Sheffield Teaching Hospitals NHS Foundation Trust
Race Equality Scheme: Review 2005

Initial Impact Assessments
# Acute Medicine Diabetes, Endocrinology, Gastroenterology, Respiratory Health Care for Older people

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<tr>
<th>Directorate / Department</th>
<th>Policy title / Service</th>
<th>Assessor (s)</th>
<th>New or existing policy / service</th>
<th>Date of assessment</th>
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<tbody>
<tr>
<td>Acute Medicine</td>
<td>Diabetes, Endocrinology, Gastroenterology, Respiratory Health Care for Older people</td>
<td>Service Managers</td>
<td>Existing</td>
<td>May 05</td>
</tr>
</tbody>
</table>

1. **Who is responsible for the Service (function) that is being assessed?**
   - Clinical Director

2. **Describe the aims, objectives and purpose of the service**
   - To provide appropriate medical care and treatment for all acutely ill patients accessing the service either as an in patient or on an out patient basis
   - To work in collaboration with Primary Care/patient representative groups to identify, develop and address health care needs of the population
   - To interface with the Children’s Service to manage the transition into the adult acute service
   - Other external agencies, NSCAG, NORCOM, CF Trust
   - Actively support and participate in research and development
   - To provide service within the framework of National and Local policy guidance

3. **Are there associated objectives of the service? - if so please explain**
   - National Service Framework, national targets
   - Diabetes NSF, Older Peoples Services NSF
   - COG
   - National Cancer targets Gastroenterology and Respiratory
   - Choose and Book
   - National Waiting time targets for In and Out patients waiting times
   - NICE Guidance relating to the use of various drug/treatment therapies
   - NSCAG standards of care Pulmonary Hypertension

4. **Who will benefit from this service?**
   - Population of Sheffield, and surrounding districts, Rotherham, Barnsley, North Nott’s and North Derbyshire who are referred to the service.
   - UK and overseas patients who are referred to the Acute Medical Specialist Services

5. **What outcomes do you want to achieve from this service?**
   - To provide appropriate and timely care in the most relevant setting for all patients accessing the service
6. What factors could contribute or detract from the outcome?
- Pressure on Acute Medical beds, slowing down the rate of discharge
- Provision of support packages in primary care to facilitate earlier discharge from an acute setting
- The AICS and CAICS service is provided to support patients in their own home or safely discharge them to a more appropriate care setting

7. Could the service have a differential impact on different racial groups? Yes
   (if yes – which groups)
- Diabetes, Respiratory TB, and Health Care for Older people

8. Briefly explain any reasons / evidence you have regarding this impact
   eg take up of services, different needs, language barriers, consultation or complaints etc
- Higher prevalence of disease in certain racial groups evidence required re take up of services
- Possible language barriers although interpreters readily available
- Service location, is Secondary Care always the most appropriate setting e.g. T.B. Clinic
- Some patients in the above three groups may have both differing and complex needs to meet, which need further assessment
- PAS Patient information letters generated in English only

9. If you answered yes to the above, please describe the impact of the service (positive or negative) on any of the following areas
   1. eliminating discrimination
   2. promoting equal opportunities
   3. promoting good race relations

   1. All patients referred or attending the service are treated there is no discrimination re service provision, all patients are seen in order of waiting time urgency
   2. Access to the service may potentially be a problem and will require further research to clarify
   3. Although these is some evidence available to support that attempts are made to promote good race relations, this requires further clarification to test how well it is achieved

Recommendation: Further impact assessment required Yes
### Emergency Care
#### Accident and Emergency

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</thead>
<tbody>
<tr>
<td>Accident &amp; Emergency</td>
<td>Emergency Care</td>
<td>Michael Harper</td>
<td>Existing</td>
<td>May 05</td>
</tr>
</tbody>
</table>

1. Who is responsible for the Service (function) that is being assessed?  
   **Clinical Director**

2. Describe the aims, objectives and purpose of the service

   - To provide accident and emergency services to the adult population of Sheffield including:
     - Immediate assessment and treatment (A&E – NGH)
     - Minor Injuries Assessment and Treatment (MIU – RHH + NGH)
     - Medical Assessment and admission (MAU-NGH)
     - Acute assessment and admission (EAU-RHH)

3. Are there associated objectives of the policy / service? - if so please explain

   - National government target to ensure that 98% of all attendances at the A&E department are admitted, discharged or transferred within four hours.
   - National guidelines on assessment and treatment of patients with a mental health issue, deliberate self-harmers, fractured neck of femur, chest pain, stroke

4. Who will benefit from this service?

   - Adult population of Sheffield.

5. What outcomes do you want to achieve from this service?

   - To provide safe, timely and appropriate unscheduled care with good outcomes in a quality environment.
| 6. What factors could contribute or detract from the outcome? | - Pressure on acute beds, slowing down the Trust’s flow of admissions.  
- Increases in patient attendances leading to excessive waits for assessment and treatment. |
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<tbody>
<tr>
<td>7. Could the service have a differential impact on different racial groups</td>
<td>Yes</td>
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</tbody>
</table>
| 8. Briefly explain any reasons / evidence you have regarding this impact | - The complexity of systems may lead to confusion and individuals to access services which are not the most appropriate for the care they require. This is more likely for patients whose first language is not English or are from overseas and new to the NHS.  
- Cultural sensitivity in providing care/assessing patient/dealing with relatives |
| 9. If you answered yes to the above, please describe the impact of the service (positive or negative) on any of the following areas | | |
| 3. eliminating discrimination | - All patients attending are seen according to assessed priority and attendance - no discrimination. |
| 4. promoting equal opportunities | - As supported under the Trust’s guidance |
| 3. promoting good race relations | - Further work required to pro-actively achieve this. |

Recommendation: Further impact assessment required Yes
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<tbody>
<tr>
<td>Critical Care, Anaesthesia and Operating Services</td>
<td>Critical Care</td>
<td>Annie Philip</td>
<td>Existing Service</td>
<td>16.5.05</td>
</tr>
</tbody>
</table>

1. Who is responsible for the policy / Service (function) that is being assessed? Dr Nigel Coad, Clinical Director; Jacky Rawlins, General Manager; Richard Parker, Nurse Director. Simon Richardson, Group Risk Advisor. Carol Davies, Service Manager, Critical Care, RHH; Stella Langan, Critical Care, NGH;

2. Describe the aims, objectives and purpose of the policy / service

1. **Aims**
The Critical Care Directorate aims to provide a safe, professional and timely service and a safe environment for all patients needing specialist intensive care.

2. **Objectives**
   - To ensure that there is sufficient access for patients needing specialist intensive care.
   - To ensure that patients with individual needs are cared for appropriately.
   - To ensure all staff are trained appropriately.
   - To ensure staff skill mix and numbers are appropriate for each area.
   - To ensure all equipment is safe for use.
   - To ensure that the directorate continually looks for improvements to increase efficiency.
   - To ensure that the service is informed and prepared to meet the demands of new technologies.
   - To ensure that the directorate has an Annual Business Plan to meet the requirements of the objectives. (Above)

3. Are there associated objectives of the policy / service? - if so please explain
   National Targets for High Dependency and Intensive Care Services including capacity.

4. Who will benefit from this policy / service?
   Patients, their relatives, carers and friends; Stakeholders – eg Surgeons
   Group staff - eg. Anaesthetists, Nurses, Operating Department Practitioners, IT Technicians, Support Workers and Clerical and Administration Staff.

5. What outcomes do you want to achieve from this policy / service? Meet all the objectives for the service.

6. What factors could contribute or detract from the outcome?
   Written Patient Information is not available in other languages. Our staff and stakeholders have to ensure that accredited translators are available when necessary for patients and
<table>
<thead>
<tr>
<th>7. Could the policy/service have a differential impact on different racial groups</th>
<th>Yes</th>
<th>No</th>
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<tbody>
<tr>
<td>(if yes – which groups)</td>
<td>No – access is not denied to anyone on the grounds of race. Great emphasis is placed on meeting the individual needs of all patients and their relatives. There is a need for more beds to increase access for all patients, which is being addressed.</td>
<td></td>
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<tr>
<th>8. Briefly explain any reasons / evidence you have regarding this impact</th>
<th>Translation services are used regularly. There have not been any complaints upheld regarding access on the grounds of racial inequality.</th>
</tr>
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<tbody>
<tr>
<td>e.g. take up of services, different needs, language barriers, consultation or complaints etc</td>
<td></td>
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<th>9. If you answered yes to the above (No. 7), please describe the impact of the policy/service (positive or negative) on any of the following areas</th>
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<tbody>
<tr>
<td>5. eliminating discrimination</td>
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<tr>
<td>6. promoting equal opportunities</td>
<td></td>
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<tr>
<td>3. promoting good race relations</td>
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Recommendation: Further impact assessment required No
**Critical Care**  
**Anaesthesia and Operating Services**

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<tbody>
<tr>
<td>Critical Care, Anaesthesia and Operating Services</td>
<td>Complaints Policy</td>
<td>Annie Philip</td>
<td>Existing Policy</td>
<td>5.5.05</td>
</tr>
</tbody>
</table>

1. Who is responsible for the policy / Service (function) that is being assessed?  
Annie Philip, Group Patient Partnership Lead  
Simon Richardson, Group Risk Assessor

2. Describe the aims, objectives and purpose of the policy / service

“1. **Aims**  
It is the aim of the Complaints’ Policy to ensure that every complaint receives a thorough and speedy investigation and that appropriate action is taken where necessary to improve services or ensure problems do not occur again.  
2. **Objectives**  
- To acknowledge every complaint within 2 working days  
- To ensure thorough and fair investigation of all complaints  
- To respond to complaints within 20 working days of receipt of original letter  
- To ensure appropriate action is taken to improve services where necessary  
- To ensure performance is monitored and reported as appropriate  
- To resolve complaints informally wherever possible”

Aims and Objectives copied from STH Trust Complaints Policy 2003

3. Are there associated objectives of the policy / service?- if so please explain  
e.g. National Service Framework, national targets

“Hospital Complaints Procedure Act 1985, Health Circular (88) 37  
The policy has also been influenced by guidelines on good practice and the reports of the Health Service Commissioner”.

