



# Policy:

## NP 034 Quality & Equality Impact Assessment

<b>Executive Director Lead</b>	Executive Director of Nursing, Professions and Operations
<b>Policy Owner</b>	Director of Quality
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### Summary of policy

This Policy supports the Trust's quality governance systems by including an assessment of the impact of service change on quality and equality and other key measures to inform and enable appropriate, informed decision making. The Policy supports the Trust's commitment to equality by including an assessment of the impact of all service changes on the nine protected characteristics as defined by the Equality Act 2010.

<b>Target audience</b>	All Sheffield Health and Social Care (SHSC) staff (including staff seconded into, working or training in SHSC), contractors, partner organisations, students, patients, service users, carers and visitors
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<b>Keywords</b>	Quality, Equality, Assessment,
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**Storage & Version Control**

This is Version 2.0 of the policy and is stored and available through the SHSC intranet /internet.  
This version of the policy supersedes the previous version of the QEIA process flowchart. Any copies of the previous documentation held separately should be destroyed and replaced with this version.

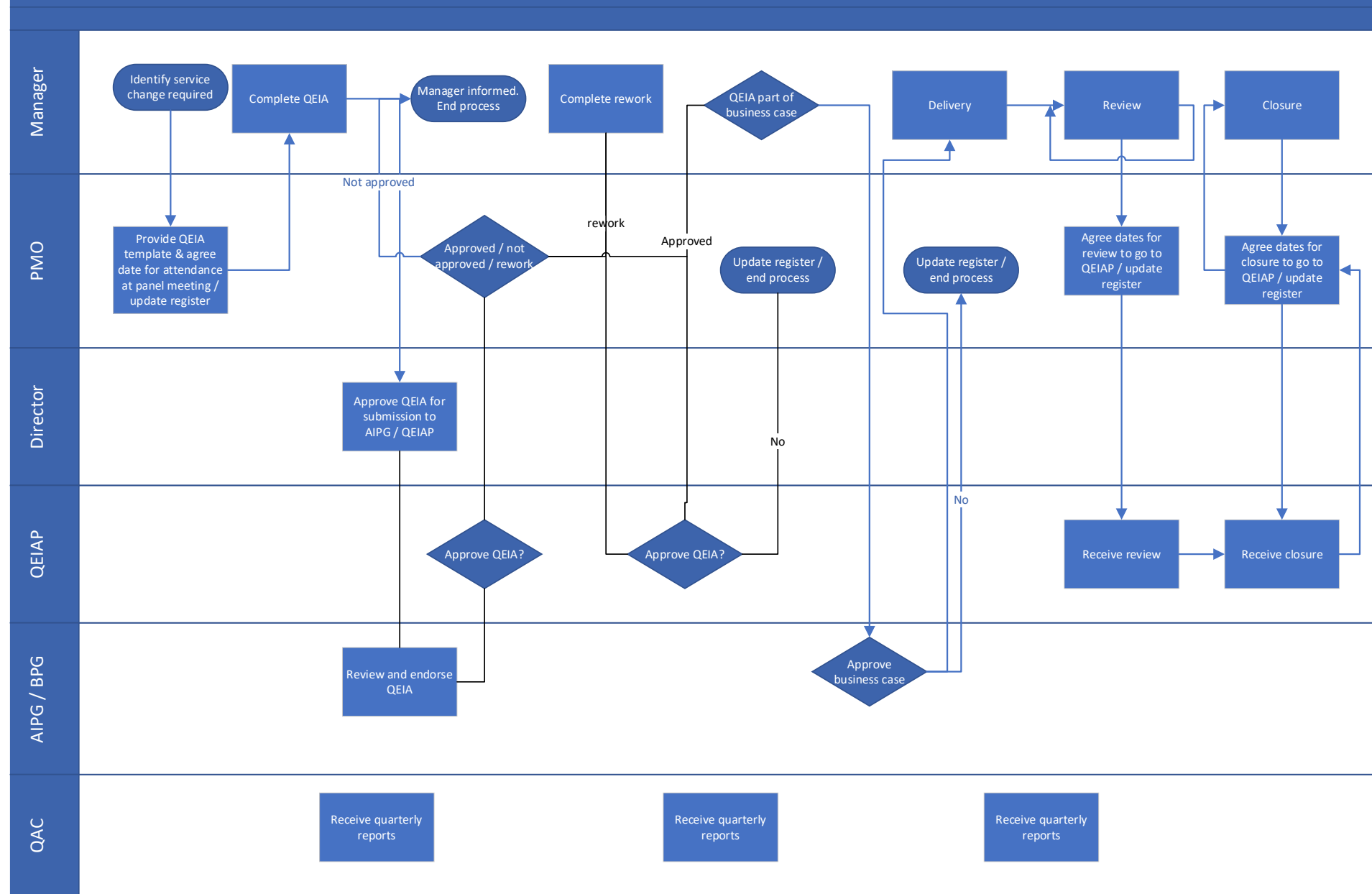
**Version Control and Amendment Log**

<b>Version No.</b>	<b>Type of Change</b>	<b>Date</b>	<b>Description of change(s)</b>
1.0	Policy, process and template to be issued to Policy Governance Group and Quality Assurance Committee	05 May 2021	
2.0	Policy, process and template updated to reflect changes as a result of policy review	14 October 2021	Amended process based on consultation with Annual Integrated Planning Group and Business Planning Group regarding duration of process and complexity  Included reference, and required action, in line with lived experience involvement standard operating procedure into the process

