

6. EQUALITY IMPACT ASSESSMENT

Name: Victoria Griffiths and Sarah Johnston

Policy/Service: Policy for Co Payments Treatment for Patients at Ashford & St Peter's NHS Trust

Background

- Description of the aims of the policy
- Context in which the policy operates
- Who was involved in the Equality Impact Assessment

To provide a clear guidance on when and how to provide additional top up care for NHS patients. The additional care / treatment would be funded privately by the patient. The policy sets out how that operational process must happen i.e. how the NHS and privet pathways would operate alongside each other.

This impact assessment has been compiled by Victoria Griffiths, Chief Pharmacist and Sarah Johnston Head of Quality and Integrated Governance due to short turnaround required for approval of the policy however further analysis can be given if the committee requires it.

Methodology

- A brief account of how the likely effects of the policy was assessed (to include race and ethnic origin, disability, gender, culture, religion or belief, sexual orientation, age)
- The data sources and any other information used
- The consultation that was carried out (who, why and how?)

There may be some issues ensuring patients with language barriers understand the options open to them. It will be the responsibility of the clinician leading the patient's treatment to ensure they understand all the options available to them. We have interpreting services available to the Trust to support this process. Following policy implementation part of the review will be to understand how clinicians are approaching this issue.

We have not been able to review any data and have not prioritised this policy for a full review which we feel is not required currently.

Key Findings

- Describe the results of the assessment
- Identify if there is adverse or a potentially adverse impacts for any equalities groups

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Not applicable
Conclusion Provide a summary of the overall conclusions
Currently this policy does not have any major impact on minority groups. In the future once the co-payment system is established there may well be a broader approach to combining private and NHS care. At this point a more detailed impact assessment would be required.
Recommendations <ul style="list-style-type: none"> • State recommended changes to the proposed policy as a result of the impact assessment • Where it has not been possible to amend the policy, provide the detail of any actions that have been identified Describe the plans for reviewing the assessment
There is no change to be made to the policy currently. Review will be as described above and after the Trust has had one case. This policy will be a 3 year policy but with an annual review.