Copied from the STH Trust Complaints Policy 2003

4. Who will benefit from this policy / service?  
- All Complainants including patients and their relatives, carers and friends and other visitors to the Group areas.  
- Staff
<table>
<thead>
<tr>
<th>5. What outcomes do you want to achieve from this policy / service?</th>
<th>Provide clear and easily understood guidelines for staff in order to achieve the aims and objectives of the policy.</th>
</tr>
</thead>
<tbody>
<tr>
<td>6. What factors could contribute or detract from the outcome? e.g. Detraction would include lack of database for IPR Policy</td>
<td>Difficulty in accessing interpreters or translators which may delay responses.</td>
</tr>
<tr>
<td>7. Could the policy/service have a differential impact on different racial groups Yes No ( if yes – which groups )</td>
<td>No</td>
</tr>
<tr>
<td>8. Briefly explain any reasons / evidence you have regarding this impact e.g. take up of services, different needs, language barriers, consultation or complaints etc</td>
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<tr>
<td>9. If you answered yes to the above (No. 7), please describe the impact of the policy/service (positive or negative) on any of the following areas 7. eliminating discrimination 8. promoting equal opportunities 3. promoting good race relations</td>
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<tr>
<td>Recommendation : Further impact assessment required No</td>
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<tr>
<td>Directorate / Department</td>
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<td>--------------------------</td>
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<tr>
<td>Specialised medicine</td>
<td>Haematology/Rheumatology/Dermatology/Palliative care/ Clinical Immunology/Metabolic Bone</td>
</tr>
</tbody>
</table>

1. Who is responsible for the policy / Service (function) that is being assessed?

   Directorate of Specialised medicine

2. Describe the aims, objectives and purpose of the policy / service

   To provide quality pro-active and responsive specialist medical services to Inpatient, Outpatient and day case patients, delivering the highest standard of holistic care and continually striving for excellence.

3. Are there associated objectives of the policy / service? - if so please explain

   e.g. National Service Framework, national targets

   - National Service frame work for elderly patients
   - National Service frame work for Children
   - National Service frame work for patients with longer term conditions
   - National NHS inpatient and outpatient waiting times targets
   - Compliance with Disability Discrimination Act.
   - Compliance with Race relations Amendment Act
   - Standards for better Health
   - NHS Plan
   - Improving Outcomes Guidance in Haematological cancers
   - NHS Cancer plan (Cancer Peer Review)
   - NICE

4. Who will benefit from this policy / service?

   All patients and public who access the service, care and service partners.

5. What outcomes do you want to achieve from this policy / service?

   That every patient will receive a service and standard of care of the highest quality, and that reflects their individual and diverse needs. That each patient will have been fully...
involved in decisions about their health, have been assisted to full or optimum health, dependent on their condition/disease process, or to a comfortable and dignified death.

| 6. What factors could contribute or detract from the outcome? | Insufficient resources to be able to provide the level of service and standard of care consistent with expected high standards.  
A lack of available resources for service development.  
A lack of availability of a suitable work force (consultant medical staff/Nursing staff).  
A lack of senior management support (Trust)  
Inappropriate expectations of some patients. |
|---|---|
| 7. Could the policy/service have a differential impact on different racial groups Yes √ No (if yes – which groups) | There are referrals from all ethnic groups.  
There are disease processes specific to certain ethnic minorities or that have greater impact for certain ethnic groups: (Sickle cell and Thalassemia – Clinical Haematology, Vitiligo - Dermatology).  
Differential in literacy levels (English or other language)  
Cultural barriers.  
The lack of specialist information in languages other than English. |
| 8. Briefly explain any reasons / evidence you have regarding this impact eg take up of services, different needs, language barriers, consultation or complaints etc | It is evident that there is in general a lack of patient information in languages other than English both within the directorate and Trust. |
| 9. If you answered yes to the above, please describe the impact of the policy/service (positive or negative) on any of the following areas | 9. eliminating discrimination  
1. Positive impact of information in languages other than English as it is developed.  
10. promoting equal opportunities  
2. Very positive.  
3. promoting good race relations  
3. Very positive |

Recommendation: Further impact assessment required Yes √ No
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<tbody>
<tr>
<td>Neurosciences</td>
<td>Neurosciences</td>
<td>Heads of Department Matron’s Service Manager</td>
<td>Existing</td>
<td>6th May 2005</td>
</tr>
</tbody>
</table>

1. Who is responsible for the policy / Service (function) that is being assessed?  
Clinical Director-Dr Graham Venables

2. Describe the aims, objectives and purpose of the policy / service  
To provide a quality, accessible and timely service to all patients who require Neurological and Neurosurgical care. This includes-Neurology, Neurosurgery, Neurophysiology and Stereotactic Radiology Department.

3. Are there associated objectives of the policy / service? - if so please explain  
NSF-Long Term Conditions, Stroke and Older People  
NICE Guidelines-M.S, Epilepsy and Guidelines  
Local Policy+guidelines  
HR Policies

4. Who will benefit from this policy / service?  
Population Of North Trent-2.2 million (Barnsley, Rotherham ,N.E Derbyshire + Doncaster)  
International/National Services-Stereotactic Out-reach –Lincoln  
Activity-Outpatients-31,683, Inpatients-6015 Spells

5. What outcomes do you want to achieve from this policy / service?  
Quality  
Equitable  
Accessible  
Transparent  
Working in Partnership with others-Norcom, Patients, Social Services and other Government bodies
| 6. What factors could contribute or detract from the outcome? | DETRACT-External Pressures e.g) Winter pressures, lack of resources, infection, recruitment and retention and overwhelming Government targets  
CONTRIBUTE-Stakeholders Groups, Service evaluations, audits, good planning processes and good communication strategy |
|-------------------------------------------------------------|
| 7. Could the policy/service have a differential impact on different racial groups Yes No (if yes – which groups) | Not effected by any particular disease process within this speciality  
However there is an increasing trend within Trent of increasing numbers of asylum seekers who are accessing the service, particularly in Doncaster. |
| 8. Briefly explain any reasons / evidence you have regarding this impact | Language barriers and lack of interpreter services  
Documentation of previous medical history which is necessary to aid diagnosis |
| 9. If you answered yes to the above, please describe the impact of the policy/service (positive or negative) on any of the following areas | Within our Directorate we have an identified Diversity Lead  
Staff are attending Trust Diversity Training  
Senior Staff are aware of the Diversity Strategy  
Neurosciences work within the Trust Recruitment Policy which supports Diversity and its robust policy such as Bullying and Harassment  
We utilise the information department for Patient information in different formats and languages  
Neurosciences has a diverse workforce, we support the adaption programme for oversees nurses |
| 3. promoting good race relations |

Recommendation: Further impact assessment required Yes X No
### Rehabilitation

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<tbody>
<tr>
<td>Specialised Rehabilitation Services</td>
<td>Spinal Injuries Centre. Neuro – rehabilitation Unit. Mobility and Specialised Rehabilitation Centre</td>
<td>Sarah Browton – Matron. John Adams – Service Manager</td>
<td>Existing Service</td>
<td>5&lt;sup&gt;th&lt;/sup&gt; May 2005</td>
</tr>
</tbody>
</table>

1. **Who is responsible for the policy / Service (function) that is being assessed?**
   - Specialised Rehabilitation Services Directorate.

2. **Describe the aims, objectives and purpose of the policy / service**
   - To provide a comprehensive service in a holistic manner to patients following Spinal Cord Injuries and Disabilities.
   - To provide neuro rehabilitation for patients following a minimum of 48 hours post injury.
   - M&SRC provides a comprehensive Out Patient Service for: patients with limb deficiencies, Special seating, Orthotics and wheelchair requirements, following referral by other Health Care professionals.

3. **Are there associated objectives of the policy / service?- if so please explain**
   - National Service Framework for Long Term conditions.
   - National In and Out Patients waiting time targets.
   - M&SRC comply with EM POWER guidelines.
   - Liaison with appropriate voluntary and statutory bodies.
   - Locally nursing service benchmarked using Essence of Care Standards.

4. **Who will benefit from this policy / service?**
   - Any Client referred to the service that has an appropriate clinical condition or need. Spinal Injuries Centre is a Supra regional unit.