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# Quality and Equality Impact Assessment Flow Chart



## Process Notes

Key:

QEIAP, Quality and Equality Impact Assessment Panel

AIPG, Integrated Annual Planning Group

BPG, Business Planning Group

QAC, Quality Assurance Committee

The above process provides an overview of the steps taken from commencing a QEIA through to transition to business as usual of the service change. However to ensure a robust implementation, and clarity for all involved in the process, sub processes have been developed which provide greater detail for the individual steps.

# QUALITY AND EQUALITY IMPACT ASSESSMENT POLICY

## 1. Introduction

- 1.1 This Policy outlines the requirements and governance around the Quality and Equality Impact Assessment process (QEIA) which is required to support service improvement, transformation programmes, projects, significant commissioning changes, reinstatement of services, cost improvement plans, and business plans related to any service change within Sheffield Health and Social Care Trust (SHSC). For ease of use, the aforementioned are grouped together in this policy as 'service change(s)'
- 1.2 The Policy supports SHSC's quality governance systems by including an assessment of the impact of service change on quality and other key measures to inform and enable appropriate, informed decision making.
- 1.3 SHSC recognises that the process of service change and improvement can present risk to the quality and safety of the care provided. As such all service changes are evaluated for their impact on quality, equality, patient safety and patient experience, to ensure that they are clinically safe and that risks to quality can be managed through mitigating actions.
- 1.4 The Policy supports SHSC's commitment to equality by including an assessment of the impact of all service changes on the nine protected characteristics as defined by the Equality Act 2010.
- 1.5 In applying the Policy, the needs and interests of the patient always come first, although the QEIA process acknowledges other important factors which need to be included in the assessment of risk associated with service change.
- 1.6 The Quality and Equality Impact Assessment Policy has been developed to ensure that appropriate steps are in place to safeguard quality and ensure there is oversight of other risks whilst delivering planned changes to service delivery.
- 1.7 The QEIA process should be followed to assess the impact that any identified programmes or projects may have on the quality of care provided to patients receiving treatment across the health care system.
- 1.8 QEIA's are required to be continuously assessed throughout the life cycle of programmes of work and projects relating to service change and transformation.
- 1.9 Best practice indicates that the key indicators that should be considered as part of an holistic approach to impact assessment are:
  - Patient Safety
  - Clinical Effectiveness
  - Patient and Carer Experience
  - Operational effectiveness
  - Delivery of strategic objectives
  - Financial Impact
  - Reputational Risk
  - Workforce
  - Equality and Diversity (Discrimination)

## 2 Scope

This Policy should be read by all those with the responsibility for delivering and supporting service change, improvement and transformation within SHSC

### 3 Purpose

3.1 The purpose of this Policy is to:

- Define the Trust's requirements for QEIA's related to service change.
- Provide guidance to relevant staff on the criticality of QEIA's and provide guidance on completing the QEIA template.
- Define governance and decision-making related to the QEIA process.
- Define the process for responding to section 149 of the Equality Act 2010 (The Public Sector Equality Duty) when considering and implementing service changes.

### 4 Definitions

4.1 The Quality and Equality Impact Assessment process analyses the type of impact (both positive and negative), the likelihood of impact, the level of impact and the corresponding plans for managing associated risks and potential benefits of any service change within SHSC. Evidence to support these decisions (i.e. the data or information used to inform the QEIA) should be referenced in the Quality and Equality Impact Assessment template (Appendix 1)

4.2 All QEIA's will be subject to ongoing assessment of their impact after the change process has been implemented to ensure the impact assessment has not changed significantly either before the implementation of the change or after implementation until business as usual is established.

4.3 Post-implementation, routine performance monitoring will provide assurance that any further impact will be detected as part of business as usual practice.

4.4 Service change(s) refer to service improvement, Transformation programmes, projects, significant commissioning changes, reinstatement of services and Cost Improvement Plan's.

4.5 Public Sector Equality Duty

A public authority must, in the exercise of its functions, have due regard to the need to:

- (a) eliminate discrimination, harassment, victimisation and any other conduct that is prohibited by or under the Equality Act 2010
- (b) advance equality of opportunity between persons who share a relevant protected characteristic and persons who do not share it.
- (c) foster good relations between persons who share a relevant protected characteristic and persons who do not share it.

