
Race	N	N	
Sex	Ν	Ν	
Disability	Ν	Ν	
Age	Ν	Ν	

Gender	Ν	Ν	
Reassignment			
Religion or belief	N	N	
Sexual Orientation	Ν	N	
Pregnancy and Maternity	N	N	
Marriage and Civil Marriages	N	N	

#### Based on the above:

	Fatwa presently only available in Arabic	
What, if any, are the gaps in information and what actions are being taken to close the gaps?		

## 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 and/or delivering your service.)

Does the customer profile of your service reflect the local population (where relevant) or the target group for the service or Policy? (You may wish to refer to information held corporately by the Trust that has been drawn from census data.)	Unknown at present as not required for delivery of service. However IT may be able to Map or compare.
Have the staff working to this policy or within the service received training in Equality and Diversity?	Yes - 3 yearly
How often does this take place?	
Are there any factors about the policy or the way the service is delivered that could have an impact and have they been addressed? Consider referral routes; physical access; translation and interpreting services etc.	Yes – LMWH derived from porcine products. Fatwa available for information for Muslim patients. Alternative products available for Muslim and Jewish patients if required.
Has the policy/service been subject to any complaints, which involve equality issues?	No
What relevant consultation exercises have been carried out over the last two years and/or are planned in the near future? What are the results?	Muslim Chaplain authorised the Fatwa as current.
(e.g. Patient Forums, community groups, special interest groups; you may need to consult with groups as part of this assessment or as part of the action plan arising from the assessment)	

### Section 4 – Action Plan

What areas of good practice have been identified through the EIA process that could be replicated elsewhere?	Fatwa will be made available in translated version
How have they been implemented?	

#### Section 6 – Monitoring and Review of Policy/Service

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. [An authorised copy of this EIA must be attached to the relevant Policy when forwarded to the Risk and Assurance Committee.]	Date sent to Medical Service Head, Matron or Head of Department: 15/04/13 Date of Policy/Service review: Date sent to Risk and Assurance Committee:
Each Policy/Service will be reviewed for equality impact every three years	Date of next review

Section 7 - Sign-off

Date signed by and signature of; Medical Service Head, Matron or Head of Department

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Signed by (Name) and date signed Policy/Service EIA signed off by Risk and Assurance Committee:

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Date sent to Communications, by (Name) for inclusion onto the HUB and Trust Website:

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For Communications: Authorised by (Name) and Date entered onto HUB and Trust Website:

25<sup>th</sup> April 2013 .....