5. **What outcomes do you want to achieve from this policy / service?**
   - To enable individuals with relevant Specific long term conditions to reach their maximum potential to lead as a fulfilling life as possible without discrimination.
<table>
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<tr>
<th>6. What factors could contribute or detract from the outcome?</th>
<th>Lack of financial resources to provide appropriate support services. Lack of interpreters and / or written material in appropriate languages. Service is reliant on referrals from other Health Care Professionals. Psycho – social uptake difficulties.</th>
</tr>
</thead>
<tbody>
<tr>
<td>7. Could the policy/service have a differential impact on different racial groups</td>
<td>Yes No (if yes – which groups)</td>
</tr>
<tr>
<td>8. Briefly explain any reasons / evidence you have regarding this impact</td>
<td>Equal Access to all services within SRS directorate. All initial referrals come from other Health Care Professionals. Referrals come from all ethnic groups. Client groups requiring services not linked to any ethnic specific diseases or conditions.</td>
</tr>
<tr>
<td>9. If you answered yes to the above, please describe the impact of the policy/service (positive or negative) on any of the following areas</td>
<td>13. eliminating discrimination 14. promoting equal opportunities 3. promoting good race relations</td>
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<tr>
<td>Recommendation : Further impact assessment required</td>
<td>Yes No X (no)</td>
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<tr>
<td>Radiation Services</td>
<td>Radiotherapy</td>
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1. Who is responsible for the policy / Service (function) that is being assessed?
   Moira Tomlinson
   Senior Manager, Radiation Services

2. Describe the aims, objectives and purpose of the policy / service
   To provide a first class service incorporating treatment planning, delivery and psychosocial support for patients, carers and relatives attending the Radiotherapy Department.

3. Are there associated objectives of the policy / service? - if so please explain
   e.g. National Service Framework, national targets
   The service has waiting time targets which it aims to achieve.

4. Who will benefit from this policy / service?
   All patients referred to the department for radiotherapy.

5. What outcomes do you want to achieve from this policy / service?
   A first class service that meets the needs of the user and is continually being developed to respond to changes of need.
### 6. What factors could contribute or detract from the outcome?

| Lack of staff or resources. |

### 7. Could the policy/service have a differential impact on different racial groups? Yes No

| No. Patients receive information to say that they can ask to be treated by female radiographers for whatever reason. |

### 8. Briefly explain any reasons/evidence you have regarding this impact.

| Very few patients from ethnic minorities attend for treatment. Interpreters are used if needed. |

### 9. If you answered yes to the above, please describe the impact of the policy/service (positive or negative) on any of the following areas:

| 15. eliminating discrimination |
| 16. promoting equal opportunities |
| 3. promoting good race relations |

### Recommendation

<table>
<thead>
<tr>
<th>Further impact assessment required</th>
<th>Yes</th>
<th>No</th>
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<td>Yes</td>
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<td>NO</td>
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# Diagnostic and therapeutic services

## Laboratory Medicine and Clinical Chemistry

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<tr>
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<tbody>
<tr>
<td>Laboratory Medicine</td>
<td>Investigation of blood biological material and human tissues</td>
<td>N R Porter</td>
<td>Existing Service</td>
<td>16/05/2005</td>
</tr>
</tbody>
</table>

1. **Who is responsible for the policy / Service (function) that is being assessed?**
   - Dr T Stephenson  
     Clinical Director

2. **Describe the aims, objectives and purpose of the policy / service**
   - To provide an analytical, investigative service across all the major pathology disciplines to aid in the diagnosis, detection, monitoring and treatment of disease.

3. **Are there associated objectives of the policy / service?** If so please explain
   - **National plans e.g.**  
     Provision of a universal antenatal Sickle Cell and Thalassaemia Screening Programme
   - **National Service Framework e.g.**  
     Diabetes, Chronic Heart Disease
   - **NICE Guidelines Improving Outcomes Guidance**
   - **CPA UK Ltd Standards for Quality Management of Medical Laboratories**

4. **Who will benefit from this policy / service?**
   - In Patients, Out Patients, GP Patients, Patients with samples referred from other Trusts

5. **What outcomes do you want to achieve from this policy / service?**
   - Timely Diagnosis
   - Support for Clinical Management of Patients
   - Meeting National Guidelines
<table>
<thead>
<tr>
<th>Question</th>
<th>Response</th>
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<tbody>
<tr>
<td>6. What factors could contribute or detract from the outcome?</td>
<td></td>
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<tr>
<td>7. Could the policy/service have a differential impact on different racial groups Yes ✔ No (if yes – which groups)</td>
<td>The Sickle Cell &amp; Thalassaemia Screening programme will identify these disorders in those ethnic groups with the highest prevalence. This will be highest in Afro Caribbean and Asian groups</td>
</tr>
<tr>
<td>8. Briefly explain any reasons / evidence you have regarding this impact</td>
<td>The Directorate will not directly influence the decision of a clinician to use the Laboratory Medicine Service. The above programme will result in referral of patients to Clinical Haematologists via an established patient pathway.</td>
</tr>
<tr>
<td>9. If you answered yes to the above, please describe the impact of the policy/service (positive or negative) on any of the following areas</td>
<td></td>
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<tr>
<td>17. eliminating discrimination</td>
<td>There is no discrimination at point of analysis.</td>
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<tr>
<td>18. promoting equal opportunities</td>
<td></td>
</tr>
<tr>
<td>3. promoting good race relations</td>
<td>There is a community midwife link. The Consultant with responsibility for this area meets local patient groups</td>
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<tr>
<td>Recommendation: Further impact assessment required Yes No ✔</td>
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### Laboratory Medicine and Clinical Chemistry

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<tbody>
<tr>
<td>Laboratory Medicine</td>
<td>Analysis of body fluids</td>
<td>Peter Bagshaw</td>
<td>Existing</td>
<td>26.04.05</td>
</tr>
</tbody>
</table>

1. **Who is responsible for the policy / Service (function) that is being assessed?**
   - Dr Trevor Gray

2. **Describe the aims, objectives and purpose of the policy / service**
   - To provide an analytical service to hospital inpatients and outpatients and General Practitioners to aid in the diagnosis, detection and treatment of disease.

3. **Are there associated objectives of the policy / service?**
   - National Service Frameworks

4. **Who will benefit from this policy / service?**
   - Patients

5. **What outcomes do you want to achieve from this policy / service?**
   - Improve the treatment of patients
<table>
<thead>
<tr>
<th>6. What factors could contribute or detract from the outcome?</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
</tr>
<tr>
<td>7. Could the policy/service have a differential impact on different racial groups  Yes  No (if yes – which groups)</td>
</tr>
<tr>
<td></td>
</tr>
<tr>
<td>8. Briefly explain any reasons / evidence you have regarding this impact</td>
</tr>
<tr>
<td>eg take up of services, different needs, language barriers, consultation or complaints etc</td>
</tr>
<tr>
<td></td>
</tr>
<tr>
<td>9. If you answered yes to the above, please describe the impact of the policy/service (positive or negative) on any of the following areas</td>
</tr>
<tr>
<td>19. eliminating discrimination</td>
</tr>
<tr>
<td>20. promoting equal opportunities</td>
</tr>
<tr>
<td>3. promoting good race relations</td>
</tr>
</tbody>
</table>

**Recommendation:** Further impact assessment required  No
### Diagnostic and therapeutic services
#### Radiation Services

<table>
<thead>
<tr>
<th>Directorate / Department</th>
<th>Policy title / Service</th>
<th>Assessor (s)</th>
<th>New or existing policy / service</th>
<th>Date of assessment</th>
</tr>
</thead>
<tbody>
<tr>
<td>Radiation Services</td>
<td>Radiology</td>
<td>Moira Tomlinson</td>
<td>Existing Service</td>
<td>25(^{th}) April 2005</td>
</tr>
</tbody>
</table>

1. **Who is responsible for the policy / Service (function) that is being assessed?**

   Moira Tomlinson  
   Senior Manager, Radiation Services

2. **Describe the aims, objectives and purpose of the policy / service**

   To provide a first class service to patients, carers and relatives attending the Radiology Department for imaging.

3. **Are there associated objectives of the policy / service?** - if so please explain

   e.g. National Service Framework, national targets

   No

4. **Who will benefit from this policy / service?**

   All patients referred to the department for imaging.

5. **What outcomes do you want to achieve from this policy / service?**

   A first class service that meets the needs of the user and is continually being developed to respond to changes of need.
<table>
<thead>
<tr>
<th>Question</th>
<th>Response</th>
</tr>
</thead>
<tbody>
<tr>
<td>6. What factors could contribute or detract from the outcome?</td>
<td>Lack of staff or resources.</td>
</tr>
<tr>
<td>7. Could the policy/service have a differential impact on different racial groups</td>
<td>No.</td>
</tr>
<tr>
<td>8. Briefly explain any reasons / evidence you have regarding this impact</td>
<td>Very few patients from ethnic minorities attend for treatment and therefore imaging. Interpreters are used if needed.</td>
</tr>
<tr>
<td>9. If you answered yes to the above, please describe the impact of the policy/service (positive or negative) on any of the following areas</td>
<td></td>
</tr>
<tr>
<td>21. eliminating discrimination</td>
<td></td>
</tr>
<tr>
<td>22. promoting equal opportunities</td>
<td></td>
</tr>
<tr>
<td>3. promoting good race relations</td>
<td></td>
</tr>
</tbody>
</table>

Recommendation: Further impact assessment required Yes No NO
# Professional services

## Dietetics

<table>
<thead>
<tr>
<th>Directorate / Department</th>
<th>Policy title / Service</th>
<th>Assessor (s)</th>
<th>New or existing policy / service</th>
<th>Date of assessment</th>
</tr>
</thead>
<tbody>
<tr>
<td>Professional services</td>
<td>Dietetic service</td>
<td>Elaine Cotton</td>
<td>Existing service across RHH NGH and WPH</td>
<td>120505</td>
</tr>
</tbody>
</table>

### 1. Who is responsible for the policy / Service (function) that is being assessed?

Elaine Cotton Dietetic manager for Sheffield teaching hospitals

### 2. Describe the aims, objectives and purpose of the policy / service

Dietitians work across the clinical directorates and departments in promoting nutritional well-being, preventing nutritional related problems and treating disease. We therefore work in fields of nutritional support in critical care through to weight management in obesity. We work with individuals and groups, e.g. cardiac rehabilitation, through to teaching and advising our health care colleagues, e.g. catering service, ENB courses.