### 5 Duties

5.1 **Quality Assurance Committee (QAC)** will:

- Ensure that an effective Quality and Equality Impact Assessment Policy and process is implemented through the overall governance of the QEIA approach.
- Receive quarterly reports from the Quality and Equality Impact Assessment Panel via the Programme Management Office (PMO) on QEIA's to ensure the impact on quality and equality is being thoroughly assessed, the level of risk understood and any negative impact mitigated.

## **5.2 Quality and Equality Impact Assessment Panel (QEIAP) will:**

- Be accountable and responsible for the formal consideration and corresponding approval or rejection of all QEIAs. The Executive Director, Medical and Executive Director, Nursing and Professions constitute the Quality and Equality Assessment Panel, however may be assisted by other Senior Leaders / Director of Quality as appropriate.
- Receive each review relating to an QEIA. If either the scope of a service change is amended or where any predicted impact significantly changes during the implementation phase the QEIA will be reviewed more regularly at the direction of the QEIAP.

## **5.3 Executive Directors / Clinical and Corporate Directors / Directors of Professions / Heads of Service / SRO's will:**

- Ensure QEIA's are identified and completed for all new or existing service changes within their areas of responsibility.
- Be responsible for confirming the QEIA is accurate and ready for formal consideration by the Quality and Equality Impact Assessment Panel.
- Sign off the QEIA on behalf of the service prior to submission

## **5.4 Managers (responsible for the proposed service change) will be:**

- Responsible for authoring the QEIA in line with this Policy;
- Responsible for ensuring QEIA's are monitored and reviewed at regular intervals to ensure quality and other key impact measures are not compromised;
- Responsible for forwarding QEIA's to the PMO for inclusion on the QEIA Register and presentation at the Quality and Equality Impact Assessment Panel meeting.

## **5.5 Programme Management Office will:**

- Define and manage the QEIA process
- Facilitate and support the Quality and Equality Impact Assessment Panel
- Develop, maintain and monitor the QEIA Register on behalf of SHSC
- Provide quarterly updates to the Quality Assurance Committee on the QEIA process, identifying areas of risk and appropriate mitigation

## **5.6 Annual Integrated Planning Group (AIPG) will:**

- Provide expertise to ensure a robust QEIA is completed prior to submission to the QEIA Panel

## **5.6 Individual Staff will:**



- Be responsible for notifying managers of service improvement opportunities in their area of work why may result in a QEIA being required.

## **6. Procedure**

- 6.1 All service changes (as described above) are required to undertake an QEIA. If you are unsure whether one is required, please contact PMO for advice.
- 6.2 Where a decision is related to a third-party Public-Sector Organisation decision making process (for example commissioning) or a national policy decision, review of that parties QEIA may be useful in informing the SHSC QEIA, for example, a review of any data already collated or considered.
- 6.3 The QEIA process assesses risk using the Trust's standard risk matrix.
- 6.4 Service changes which require a business case must have an approved QEIA for inclusion with the business case prior to submission to Business Planning Group (BPG.) BPG are responsible for the approval of the investment but must be assured that the QEIA has been approved. Business cases will not be submitted to BPG for approval without an approved QEIA. The completion of the business case will continue to follow the existing Trust process.
- 6.5 The Quality and Equality Impact Assessment process required under this Policy is outlined as follows.

### **6.5.1 Stage 1: Completing the Quality & Equality Impact Assessment**

Contact PMO, who will provide the latest templates, provide guidance on completion including sharing the contact details of colleagues who will help with the completion of the QEIA and assign you to attend a QEIA panel meeting. Other governance meetings including AIPG and BPG may be required if the service change relates to a CIP or investment request.

If the QEIA does relate to an investment request it will be presented with a draft business case to AIPG prior to submission to the QEIAP. The QEIA will support the creation of a comprehensive business case by providing a structure to effectively assess the options from quality and equality perspectives.

If the QEIA does not relate to a CIP or investment request the QEIA will be presented to the QEIA panel only. However, regardless of the type of service change the completed QEIA must be reviewed and approved by the responsible owner (Executive Directors / Clinical and Corporate Directors / Directors of Professions / Heads of Service / SRO's) prior to submission to the Quality and Equality Assessment Panel for consideration.

### **6.5.2 Stage 2: Quality and Equality Assessment Panel Review of QEIAs**

Completed QEIAs will be reviewed by the Executive Director, Nursing, and Professions and Executive Director, Medical supported by colleagues who may approve the QEIA, or may decide that further information is required before approval

can be given. The manager or responsible owner will be asked to attend the panel meeting to present the QEIA

Where further evidence is required to make a judgement, the PMO will liaise with the Manager responsible for the service change to assist in preparing this. The QEIA will be revised and issued to the QEIA Panel. It is at the panels discretion whether they require the manager / SRO to attend the meeting again.

Once a service change is approved by QEIAP this will be recorded on the QEIA Register by the PMO. Risks identified as part of the QEIA process will be recorded and managed through the Trust's Risk Management Policy, with high risks escalated to the Quality Assurance Committee and recorded on the Board Assurance Framework.

