

Equality Impact Assessment Summary

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Policy/Service: Patients Property Policy

Background

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

The aim of the policy is to provide clear guidelines for staff in the management and documentation of patients property. The existing policy was updated following recommendations from the internal auditors and was ratified at NMC in January 2010.

Susan Brown, Head of Nursing Surgical Services
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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?)

The policy was discussed by the author with Head of Quality. Each area was considered and related to the policy to consider whether there were any impacts that needed to be considered further.

Key Findings

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

Race and Ethnic origin

It is recognised that patients whose first language is not English may have difficulty in understanding the rationale for implementing the policy, particularly in understanding what is being signed for. Staff will be expected to utilise usual procedures for explaining information to patients that do not have English as first language, this would be use of the language line when required.

Disability

For those patients with cognitive difficulties i.e. patients with dementia or patients with learning disability it may not be clear to a patient what is required - in order to safeguard patients unable to fully understand or sign for property the policy requires sign off by two members of staff.

There were no specific requirements identified for other areas

Conclusion

- Provide a summary of the overall conclusions

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All staff will need to be aware of their responsibilities in implementing this policy, and to be able to treat patients individually, ensuring appropriate methods are implemented to ensure patients property is safeguarded and patients are treated equitably.

Recommendations

- **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**

The review of property claims will be monitored at Patient safety and risk committee. (Health and Safety Manager will ensure this) Account will be taken of patient group, and consideration given to whether a group of patients are being adversely affected.

Guidance on Equalities Groups

Race and Ethnic origin (includes gypsies and travellers) (consider communication, access to information on services and employment, and ease of access to services and employment)	Religion or belief (include dress, individual care needs, family relationships, dietary requirements and spiritual needs for consideration)
Disability (consider communication issues, access to employment and services, whether individual care needs are being met and whether the policy promotes the involvement of disabled people)	Sexual orientation including lesbian, gay and bisexual people (consider whether the policy/service promotes a culture of openness and takes account of individual needs)
Gender (consider care needs and employment issues, identify and remove or justify terms which are gender specific)	Age (consider any barriers to accessing services or employment, identify and remove or justify terms which could be ageist, for example, using titles of senior or junior)
Culture (consider dietary requirements, family relationships and individual care needs)	Social class (consider ability to access services and information, for example, is information provided in plain English?)