### 3. Are there associated objectives of the policy / service? - if so please explain

e.g. National Service Framework, national targets

- Activity of the admitting specialities and other directorates and departments, such as critical care and catering service.
- Associated NSFs and NICE guidelines, e.g. in Diabetes, Renal, CHD, care of the older adult.
- National initiatives such as Essence of care food and nutrition benchmark and Better hospital food

### 4. Who will benefit from this policy / service?

- Patients (and their carers) referred to the service, and patients in general through essence of care and better hospital food work
- Staff at STH through teaching and training

### 5. What outcomes do you want to achieve from this policy / service?

Improve health or prevent/delay deterioration of health in patients referred to the service. Improve knowledge in nutrition and dietetics through teaching sessions
<table>
<thead>
<tr>
<th>6. What factors could contribute or detract from the outcome?</th>
<th>Delays in referrals, admitting specialities increasing activity without equivalent increase in dietetic resource, competing and conflicting demands on the service. Other health care professionals advising on nutrition and diet without adequate training.</th>
</tr>
</thead>
<tbody>
<tr>
<td>7. Could the policy/service have a differential impact on different racial groups Yes</td>
<td>Yes, the different groups within Sheffield and across South Yorkshire</td>
</tr>
<tr>
<td>No</td>
<td>(if yes – which groups)</td>
</tr>
<tr>
<td>8. Briefly explain any reasons / evidence you have regarding this impact</td>
<td>Different dietary needs based on ethnic or religious requirements. Language barriers. Different racial groups have different susceptibilities to diseases and conditions e.g. higher incidence of diabetes in Asian population</td>
</tr>
<tr>
<td>eg take up of services, different needs, language barriers, consultation or complaints etc</td>
<td></td>
</tr>
<tr>
<td>9. If you answered yes to the above, please describe the impact of the policy/service (positive or negative) on any of the following areas</td>
<td>a. Have access to dietary information in different languages</td>
</tr>
<tr>
<td>23. eliminating discrimination</td>
<td>b. Book double appointment and interpreter if aware of need from referrer</td>
</tr>
<tr>
<td>24. promoting equal opportunities</td>
<td>c. Teaching sessions for catering and support workers include aspects on dietary needs for ethnic, religious and moral preferences</td>
</tr>
<tr>
<td>3. promoting good race relations</td>
<td></td>
</tr>
<tr>
<td><strong>Recommendation:</strong> Further impact assessment required</td>
<td>Yes √ No</td>
</tr>
<tr>
<td>Directorate / Department</td>
<td>Policy title / Service</td>
</tr>
<tr>
<td>------------------------------</td>
<td>------------------------</td>
</tr>
<tr>
<td>Medical Illustration</td>
<td>Medical Illustration</td>
</tr>
</tbody>
</table>

1. Who is responsible for the policy / Service (function) that is being assessed?
   Business Manager, Head of Medical Photography and Head of Graphics

2. Describe the aims, objectives and purpose of the policy / service
   To provide a multi-skilled clinical support service to those involved in patient care, teaching, education and research through a range of services including photography, video, medical art, graphics and print design

3. Are there associated objectives of the policy / service? - if so please explain
   No

   e.g. National Service Framework, national targets

4. Who will benefit from this policy / service?
   Staff and patients

5. What outcomes do you want to achieve from this policy / service?
   To fulfil the aims and objectives of the service see 2 above
<table>
<thead>
<tr>
<th>6. What factors could contribute or detract from the outcome?</th>
<th>Staffing levels, work load, equipment and finance available</th>
</tr>
</thead>
<tbody>
<tr>
<td>7. Could the policy/service have a differential impact on different racial groups Yes</td>
<td>No</td>
</tr>
<tr>
<td>( if yes – which groups )</td>
<td>The service is applied equally to all groups of staff and patients.</td>
</tr>
<tr>
<td>8. Briefly explain any reasons / evidence you have regarding this impact</td>
<td></td>
</tr>
<tr>
<td>eg take up of services, different needs, language barriers, consultation or complaints etc</td>
<td></td>
</tr>
<tr>
<td>9. If you answered yes to the above, please describe the impact of the policy/service (positive or negative) on any of the following areas</td>
<td></td>
</tr>
<tr>
<td>25. eliminating discrimination</td>
<td>Does not discriminate</td>
</tr>
<tr>
<td>26. promoting equal opportunities</td>
<td></td>
</tr>
<tr>
<td>3. promoting good race relations</td>
<td></td>
</tr>
<tr>
<td>Recommendation : Further impact assessment required</td>
<td>Yes</td>
</tr>
</tbody>
</table>
¹ Professional Services
² Medical Illustration

<table>
<thead>
<tr>
<th>Directorate / Department</th>
<th>Policy title / Service</th>
<th>Assessor (s)</th>
<th>New or existing policy / service</th>
<th>Date of assessment</th>
</tr>
</thead>
<tbody>
<tr>
<td>Medical Illustration Professional Services</td>
<td>Chaperone Policy</td>
<td>David Allen</td>
<td>Existing Policy</td>
<td>06.05.2005</td>
</tr>
</tbody>
</table>

1. Who is responsible for the policy / Service (function) that is being assessed? Head of Medical Photography and Business Manager

2. Describe the aims, objectives and purpose of the policy / service
   To create a safe, comfortable working environment for both patients and staff, and comply with Clinical Governance requirements

3. Are there associated objectives of the policy / service? - if so please explain
   Clinical risk issues etc.

   e.g. National Service Framework, national targets

4. Who will benefit from this policy / service? Staff and patients

5. What outcomes do you want to achieve from this policy / service? To fulfil the aims and objectives of the policy see 2 above
<table>
<thead>
<tr>
<th>6. What factors could contribute or detract from the outcome?</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
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</tbody>
</table>

| 7. Could the policy/service have a differential impact on different racial groups | Yes | No |
| (if yes – which groups) | The policy is applied equally to all groups but could possibly be perceived differently by racial groups with different cultural values and experience |

<table>
<thead>
<tr>
<th>8. Briefly explain any reasons / evidence you have regarding this impact</th>
</tr>
</thead>
<tbody>
<tr>
<td>eg take up of services, different needs, language barriers, consultation or complaints etc</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>9. If you answered yes to the above, please describe the impact of the policy/service (positive or negative) on any of the following areas</th>
</tr>
</thead>
<tbody>
<tr>
<td>27. eliminating discrimination</td>
</tr>
<tr>
<td>28. promoting equal opportunities</td>
</tr>
<tr>
<td>3. promoting good race relations</td>
</tr>
</tbody>
</table>

| Recommendation : Further impact assessment required | Yes | No |
### Professional Services
#### Therapy Services

<table>
<thead>
<tr>
<th>Directorate / Department</th>
<th>Policy title / Service</th>
<th>Assessor (s)</th>
<th>New or existing policy / service</th>
<th>Date of assessment</th>
</tr>
</thead>
<tbody>
<tr>
<td>Professional Services:</td>
<td>Occupational Therapy &amp;</td>
<td>Pauline Watson</td>
<td>Existing</td>
<td>May 2005</td>
</tr>
<tr>
<td>Therapy Services</td>
<td>Physiotherapy</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

1. **Who is responsible for the policy / Service (function) that is being assessed?**
   - Pauline Watson

2. **Describe the aims, objectives and purpose of the policy / service**
   - Provide integrated Occupational Therapy and Physiotherapy assessment and treatment to patients referred by STH Admitting Directorates and Direct Access patients referred by Sheffield GPs
   - Support Admitting Directorates to achieve timely safe discharge for inpatients, organising equipment and advising on services needed at home/need for long-term care

3. **Are there associated objectives of the policy / service?**
   - If so please explain
   - e.g. National Service Framework, national targets
     - Supports the objectives of the Admitting Directorates e.g.
       - 4-hour wait in A&E
       - Avoid unnecessary emergency medical admissions
       - Reduce Length of Stay
   - Supports NSF implementation e.g.
     - Intermediate Care

4. **Who will benefit from this policy / service?**
   - Patients referred by Admitting Directorates or GPs and their carers