### **6.5.3 Stage 3: Ongoing Review of Integrated Impact Assessment**

QEIA's should be reviewed regularly and at least at the following times:

Review 1 – Prior to change implementation taking place.

Review 2 – During the change implementation

Review 3 – Post implementation

Or whenever there is a significant change to the scope of the service change, or where there is a significant change to the risk or likely impact of the change. The QEIA template includes a section to log dates of reviews and changes to impact ratings. The reviews should be sent to QEIAP at each stage, however reviews can be escalated at any point. PMO will organise this with the Manager.

Once the project or programme is completed and 'Business as Usual' established, a closure/Post Implementation Review report will be prepared by the Manager which details the overall impact of, and provides assurances on, the impact of the service change. The closure reports should be reviewed and approved at appropriate local governance level.

## **7. Development, consultation and approval**

7.1 The policy and process were originally created by a Task and Finish Group with representation from the Service User Engagement Team, Quality, Risk, Clinical Governance, Contracting, Procurement, Equality and Diversity, Business Planning and PMO

7.2 The policy has been reviewed by the Head of PMO and Director of Quality to include a revised process detailing:

- The governance and documentation required when completing a QEIA to support a request for investment. The amendments were requested and approved by AIPG and BPG.
- Application of the Lived Experience Involvement standard operating procedure. All service changes should involve people who use our services, their families and carers. The SOP, and its subsequent inclusion

in the QEIA policy and process was approved by the Director of Quality in July 2021, shared via the Strategic Development Group and SHSC Leadership call. Approved within Lived Experience and Co-production group.

- 7.2 The policy will be approved by the Policy Governance Group and ratified by the Quality Assurance Committee

## 8. Audit, monitoring and review

Monitoring Compliance Template						
Minimum Requirement	Process for Monitoring	Responsible Individual/group/committee	Frequency of Monitoring	Review of Results process (e.g., who does this?)	Responsible Individual/group/committee for action plan development	Responsible Individual/group/committee for action plan monitoring and implementation
Implementation of policy	Monthly reports to QEIA Panel / Strategic Development Group	PMO	Monthly	Update via report to QEIA Panel	QEIA Panel	PMO / QEIA Panel
Ongoing monitoring of individual QEIAs	Use of risk assessment (Appendix 2)	Manager	Monthly	QEIA Panel	Manager	PMO
Assurance of the QEIA Panel approvals / reviews and policy implementation	Review of monitoring by project lead in QEIA Panel	QEIA Panel/PMO	Three monthly	Quality Assurance Committee	QEIA Panel (PMO)	QAC
Assurance on implementation and monitoring of QEIA Policy	Quarterly reports to Quality Assurance Committee	PMO on behalf of QEIA Panel	Quarterly	Quality Assurance Committee	PMO	QAC

## 9. Implementation Plan

Implementation Plan Action / Task	Responsible Person	Deadline	Progress update
Upload new policy onto intranet	PA Corporate Affairs	November 2021	
Launch new policy (Connect)	Director of Quality	November 2021	
QEIA Support Team to be briefed on new process and policy changes	Head of PMO	November 2021	
AIPG and BPG to be briefed on new process and policy changes	Head of PMO	November 2021	
CIP Working Group to be briefed on new process and policy changes	Head of PMO	November 2021	
Colleagues, as part of annual business planning process, to be briefed on new process and policy changes	Head of PMO	November 2021	
Inform regulation leads responsible for delivery of actions within the CQC Improvement Plan	Head of PMO	November 2021	
Inform the Quality Improvement Team for consideration of QEIA's, if required, within quality improvement initiatives	Head of PMO	November 2021	

## 10. Dissemination, storage and archiving (control)

The policy will be made available to all staff via the internet and intranet. A communication will be issued to all staff via Connect immediately following publication.

Version	Date added to intranet	Date added to internet	Date of inclusion in Connect	Any other promotion/ dissemination (include dates)
2.0	November 2021	November 2021	November 2021	

11.

## **11. Training and other resource implications**

Advice on completing the QEIA can be gained from PMO. Training on the Public Sector Equality Duty and Equality Impact Analysis will be provided by the Head of Equality and Inclusion.

## 12. Links to Other Policies, Standards (Associated Documents)

- Public Sector Equality Duty
- Equality Impact Analysis Training Module

## 13. Contact details

<b>Title</b>	<b>Name</b>	<b>Phone</b>	<b>Email</b>
Executive Director of Nursing and Professions	Beverly Murphy	07970692408	Beverly.Murphy@shsc.nhs.uk
Executive Director, Medical	Dr Mike Hunter	01142264496	Mike.Hunter@shsc.nhs.uk
Director of Quality	Salli Midgley	07970 721 311	Salli.Midgley@shsc.nhs.uk
Head of Equality and Inclusion	Liz Johnson	01142216703	Liz.Johnson@shsc.nhs.uk
Head of Programme Management Office	Zoe Sibeko	01142250710	Zoe.Sibeko@shsc.nhs.uk

# QUALITY AND EQUALITY IMPACT ASSESSMENT PROCESS

## Guidance Notes

- The Quality and Equality Impact Assessment (QEIA) template has been introduced to bring together quality and equality impact considerations into a single systematic assessment process.
- An QEIA template should be completed by the Manager for every service change. The template can be obtained from the PMO, who will also book you into the relevant governance meetings including the QEIA Panel meeting
  - Manager is defined as the person responsible for the service change.
  - Service change(s) refer to service improvement, Transformation programmes, projects, significant commissioning changes, reinstatement of services and CIP's.
- The Quality & Equality Impact Assessment Panel (QEIAP) will assure, approve or reject the QEIA.
- The PMO will maintain the register of Quality & Equality Impact Assessments

## Part A – Quality and Equality Impact Assessment

- A Quality and Equality Assessment must be completed on identification of a service change.
- Please use specialist teams such as Quality Improvement, Clinical Effectiveness, Performance etc to support you to complete the assessment and quality measures. The contact details of the QEIA support team will be provided by PMO
- If a business case is required then the QEIA must be approved prior to submitting the business case to the Annual Integrated Planning Group for endorsement and Business Planning Group for investment approval.
- Completed QEIA will be submitted to the PMO [pmo@shsc.nhs.uk](mailto:pmo@shsc.nhs.uk) for presentation at the QEIAP.
- The Manager is expected to attend QEIAP to represent the QEIA.

## Part B – Quality and Equality Assessment Review

- QEIA Reviews will take place as a minimum.
  - Review 1 – Prior to change implementation taking place.
  - Review 2 – During the change implementation
  - Review 3 – Post Implementation
- Further reviews should take place if there is a significant change to scope when delivering the service change.
- Completed Full Assessment Review will be submitted to the PMO via [pmo@shsc.nhs.uk](mailto:pmo@shsc.nhs.uk) for presentation at the QEIAP.

## Part C – Quality and Equality Assessment Closure

- The Quality and Equality Assessment Closure report will be completed once the service change becomes business as usual (BAU).
- Completed Quality and Equality Assessment Closure report will be submitted to the PMO via Quality and Equality Assessment for presentation at the QEIAP.



# Appendix 1

## PART A - Quality and Equality Impact Assessment

### Quality and Equality Impact Assessment

*<Please delete all instructional text in grey italics>*

**Title of service change**

**Type of service change**

*<Please tick the relevant box>*

Project	
Transformation programme	
Service improvement	
Cost Improvement Plan	
Reinstatement of services	
Significant commissioning changes	

*< Complete the box if the service change is being led by an external organisation, please state which and explain the arrangements. This is to ensure that the QEIA are aware of the impact of this on the QEIA process. It is useful to request a copy of the lead organisation's QEIA. If not, this section is not relevant, please state n/a.>*

**Decision making authority with another organisation**

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#### Roles

*<Not all roles may be relevant for the QEIA, please complete manager and Executive Director / Director / Head of Service / SRO. Which role approves the QEIA locally will depend on the seniority of the manager>*

Role	Name
Manager (Author)	
Director	
Head of Service	
Head of Nursing	
Clinical Director	
SRO	
Project Lead	

**Approval (PMO to complete)**

Date created	<Date>	Approval date	<Date of QEIA>
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**Cost Improvement Plan only**

Gross (£)		Net (£)	
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## 1. Description of service change

<Please describe:

- *The service change proposal*
- *Why is the change needed?*
- *What it involves?*
- *If relevant, brief summary of the engagement undertaken with service users, their carers and families following the Lived Experience Involvement SOP. Please ensure that Appendix A in the SOP is completed and returned with the QEIA*
- *If available provide an estimate of costs and timescales.*

*Please enter enough detail in this section to ensure that the Quality Impact Assessment Panel understand the importance of the change and to be able to put the impact assessment into context>*

Enter text here.

## 2. Quality Impact Assessment

<Please note whilst only the negative impacts on quality and equality are scored, this tool offers an opportunity to test out our assumptions on the potential benefits of the project and to review both whether these have been achieved and whether the project has generated other unexpected benefits. This evidence can contribute to evidencing of our progress towards the Public Sector Equality Duty>

### Risk Impact Matrix

←———— Likelihood —————→

	1: Rare	2: Unlikely	3: Possible	4: Likely	5: Almost Certain
↑ Impact	1: Insignificant	Very Low	Very Low	Very Low	Very Low
	2: Minor	Very Low	Low	Low	Medium
	3: Moderate	Very Low	Low	Medium	High
	4: Major	Very Low	Low	Medium	High
↓ Impact	5: Catastrophic	Very Low	Medium	High	High

<Please use the risk impact matrix in conjunction with the risk assessment tool in Appendix 1 which provides a description of the risk score per domain in the quality assessment. Also use the guidance document as a prompt and contact the topic experts as necessary. This will help you to sense check your scores.