5. **What outcomes do you want to achieve from this policy / service?**
   - Occupational Therapy enables a patient to live as independently as possible in accordance with their unique lifestyle and preferences
   - Physiotherapy maximises a patient’s potential for human movement to achieve function and independence
   - Therapy Assessment identifies potential for improvement and influences decisions about destination and further rehabilitation post-discharge

6. **What factors could contribute or detract from the outcome?**
   - Patient not referred to Therapy Services
   - Patient refuses consent for assessment/treatment
- Therapist unable to understand patient’s needs and wishes/patient unable to understand therapist due to cognitive/communication difficulties
- Variance between wishes of patient and wishes of their carers
- Insufficient resources

<table>
<thead>
<tr>
<th>7. Could the policy/service have a differential impact on different racial groups</th>
<th>Yes ✔</th>
<th>No</th>
</tr>
</thead>
</table>
| 8. Briefly explain any reasons / evidence you have regarding this impact | All groups. Therapy must be responsive to the patient’s needs, wishes and lifestyle e.g.  
- Personal Care activities (toileting, bathing, dressing etc)  
- Cooking and Eating  
- Physical touch (assisted walking, joint manipulation etc)  
| Different needs identified through experience of working with different racial groups re: chaperone/gender of therapist, diet, difference in take-up of solutions offered e.g. commode.  
- Experience of language barrier and working with interpreters |

| 9. If you answered yes to the above, please describe the impact of the policy/service (positive or negative) on any of the following areas | If therapy is unable to adapt to a patient’s different needs and achieve an equitable outcome by alternative methods the impact will be negative.  
- Conversely, if the therapist is able to achieve a satisfactory outcome for every patient the impact will be positive. |
|---|---|
| 29. eliminating discrimination  
30. promoting equal opportunities  
3. promoting good race relations |

Recommendation: Further impact assessment required  Yes ✔  No
## Head and Neck Services
### Dentistry

<table>
<thead>
<tr>
<th>Directorate / Department</th>
<th>Service</th>
<th>Assessor (s)</th>
<th>New or existing policy / service</th>
<th>Date of assessment</th>
</tr>
</thead>
<tbody>
<tr>
<td>Head and Neck CCDH</td>
<td>Dentistry</td>
<td>Tracey Plant Ian Brook</td>
<td>Existing</td>
<td>10 May 2005</td>
</tr>
</tbody>
</table>

1. **Who is responsible for the service (function) that is being assessed?**
   - Clinical Director

2. **Describe the aims, objectives and purpose of the service**
   - To provide a high standard of patient care in relation to inpatient and outpatients within the services of Head and Neck, Orthodontics, Paediatrics, Oral and Maxillofacial Surgery and Restorative Dentistry.

3. **Are there associated objectives of the service?**
   - National Service Frameworks
   - National Targets
   - e.g. National Service Framework, national targets

4. **Who will benefit from this policy / service?**
   - All patients regardless of ethnicity
   - General Dental Practitioners
   - Staff

5. **What outcomes do you want to achieve from this service?**
   - A uniform high standard of patient care for all users

6. **What factors could contribute or detract from the outcome?**
   - Service
   - Staffing levels
   - Funding
   - Clinic capacity
<table>
<thead>
<tr>
<th><strong>7. Could the service have a differential impact on different racial groups</strong></th>
<th><strong>Yes</strong></th>
<th><strong>No</strong> / (if yes – which groups)</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>No</strong></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

| **8. Briefly explain any reasons / evidence you have regarding this impact** |
| eg take up of services, different needs, language barriers, consultation or complaints etc |
| **N/A** |

| **9. If you answered yes to the above, please describe the impact of the service (positive or negative) on any of the following areas** |
| 31. eliminating discrimination |
| 32. promoting equal opportunities |
| 3. promoting good race relations |
| **N/A** |

| **Recommendation :** | **Further impact assessment required** | **Yes** | **No** / |
# Head and Neck Services
## Ear, Nose and Throat

<table>
<thead>
<tr>
<th>Directorate / Department</th>
<th>Policy title / Service</th>
<th>Assessor (s)</th>
<th>New or existing policy / service</th>
<th>Date of assessment</th>
</tr>
</thead>
<tbody>
<tr>
<td>ENT/Audiology</td>
<td>ENT/Audiology OPD, Head and Neck Centre.</td>
<td>Caroline Jameson Discussed with Service manager and Senior Chief Technical Audiologist</td>
<td>Existing</td>
<td>6/5/05</td>
</tr>
</tbody>
</table>

1. **Who is responsible for the policy / Service (function) that is being assessed?**
   
   Clinical Director - Mark Yardley

2. **Describe the aims, objectives and purpose of the policy / service**

   To provide ENT/ Audiological outpatient services and ENT inpatient services, including minor and major surgery, to the population of Sheffield and surrounding areas. There is an agreed policy for ENT inpatient services for Barnsley District General to be provided on The Head and Neck Centre during the weekend period. There is an agreed policy for OMFS inpatient services to be provided on the Head and Neck Centre, 7 days per week.

3. **Are there associated objectives of the policy / service? - if so please explain e.g. National Service Framework, national targets**

   MHAS- Modernisation of hearing aid services and the NSF for the elderly impact on Audiology.
   
   NSF for paediatrics, NSF for the elderly, NSF for diabetes and cancer targets all impact on the Head and Neck Centre.

4. **Who will benefit from this policy / service?**

   The service serves the population of Sheffield, Barnsley and beyond.
   
   Inpatient Ophthalmology cancer services are provided for patients from all over the country.

5. **What outcomes do you want to achieve from this policy / service?**

   We aim to provide:
   
   an equitable service,
   
   Good quality outcomes,
   
   Good morbidity and mortality outcomes.
6. What factors could contribute or detract from the outcome?

| The employment of a Clinical Support Nurse for oncology and two pre-operative assessment nurses has contributed to the outcomes for the Head and Neck Centre. |
| Hearing Services currently have difficulty recruiting technical staff which detracts from the outcomes. |

7. Could the policy/service have a differential impact on different racial groups Yes No (if yes – which groups)

Yes
Previous work with SADDACCA to increase awareness of the role of the departments of Audiology and Hearing Services.
Research shows that head and neck cancer is prevalent in India however this is not reflected in the numbers of patients admitted to the Head and Neck Centre.
According to research there is a high prevalence of diabetes within the black Caribbean community; this is not reflected in the number of patients admitted to the Head and Neck Centre.

8. Briefly explain any reasons / evidence you have regarding this impact eg take up of services, different needs, language barriers, consultation or complaints etc

Overall the directorate give the ‘take up of services’ as a reason.
Possibly there are alternative services providing these needs.
Audiology and Hearing services particularly feel that the service is not taken up, again there may be alternative services giving this provision. Not sure whether or not referrals are being made from PCT’s.

9. If you answered yes to the above, please describe the impact of the policy/service (positive or negative) on any of the following areas

- 33. eliminating discrimination
- 34. promoting equal opportunities
- 3. promoting good race relations

The directorate aims on providing an equitable service for all population groups.
The Head and Neck Centre plans to develop a new pathway for patients with learning disabilities.

Recommendation: Further impact assessment required Yes YES
### Head and Neck Services
#### Ophthalmology

<table>
<thead>
<tr>
<th>Directorate / Department</th>
<th>Policy title / Service</th>
<th>Assessor (s)</th>
<th>New or existing policy / service</th>
<th>Date of assessment</th>
</tr>
</thead>
<tbody>
<tr>
<td>Ophthalmology</td>
<td>Ophthalmic Services</td>
<td>J Barnes, Matron in discussion with Andrea Pearson Service Manager</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

1. **Who is responsible for the policy / Service (function) that is being assessed?**
   - Clinical Director /The service policies

2. **Describe the aims, objectives and purpose of the policy / service**
   - The Department provides ophthalmic services to the population of Sheffield and its surrounding areas. This includes both medical and surgical ophthalmology and the diagnostic and screening functions which underpin this service. The directorate is also one of three centres of excellence for ocular oncology in the United Kingdom. The Diabetic screening service for Sheffield is also managed by the Directorate.

3. **Are there associated objectives of the policy / service? - if so please explain**
   - National Service framework for the Elderly
   - National Service framework for Children
   - National Service framework for diabetes
   - Cancer Targets
   - Government targets (Choose and Book, surgical waiting times, etc)
   - Nice Guidelines for Photodynamic therapy

4. **Who will benefit from this policy / service?**
   - All our patients (Age range 0-100) The 500 thousand population of Sheffield the department serves.

5. **What outcomes do you want to achieve from this policy / service?**
   - A quality service which supports visual impairment, promotes health, well being and is accessible and equity for all
<table>
<thead>
<tr>
<th>6. What factors could contribute or detract from the outcome?</th>
<th>Certain minority groups do not currently access the service. Space within the Department to expand the service. Large D.N.A rate amongst children</th>
</tr>
</thead>
<tbody>
<tr>
<td>7. Could the policy/service have a differential impact on different racial groups Yes No (if yes – which groups)</td>
<td>Yes. Somali</td>
</tr>
<tr>
<td>8. Briefly explain any reasons / evidence you have regarding this impact eg take up of services, different needs, language barriers, consultation or complaints etc</td>
<td>The visually impaired support nurse has been approached by a member of the Somali community, saying that there are currently many visually impaired Somalis who do not currently access our services. Specifically the Low vision clinics. Some of this cultural, and also the Language barrier. The support nurse has visited one the Support groups for Somali visually impaired, to ascertain what services are required.</td>
</tr>
<tr>
<td>9. If you answered yes to the above, please describe the impact of the policy/service (positive or negative) on any of the following areas</td>
<td>Learning Disabilities, the Directorate has commenced a new care pathway for patients with learning disabilities, and has updated the current pathways for all clinic patients. Ensuring equal opportunities for all patients. Interpreters for the patients are booked through SCAIS. Individual members of staff attend meetings to hear patients views in order to develop the services further, i.e visually impaired support group leaning disabilities etc Large print available for visually impaired patients in appointment letters and information.</td>
</tr>
<tr>
<td>35. eliminating discrimination</td>
<td></td>
</tr>
<tr>
<td>36. promoting equal opportunities</td>
<td>The Directorate Support nurse has now forged links with the visually impaired Somali group.</td>
</tr>
<tr>
<td>3. promoting good race relations</td>
<td></td>
</tr>
</tbody>
</table>

Recommendation: Further impact assessment required Yes
<table>
<thead>
<tr>
<th>Directorate / Department</th>
<th>Policy title / Service</th>
<th>Assessor (s)</th>
<th>New or existing policy / service</th>
<th>Date of assessment</th>
</tr>
</thead>
<tbody>
<tr>
<td>Obstetrics, Gynaecology and Neonatology</td>
<td>Obstetrics</td>
<td>H Brown, Service Manager</td>
<td>Existing services</td>
<td>05/05/2005</td>
</tr>
</tbody>
</table>

1. **Who is responsible for the policy / Service (function) that is being assessed?**

   The Clinical Director for Obstetrics and Gynaecology has overall responsibility for the service being assessed. Elements of this responsibility are however, delegated to both the General Manager and Nurse Director who in turn delegate further to the Service Manager and Senior Nursing Staff.

2. **Describe the aims, objectives and purpose of the policy / service**

   Provision of a high standard of evidence based care to all patients accessing obstetric services to both the population of Sheffield and elements of surrounding localities in line with the commissioning requirements of the associated Primary Care Trusts. Within this is the provision of both emergency and specialist services. The aim is to continue to develop an efficient patient focussed and cost effective service.

3. **Are there associated objectives of the policy / service?** - if so please explain

   Associated objectives include implementation and adherence to national requirements including Access and Waiting Times Targets, National Service Frameworks, NICE guidance, National Program for IT including associated polices i.e. Choose and Book, Modernisation and Service Improvement Initiatives.

4. **Who will benefit from this policy / service?**

   Obstetric services are delivered to any woman requiring maternity care.

5. **What outcomes do you want to achieve from this policy / service?**

   As outlined in 2.
<table>
<thead>
<tr>
<th>6. What factors could contribute or detract from the outcome?</th>
<th>Resource limitations including financial, changes in national policy and guidance, social and cultural, research and development.</th>
</tr>
</thead>
<tbody>
<tr>
<td>7. Could the policy/service have a differential impact on different racial groups Yes</td>
<td>Potentially yes however, the directorate recognises the diversity of the patient population served and actively seeks to accommodate both racial and culture variation e.g. - signage in different languages - single gender clinics - encourage staff to learn alternative methods of communication i.e signing, Urdu - diversity training</td>
</tr>
<tr>
<td>8. Briefly explain any reasons / evidence you have regarding this impact eg take up of services, different needs, language barriers, consultation or complaints etc</td>
<td>The directorate does not have any evidence to imply these diverse needs are not being met in any one particular area or group but recognises further work needs to be undertaken to ensure the services provided are accessible to all.</td>
</tr>
<tr>
<td>9. If you answered yes to the above, please describe the impact of the policy/service (positive or negative) on any of the following areas</td>
<td>There has been a significant change over recent years to the make-up of Sheffield’s population including asylum seekers and different immigrant groups i.e. Somalis as well as increasing student numbers including overseas students. Furthermore, anecdotal evidence suggests that obstetrics is one area where the trusts overseas visitors’ policy has an impact in terms of numbers of patients it applies to. We simply do not have enough information to assess the impact (negative of positive). Help within the directorate would be required to undertake a more meaningful assessment for which we would be looking at a 2 to 3 year timescale.</td>
</tr>
<tr>
<td><strong>Recommendation:</strong> Further impact assessment required</td>
<td><strong>Yes √</strong> <strong>No</strong></td>
</tr>
</tbody>
</table>
### Obstetrics, Gynaecology, Neonatology and Urology

#### Urology

<table>
<thead>
<tr>
<th>Directorate / Department</th>
<th>Policy title / Service</th>
<th>Assessor (s)</th>
<th>New or existing policy / service</th>
<th>Date of assessment</th>
</tr>
</thead>
<tbody>
<tr>
<td>Directorate of Urology</td>
<td>Urology Services</td>
<td>Mr J Butler, Service Manager</td>
<td>Existing services</td>
<td>4th May 2005</td>
</tr>
</tbody>
</table>

1. **Who is responsible for the policy / Service (function) that is being assessed?**

The Clinical Director for Urology has overall responsibility for the services delivered by the Directorate and those being assessed. Elements of his responsibility are delegated between the General Manager for the group and the Nurse Director for the group. Some responsibility for service deliver is delegated further to the Service Manager and senior nursing staff.

2. **Describe the aims, objectives and purpose of the policy / service**

The aim of the service is to deliver high quality evidence based clinical care to the population of Sheffield and elements of surrounding localities in line with the commissioning requirements of the associated Primary Care Trusts. The Directorate also provides specialist services to patients who present via Accident & Emergency Departments within the city.

3. **Are there associated objectives of the policy / service? - if so please explain**

Associated objectives include implementation and adherence to national requirements including Access Targets, National Service Frameworks and NICE guidance, implementation of national policies such as Choose and Book.

4. **Who will benefit from this policy / service?**

Services are delivered to residents of Sheffield and residents from neighbouring cities and towns. In addition tertiary services are delivered to patients from further a field as far as and including national referrals.

5. **What outcomes do you want to achieve from this policy / service?**

The required outcomes for the service are to achieve the objectives and aims identified in point two.
<table>
<thead>
<tr>
<th>6. What factors could contribute or detract from the outcome?</th>
</tr>
</thead>
<tbody>
<tr>
<td>Factors which could contribute to or detract from the planned outcome include: financial limitations, Workforce considerations, resource issues, changes in national policy requirements, local policy imperatives, changes in referrals rates, significant changes accepted clinical practice such as the development of laparoscopic surgery.</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>7. Could the policy/service have a differential impact on different racial groups Yes No</th>
</tr>
</thead>
<tbody>
<tr>
<td>It is not envisaged that the service would have a differential impact on different racial groups.</td>
</tr>
</tbody>
</table>
- The service is accessible to different ethnic groups; patients gain access to the Directorate via their General Practitioner and also via Accident & Emergency Departments whilst access to General Practitioners may vary between different ethnic groups, access to Accident & Emergency Departments is comparatively equitable between different ethnic groups. |
- There is no evidence to suggest that the Directorate is not meeting the needs of different ethnic or racial groups. |
- Regarding evidence that different groups have different experiences of the service, other than via complaints the Directorate relies on the National Patient Survey for information on the use and experiences of the service users. This has not indicated that there are significant differences between users from different ethnic or racial groups or backgrounds. |
- The Directorate does not use positive action to support one particular community more than any other. |

<table>
<thead>
<tr>
<th>8. Briefly explain any reasons / evidence you have regarding this impact</th>
</tr>
</thead>
<tbody>
<tr>
<td>I am unaware of any evidence to support differing incidences of urological pathologies within different racial or ethnic groups. Without clear information about the different racial and ethnic makeup of prospective service recipients it is impossible to estimate whether take up of services is different between different groups. The Directorate does strive to fulfil the different needs of service users; an example would be the use of interpreters in dealing with patients who do not have English as their first language. The Directorate receives very few formal and informal complaints each year, with the Directorate receiving in the region of less than fifty formal complaints per annum. I am not aware that race or ethnicity or differing perceptions or experiences of patients with different racial or ethnic backgrounds has been an issue in any of the complaints received within the last year.</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Recommendation : Further impact assessment required Yes No</th>
</tr>
</thead>
<tbody>
<tr>
<td>Recommendation: Further impact assessment required Yes No ✓</td>
</tr>
</tbody>
</table>
## Obstetrics, Gynaecology, Neonatology and Urology

### Neonatology

<table>
<thead>
<tr>
<th>Directorate / Department</th>
<th>Policy title / Service</th>
<th>Assessor(s)</th>
<th>New or existing policy / service</th>
<th>Date of assessment</th>
</tr>
</thead>
<tbody>
<tr>
<td>Obstetrics, Gynaecology</td>
<td>Neonatology</td>
<td>H Brown, Service Manager</td>
<td>Existing services</td>
<td>05/05/2005</td>
</tr>
<tr>
<td>and Neonatology</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

1. **Who is responsible for the policy / Service (function) that is being assessed?**
   - The Clinical Director for Neonatology has overall responsibility for the service being assessed. Elements of this responsibility are however, delegated to both the General Manager and Nurse Director who in turn delegate further to the Service Manager and Senior Nursing Staff.