Please enter numbers into the impact, likelihood and risk score columns. If there isn't a negative impact, please enter 1 in the current risk and residual risk columns. If there is a negative impact, please score, then carefully consider the risk mitigations and actions you will take, and rescore the risk based on the effectiveness of the actions you will take>

Positive Impact	Negative Impact	Current Risk			Risk Mitigation and Monitoring Arrangements	Residual Risk			Quality Measures
		Impact	Likelihood	Risk Score		Impact	Likelihood	Risk Score	
<b>Impact assessment: Patient Safety</b> Does the project have a potential to impact positively or negatively on Patient Safety?									
Positive Impact	Negative Impact	Impact	Likelihood	Risk Score	Risk Mitigation and Monitoring Arrangements	Impact	Likelihood	Risk Score	Quality Measures
<b>Impact assessment: Clinical Effectiveness</b> Does the project have a potential to impact positively or negatively on Clinical Outcomes?									

Positive Impact	Negative Impact	Impact	Likelihood	Risk Score	Risk Mitigation and Monitoring Arrangements	Impact	Likelihood	Risk Score	Quality Measures
<b>Impact Assessment: Patient and Carer Experience</b> Does the project have a potential to impact positively or negatively on Patient Experience? Please consider your learning and assessment from involvement of service users, carers and their families as detailed in the Lived Experience Involvement SOP									
Positive Impact	Negative Impact	Impact	Likelihood	Risk Score	Risk Mitigation and Monitoring Arrangements	Impact	Likelihood	Risk Score	Quality Measures
<b>Impact Assessment: Operational Effectiveness</b> Does the project have a potential to impact positively or negatively on operational effectiveness?									

Positive Impact	Negative Impact	Impact	Likelihood	Risk Score	Risk Mitigation and Monitoring Arrangements	Impact	Likelihood	Risk Score	Quality Measures
<b>Criticality to delivering the Trusts Strategic Objectives</b> Does the project have a potential to impact on the delivery of the Trusts Strategic Objectives?									
Positive Impact	Negative Impact	Impact	Likelihood	Risk Score	Risk Mitigation and Monitoring Arrangements	Impact	Likelihood	Risk Score	Quality Measures
<b>Impact Assessment: Financial Impact</b> Does the project have a financial impact?									
Positive Impact	Negative Impact	Impact	Likelihood	Risk Score	Risk Mitigation and Monitoring Arrangements	Impact	Likelihood	Risk Score	Quality Measures

<b>Impact Assessment: Reputation</b> Does the project have the potential to impact on the reputation of the Trust?									
Positive Impact	Negative Impact	Impact	Likelihood	Risk Score	Risk Mitigation and Monitoring Arrangements	Impact	Likelihood	Risk Score	Quality Measures

<b>Impact Assessment: Workforce</b> Does the project have the potential to impact on the Workforce of The Trust?									

### 3. Equality Impact Assessment

**Who will the change directly or indirectly impact on:**

Service users **Yes /No**

Workforce **Yes/No**





Public or other third party **Yes/No**

*<If the answer is No to all of the above then this section does not need to be completed. Otherwise complete this assessment taking account of those who will be impacted on.*

When considering the potential impact on those who share protected characteristics, the following should be considered:

- **Discrimination (direct or indirect)**  
Any potential or actual discrimination may be unlawful, and the project must not proceed without removal of the risk or mitigation to reduce the risk to Low.
  
- **Equal Opportunity and Enhancing Relations**  
This is about the value the project brings and is also an opportunity to think about how changes may be made to increase this value for groups protected under Equality Legislation.
  - How does the proposal benefit this group in particular?
  - Can changes be made that would benefit this group?>

<Reasons for answers must be given unless the reason is obvious from the description of the benefit or issue. If the answer is N/A reason must be given.

Following completion of the Equality Impact Assessment table

Is there a risk score of Medium or High (after mitigation) for any of the groups identified below? *NB positives identified in 2 and 3 do not in themselves mitigate any potential or actual discrimination identified in 1.*

Yes /No (if yes, the decision to implement may be unlawful please contact the Liz Johnson, Head of Equality)>

*<For questions 1,2 & 3 please decide whether the answer is no, potentially or yes, provide an answer and delete the other options that are not relevant.>*

AGE	Current Risk			Risk Mitigation and Monitoring Arrangements	Residual Risk			2. Can equality of opportunity for this group be improved through this project?	3. Can any action associated with this project be taken to enhance relations between people in this group and people not in this group?
	Impact	Likelihood	Risk Score		Impact	Likelihood	Risk Score		
1. Does any aspect of this proposal actually or potentially discriminate against this group?  No / Potentially / Yes  Please provide explanation								No / Potentially / Yes  Please provide explanation.	No / Potentially / Yes  Please provide explanation
<b>DISABILITY</b>  1. Does any aspect of this proposal actually or potentially discriminate against this group?	Impact	Likelihood	Risk Score	Risk Mitigation and Monitoring Arrangements	Impact	Likelihood	Risk Score	2. Can equality of opportunity for this group be improved through this project?	3. Can any action associated with this project be taken to enhance relations between people in this group and people not in this group?