2. **Describe the aims, objectives and purpose of the policy / service**
   - Provision of a high standard of evidence based care to babies requiring neonatology services to the population of Sheffield, the north Trent neonatology network and nationally in line with the commissioning requirements. Within this is the provision of both emergency and specialist services for babies up to the age of 6 weeks. The aim is to continue to develop an efficient patient focussed and cost effective service.

3. **Are there associated objectives of the policy / service?- if so please explain**
   - Associated objectives include implementation and adherence to national requirements including Access and Waiting Times Targets, National Service Frameworks, NICE guidance, National Program for IT including associated polices i.e. Choose and Book, Modernisation and Service Improvement Initiatives.

4. **Who will benefit from this policy / service?**
   - Neonatology services are delivered to babies whom are residents of Sheffield, neighbouring towns and cities or within the north Trent network. In addition national referrals are received for specialist services.

5. **What outcomes do you want to achieve from this policy / service?**
   - As outlined in 2.
<table>
<thead>
<tr>
<th>6. What factors could contribute or detract from the outcome?</th>
<th>Resource limitations including financial, shortage of cots nationally, changes in national policy and guidance, social and cultural, research and development.</th>
</tr>
</thead>
<tbody>
<tr>
<td>7. Could the policy/service have a differential impact on different racial groups</td>
<td>Yes</td>
</tr>
<tr>
<td>(if yes – which groups)</td>
<td>The directorate recognises the diversity of the patient population served and actively seeks to accommodate both racial and culture variation e.g. - signage in different languages - single gender clinics - encourage staff to learn alternative methods of communication i.e. signing, Urdu The directorate has no evidence to imply these diverse needs are not being met in any one particular area or group.</td>
</tr>
<tr>
<td>8. Briefly explain any reasons / evidence you have regarding this impact</td>
<td>e.g. take up of services, different needs, language barriers, consultation or complaints etc</td>
</tr>
<tr>
<td>9. If you answered yes to the above, please describe the impact of the policy/service (positive or negative) on any of the following areas</td>
<td>39. eliminating discrimination 40. promoting equal opportunities 3. promoting good race relations</td>
</tr>
<tr>
<td>Recommendation</td>
<td>Further impact assessment required</td>
</tr>
</tbody>
</table>
**Obstetrics, Gynaecology, Neonatology and Urology**

**Gynaecology**

<table>
<thead>
<tr>
<th>Directorate / Department</th>
<th>Policy title / Service</th>
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<th>New or existing policy / service</th>
<th>Date of assessment</th>
</tr>
</thead>
<tbody>
<tr>
<td>Obstetrics, Gynaecology and Neonatology</td>
<td>Gynaecology</td>
<td>H Brown, Service Manager</td>
<td>Existing services</td>
<td>05/05/2005</td>
</tr>
</tbody>
</table>

1. **Who is responsible for the policy / Service (function) that is being assessed?**

The Clinical Director for Obstetrics and Gynaecology has overall responsibility for the service being assessed. Elements of this responsibility are however, delegated to both the General Manager and Nurse Director who in turn delegate further to the Service Manager and Senior Nursing Staff.

2. **Describe the aims, objectives and purpose of the policy / service**

Provision of a high standard of evidence based care to all patients accessing gynaecological services to both the population of Sheffield and elements of surrounding localities in line with the commissioning requirements of the associated Primary Care Trusts. In addition, specialist services are provided across the north Trent cancer network. Within this is the provision of both emergency and specialist services including screening services. The aim is to continue to develop an efficient patient focussed and cost effective service.

3. **Are there associated objectives of the policy / service? - if so please explain**

Associated objectives include implementation and adherence to national requirements including Access and Waiting Times Targets, National Service Frameworks, NICE guidance, National Program for IT including associated polices i.e. Choose and Book, Modernisation and Service Improvement Initiatives.

4. **Who will benefit from this policy / service?**

Gynaecological services are delivered to any woman requiring gynaecological care whom are residents of Sheffield, neighbouring towns and cities or within the north Trent cancer network. In addition national referrals are received for specialist services.

5. **What outcomes do you want to achieve from this policy / service?**

As outlined in 2.
6. What factors could contribute or detract from the outcome? Resource limitations including financial, changes in national policy and guidance, social and cultural, research and development.

7. Could the policy/service have a differential impact on different racial groups Yes No (if yes – which groups)

The majority of referrals received into Gynaecology are via a General Practitioner who therefore acts as a ‘gate-keeper’ for the service. The directorate however, recognises the diversity of the patient population served and actively seeks to accommodate both racial and culture variation e.g.
- signage in different languages
- single gender clinics
- encourage staff to learn alternative methods of communication i.e. signing, Urdu

The directorate has no evidence to imply these diverse needs are not being met in any one particular area or group.

8. Briefly explain any reasons / evidence you have regarding this impact
   e.g. take up of services, different needs, language barriers, consultation or complaints etc

9. If you answered yes to the above, please describe the impact of the policy/service (positive or negative) on any of the following areas

   41. eliminating discrimination
   42. promoting equal opportunities
   3. promoting good race relations

Recommendation: Further impact assessment required Yes No √
**Finance**

<table>
<thead>
<tr>
<th>Directorate / Department</th>
<th>Policy title / Service</th>
<th>Assessor (s)</th>
<th>New or existing policy / service</th>
<th>Date of assessment</th>
</tr>
</thead>
<tbody>
<tr>
<td>Finance</td>
<td>Finance</td>
<td>Karen Jackson</td>
<td>existing</td>
<td>25/04/05</td>
</tr>
</tbody>
</table>

1. Who is responsible for the policy / Service (function) that is being assessed?
   - Neil Priestley – Director of Finance

2. Describe the aims, objectives and purpose of the policy / service
   - The department exists to provide a quality financial management and financial services function for the organisation and to provide financial advise as appropriate.

3. Are there associated objectives of the policy / service? - if so please explain
   - Working within budgets agreed and set by the Trust Board.
   - Delivering efficiency savings agreed at Trust Board.
   - Delivering efficiency savings imposed at a national level.

   e.g. National Service Framework, national targets

4. Who will benefit from this policy / service?
   - All Staff
   - Carers/Patients – Cashiers, patients monies etc

5. What outcomes do you want to achieve from this policy / service?
   - To break even year on year and to reinvest any surpluses in improvements to patient care.
<table>
<thead>
<tr>
<th>Question</th>
<th>Response</th>
</tr>
</thead>
<tbody>
<tr>
<td>7. Could the policy/service have a differential impact on different racial groups Yes No (if yes – which groups)</td>
<td>Access to services such as payroll, cashiers etc could be difficult due to language barriers but interpretation service via link workers is available.</td>
</tr>
<tr>
<td>8. Briefly explain any reasons / evidence you have regarding this impact</td>
<td>None</td>
</tr>
<tr>
<td>9. If you answered yes to the above, please describe the impact of the policy/service (positive or negative) on any of the following areas</td>
<td>NA</td>
</tr>
<tr>
<td>43. eliminating discrimination</td>
<td></td>
</tr>
<tr>
<td>44. promoting equal opportunities</td>
<td></td>
</tr>
<tr>
<td>3. promoting good race relations</td>
<td></td>
</tr>
</tbody>
</table>

Recommendation: Further impact assessment required Yes No no
Hotel Services
Security Uniform Policy

<table>
<thead>
<tr>
<th>Directorate / Department</th>
<th>Policy title / Service</th>
<th>Assessor (s)</th>
<th>New or existing policy / service</th>
<th>Date of assessment</th>
</tr>
</thead>
<tbody>
<tr>
<td>Hotel Services Security</td>
<td>Uniform policy</td>
<td>M Dixon</td>
<td>Existing</td>
<td>25.5.5</td>
</tr>
</tbody>
</table>

1. Who is responsible for the policy / Service (function) that is being assessed?
   - Managers

2. Describe the aims, objectives and purpose of the policy / service
   - To ensure a safe, corporate and appropriate appearance of all staff in the department

3. Are there associated objectives of the policy / service?- if so please explain
   - To give confidence to members of the public and to ensure that staff are recognisable and approachable
   - e.g. National Service Framework, national targets
   - Health and safety regulations

4. Who will benefit from this policy / service?
   - Staff and users of the service

5. What outcomes do you want to achieve from this policy / service?
   - Standardisation of appearance for corporate reasons. Staff easily identifiable
| 6. What factors could contribute or detract from the outcome? | Lack of funds  
Unsuitable selection of uniform  
Personal habits |
<table>
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</thead>
<tbody>
<tr>
<td>7. Could the policy/service have a differential impact on different racial groups Yes</td>
<td>Yes</td>
</tr>
<tr>
<td>No</td>
<td></td>
</tr>
<tr>
<td>( if yes – which groups )</td>
<td></td>
</tr>
<tr>
<td>8. Briefly explain any reasons / evidence you have regarding this impact</td>
<td>Total body covering</td>
</tr>
<tr>
<td>eg take up of services, different needs, language barriers, consultation or complaints etc</td>
<td></td>
</tr>
</tbody>
</table>
| 9. If you answered yes to the above, please describe the impact of the policy/service (positive or negative) on any of the following areas | 45. eliminating discrimination  
Negative  
46. promoting equal opportunities  
Negative  
3. promoting good race relations  
Negative |
<p>| Recommendation : Further impact assessment required Yes + No | Yes + No |</p>
<table>
<thead>
<tr>
<th>Directorate / Department</th>
<th>Policy title / Service</th>
<th>Assessor (s)</th>
<th>New or existing policy / service</th>
<th>Date of assessment</th>
</tr>
</thead>
<tbody>
<tr>
<td>Hotel Services Security</td>
<td>Access to service</td>
<td>M Dixon</td>
<td>Existing</td>
<td>25.5.5</td>
</tr>
</tbody>
</table>