No / Potentially / Yes Please provide explanation							No / Potentially / Yes Please provide explanation.	No / Potentially / Yes Please provide explanation
<b>GENDER REASSIGNMENT</b> 1. Does any aspect of this proposal actually or potentially discriminate against this group?	Impact	Likelihood	Risk Score	Risk Mitigation and Monitoring Arrangements	Impact	Likelihood	Risk Score	2. Can equality of opportunity for this group be improved through this project?  3. Can any action associated with this project be taken to enhance relations between people in this group and people not in this group?
No / Potentially / Yes Please provide explanation							No / Potentially / Yes Please provide explanation.	No / Potentially / Yes Please provide explanation
<b>PREGNANCY AND MATERNITY</b> 1. Does any aspect of this proposal actually or potentially discriminate against this group?	Impact	Likelihood	Risk Score	Risk Mitigation and Monitoring Arrangements	Impact	Likelihood	Risk Score	2. Can equality of opportunity for this group be improved through this project?  3. Can any action associated with this project be taken to enhance relations between people in this group and people not in this group?

No / Potentially / Yes Please provide explanation							No / Potentially / Yes Please provide explanation.	No / Potentially / Yes Please provide explanation	
<b>RACE</b> 1. Does any aspect of this proposal actually or potentially discriminate against this group?	Impact	Likelihood	Risk Score	Risk Mitigation and Monitoring Arrangements	Impact	Likelihood	Risk Score	2. Can equality of opportunity for this group be improved through this project?	3. Can any action associated with this project be taken to enhance relations between people in this group and people not in this group?
No / Potentially / Yes Please provide explanation							No / Potentially / Yes Please provide explanation.	No / Potentially / Yes Please provide explanation	
<b>RELIGION</b> 1. Does any aspect of this proposal actually or potentially discriminate against this group?	Impact	Likelihood	Risk Score	Risk Mitigation and Monitoring Arrangements	Impact	Likelihood	Risk Score	2. Can equality of opportunity for this group be improved through this project?	3. Can any action associated with this project be taken to enhance relations between people in this group and people not in this group?

No / Potentially / Yes Please provide explanation							No / Potentially / Yes Please provide explanation.	No / Potentially / Yes Please provide explanation
<b>SEX</b> 1. Does any aspect of this proposal impact or potentially discriminate against this group?	Impact	Likelihood	Risk Score	Risk Mitigation and Monitoring Arrangements	Impact	Likelihood	Risk Score	2. Can equality of opportunity for this group be improved through this project?  3. Can any action associated with this project be taken to enhance relations between people in this group and people not in this group?
No / Potentially / Yes Please provide explanation							No / Potentially / Yes Please provide explanation.	No / Potentially / Yes Please provide explanation
<b>SEXUAL ORIENTATION</b> 1. Does any aspect of this proposal impact or potentially discriminate against this group?	Impact	Likelihood	Risk Score	Risk Mitigation and Monitoring Arrangements	Impact	Likelihood	Risk Score	2. Can equality of opportunity for this group be improved through this project?  3. Can any action associated with this project be taken to enhance relations between people in this group and people not in this group?

No / Potentially / Yes								No / Potentially / Yes	No / Potentially / Yes
Please provide explanation								Please provide explanation.	Please provide explanation

## 4. Impact summary

<Complete this section using the risk assessment tool in Appendix 1 and the Trust risk matrix>

<The Impact Rating is the residual risk rating, please enter the score and whether it is high, medium, low, very low as per the risk matrix>

Domain	Impact rating (High / Medium / Low / Very Low)
Patient Safety	
Clinical Effectiveness	
Patient and Carer experience	
Operational Effectiveness	
Criticality to delivering the Trusts strategic objectives	
Financial implications	
Reputation	
Workforce	
Discrimination	

## 5. Action Plan

<Complete this section to provide details on how issues raised in the QEIA will be addressed, provide further details if required regarding the mitigating actions including details of actions to be taken to respond to opportunities identified for questions 2 and 3 in the Equality Impact Assessment.>

Issue identified	Action proposed	Owner	Due date

## Appendix 1

### Risk assessment tool

Impact Assessment	Very Low / Low Impact (Risk Rating 1-8)	Medium Impact (Risk Rating 9-12)	High Impact (Risk Rating 15-25)
<b>Patient Safety</b>	Improved patient safety (such as reducing the risk of adverse events) is anticipated or same level of risk remains	May have an adverse impact on patient safety.	Increased risk to patient safety.  May have safeguarding implications.

		<p>May have an impact on partner organisations which creates shared risk.</p> <p>Measures are in place or planned to mitigate this impact to acceptable level</p>	<p>Further mitigation needs to be put in place to manage risk to acceptable level</p>
<b>Clinical Effectiveness</b>	<p>Clinical effectiveness will be improved resulting in better outcomes anticipated for patients or same level of risk remains</p>	<p>May have an adverse impact on clinical effectiveness.</p> <p>Measures are in place or planned to mitigate this impact to acceptable level</p>	<p>Significant reduction in clinical effectiveness.</p> <p>Further mitigation needs to be put in place to manage risk to acceptable level</p>
<b>Patient and Carer Experience</b>	<p>Improved patient and carer experience anticipated or same level of risk remains</p>	<p>May have an adverse impact on patient/carers experience.</p> <p>Measures are in place or planned to mitigate this impact to acceptable level</p>	<p>Significant reduction in patient and carer experience</p> <p>Further mitigation needs to be put in place to manage risk to acceptable level</p>
<b>Non Clinical or Operational Effectiveness</b>	<p>Improvements in non-clinical or operational performance are expected or same level of risk remains</p>	<p>May have an adverse impact on operational performance.</p> <p>Measures are in place or planned to mitigate this impact to acceptable level</p>	<p>Significant adverse impact on operational performance</p> <p>Further mitigation needs to be put in place to manage risk to acceptable level</p>
<b>Criticality to delivering the Trusts Strategic Objectives</b>	<p>Positively impacts on the delivery of the Trusts Strategic Objectives or same level of risk remains</p>	<p>May have some adverse impact on the delivery of the Trusts Strategic Objectives</p>	<p>Negatively impacts on the delivery of the Trusts Strategic Objectives</p>
<b>Finance</b>	<p>See Part A of QEIA for guidance</p>		



<b>Trust reputation with patients, staff and other stakeholders</b>	An improved or positive impact on the Trusts reputation is expected or same level of risk remains	May have some adverse impact on the Trust's reputation	Significant adverse impact on Trust reputation
<b>Workforce</b>	A positive impact is expected for the Trust's workforce or same level of risk remains	May have an adverse impact on workforce.  Measures are in place or planned to mitigate this impact to acceptable level	Significant adverse impact on Trust workforce  Further mitigation needs to be put in place to manage risk to acceptable level
<b>Discrimination</b>	The service change will have a positive impact for people with protected characteristics or same level of risk remains	May adversely impact on the Trust's responsibilities with regard to protected characteristics.  Measures are in place or planned to mitigate this impact to acceptable level	Significant adverse impact on the Trust's responsibilities with regard to protected characteristics  Further mitigation needs to be put in place to manage impact to acceptable level

## Part B – Quality and Equality Impact Assessment Review

*<Review as a minimum at the following points*

- *Review 1 – Prior to change implementation taking place.*
- *Review 2 – During the change implementation*
- *Review 3 – Post Implementation*

*Complete further reviews when any significant changes are made in delivering the service change>*

### 1. Current status

*<Please provide brief recap on purpose of service change. Explain current status of the service change, pre implementation, during implementation, post implementation. If the review is due to a significant change in scope of the service change please provide details>*

Enter text here.

### 2. Summary of changes

*<If the risk score has changed for the initial impact assessment / previous review please explain which domains have changed, how and why>*

Enter text here.

## Risk Impact Matrix

← Likelihood →

		1: Rare	2: Unlikely	3: Possible	4: Likely	5: Almost Certain
↑ Impact ↓	1: Insignificant	Very Low	Very Low	Very Low	Very Low	Very Low
	2: Minor	Very Low	Very Low	Low	Low	Medium
	3: Moderate	Very Low	Low	Medium	Medium	High
	4: Major	Very Low	Low	Medium	High	High
	5: Catastrophic	Very Low	Medium	High	High	High

Patient Safety			Clinical Effectiveness			Patient and Carer Experience			Clinical / Operational Effectiveness			Criticality to delivering the Trusts Strategic Objectives			Financial			Trust Reputation			Workforce			Discrimination (Question 1 Equality Impact assessment)					
Impact	Likelihood	Risk Score	Impact	Likelihood	Risk Score	Impact	Likelihood	Risk Score	Impact	Likelihood	Risk Score	Impact	Likelihood	Risk Score	Impact	Likelihood	Risk Score	Impact	Likelihood	Risk Score	Impact	Likelihood	Risk Score	Impact	Likelihood	Risk Score			




# Part C – Closure of Quality and Equality Impact Assessment

## 1. Reasons for closure

*<Please provide brief recap on purpose of service change. Explain the reasons for closure how and when it has transitioned into business as usual>*

Enter text here.

## 2. Impact of service change

*<Please explain the measurable impact the change has had. Use the quality measures identified in Part A of the QEIA. If the risk score has changed for the initial impact assessment / previous review please explain which domains have changed, how and why>*

Enter text here.

## 3. Lessons learned

*<Please explain what went well and what should be improved for next time and suggestions on how to make it better>*

Enter text here.

## 4. Follow on actions

Action	Owner	Due date