1. Who is responsible for the policy / Service (function) that is being assessed?

Managers

2. Describe the aims, objectives and purpose of the policy / service

To provide a full range of security services to patients, staff and visitors

3. Are there associated objectives of the policy / service? - if so please explain

e.g. National Service Framework, national targets

4. Who will benefit from this policy / service?

All users of the service

5. What outcomes do you want to achieve from this policy / service?

A good level of security for the trust, which protects both trust and personal property and reassures users of the trusts service
| 6. What factors could contribute or detract from the outcome? | Lack of funds  
Staff not committed to the job |
|---|---|
| 7. Could the policy/service have a differential impact on different racial groups  
Yes  
No  
(if yes – which groups) | no |
| 8. Briefly explain any reasons / evidence you have regarding this impact  
eg take up of services, different needs, language barriers, consultation or complaints etc | |
| 9. If you answered yes to the above, please describe the impact of the policy/service (positive or negative) on any of the following areas  
47. eliminating discrimination  
48. promoting equal opportunities  
3. promoting good race relations | |
| Recommendation :  
Further impact assessment required  
Yes  
No  
X |
### Human Resources

<table>
<thead>
<tr>
<th>Directorate / Department</th>
<th>Policy title / Service</th>
<th>Assessor(s)</th>
<th>New or existing policy / service</th>
<th>Date of assessment</th>
</tr>
</thead>
<tbody>
<tr>
<td>Human resources</td>
<td>Recruitment and selection</td>
<td>Jane Clawson, Millie Douglas</td>
<td>Existing</td>
<td>05/05/05</td>
</tr>
</tbody>
</table>

1. **Who is responsible for the policy / Service (function) that is being assessed?**

   Director of Human Resources, John Watts

2. **Describe the aims, objectives and purpose of the policy / service**

   To meet the trust’s present and future workforce needs
   To ensure cost-effective recruitment and selection
   To ensure a standardised approach to recruitment
   To encourage staff to apply for posts to suit their career development
   To promote the trust as a good employer
   To provide equal opportunity to all applicants
   To provide a basis for management training and development

3. **Are there associated objectives of the policy / service?**

   e.g. National Service Framework, national targets

   Trust’s equal opportunities policy
   Compliance with anti-discrimination and equal treatment legislation
   NHS plan – increased staffing levels, especially in professional groups
   HR in the NHS plan – working towards a model employer
   Vital connections – achieving a workforce representative of the local community

4. **Who will benefit from this policy / service?**

   All staff and people wanting to work in the NHS
   Patients – who will be better served by full staffing levels and staff suitable for the post they are in

5. **What outcomes do you want to achieve from this policy / service?**

   That the trust gets the right person for the job in a cost effective and timely manner
   That all applicants are treated fairly and equitably at all stages of the process
   That unsuccessful applicants understand the reasons for this decision
   That the trust employs a diverse workforce, representative of the local community
| 6. What factors could contribute or detract from the outcome?          | HR systems and staffing levels  
|                                                                    | Managers understanding of recruitment and selection  
|                                                                    | Where job information is advertised and how  
|                                                                    | Job specifications  
| 7. Could the policy/service have a differential impact on different racial groups Yes ✓ No |
| (if yes – which groups)                                             | Several racial groups (eg Pakistani, Somalia, Bangladeshi) are less visible in the workforce despite their being large numbers from these backgrounds in the community. |
| 8. Briefly explain any reasons / evidence you have regarding this impact  | Equal opportunities monitoring data  
| eg take up of services, different needs, language barriers, consultation or complaints etc  
| 9. If you answered yes to the above, please describe the impact of the policy/service (positive or negative) on any of the following areas  
| 49. eliminating discrimination  
| 50. promoting equal opportunities  
| 3. promoting good race relations  | 1 positive. Staff are trained in recruitment and selection processes and anti-discriminatory practices  
|                                                                 | 2 positive, as above  
|                                                                 | 3 positive, applicants are well informed of the trust’s anti-discriminatory and equal opportunity principles and practices  
| Recommendation: Further impact assessment required      Yes ✓ |
### Human Resources

<table>
<thead>
<tr>
<th>Directorate / Department</th>
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<th>Assessor (s)</th>
<th>New or existing policy / service</th>
<th>Date of assessment</th>
</tr>
</thead>
<tbody>
<tr>
<td>Human Resources</td>
<td>Grievance And Dispute Procedure</td>
<td>Jane Clawson, Millie Douglas</td>
<td>Existing</td>
<td>05/05/05</td>
</tr>
</tbody>
</table>

1. **Who is responsible for the policy / Service (function) that is being assessed?**
   - Director Of HR, John Watts

2. **Describe the aims, objectives and purpose of the policy / service**
   - To provide agreed means for employees individually and collectively resolve workplace disagreements
   - To facilitate grievances being settled fairly, within minimum delay and as near as possible to point of origin
   - To prevent disruption to services by industrial action
   - To integrate means of handling individual and collective grievances

3. **Are there associated objectives of the policy / service?**
   - If so please explain
   - Improving working lives standard
   - e.g. National Service Framework, national targets

4. **Who will benefit from this policy / service?**
   - Trust employees – who welcome a consistent approach to grievance resolution

5. **What outcomes do you want to achieve from this policy / service?**
   - Employees to understand the mechanisms for resolving grievances fairly and quickly
   - Prevention of disruption to service
   - Good working relationships

6. **What factors could contribute or Individuals ability to raise an issue**
<table>
<thead>
<tr>
<th>Question</th>
<th>Answer</th>
</tr>
</thead>
<tbody>
<tr>
<td>detract from the outcome?</td>
<td>Managers ability to tackle issues</td>
</tr>
<tr>
<td></td>
<td>Partnership working with union representatives</td>
</tr>
<tr>
<td>7. Could the policy/service have a differential impact on different racial groups</td>
<td>This policy/procedure is accessible to all staff. It is recognised that the Trust does not currently link ethnic background to formal grievance cases and will be doing in the near future.</td>
</tr>
<tr>
<td>8. Briefly explain any reasons / evidence you have regarding this impact</td>
<td></td>
</tr>
<tr>
<td></td>
<td>eg take up of services, different needs, language barriers, consultation or complaints etc</td>
</tr>
<tr>
<td>9. If you answered yes to the above, please describe the impact of the policy/service (positive or negative) on any of the following areas</td>
<td>Trust’s grievance procedure provides a mechanism for staff to raise complaints/issues about their job/terms and conditions. This procedure is accessible and available to all staff regardless of ethnic background or racial grouping.</td>
</tr>
<tr>
<td></td>
<td>51. eliminating discrimination</td>
</tr>
<tr>
<td></td>
<td>52. promoting equal opportunities</td>
</tr>
<tr>
<td></td>
<td>3. promoting good race relations</td>
</tr>
<tr>
<td>Recommendation:</td>
<td>Further impact assessment required</td>
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<tr>
<td></td>
<td>Yes</td>
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</table>
## Human Resources

<table>
<thead>
<tr>
<th>Directorate / Department</th>
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<th>New or existing policy / service</th>
<th>Date of assessment</th>
</tr>
</thead>
<tbody>
<tr>
<td>Human Resources</td>
<td>Disciplinary procedure</td>
<td>Jane Clawson</td>
<td>Existing and draft revision</td>
<td>05/05/05</td>
</tr>
</tbody>
</table>

1. Who is responsible for the policy / Service (function) that is being assessed?
   - Director of HR, John Watts

2. Describe the aims, objectives and purpose of the policy / service
   - To ensure a fair approach to issues of employee misconduct
   - To ensure a consistent approach (with regard for the merits of each case)

3. Are there associated objectives of the policy / service? - if so please explain
   - Improving working lives standards
   - e.g. National Service Framework, national targets

4. Who will benefit from this policy / service?
   - Trust employees – who welcome a consistent approach to conduct issues

5. What outcomes do you want to achieve from this policy / service?
   - Employees to understand and work within the rules of good conduct
   - Employees who do not to be dealt with in a manner consistent across the trust

6. What factors could contribute or prevent effective implementation of the policy / service?
   - Managers ability to tackle conduct issues appropriately
<table>
<thead>
<tr>
<th>Question</th>
<th>Response</th>
</tr>
</thead>
<tbody>
<tr>
<td>7. Could the policy/service have a differential impact on different racial groups</td>
<td>No; The policy/procedure applies equally to all staff, however, the Trust does not currently link data on ethnic background to formal misconduct cases and will be doing so in the near future.</td>
</tr>
<tr>
<td>8. Briefly explain any reasons / evidence you have regarding this impact</td>
<td></td>
</tr>
<tr>
<td></td>
<td>eg take up of services, different needs, language barriers, consultation or complaints etc</td>
</tr>
<tr>
<td>9. If you answered yes to the above, please describe the impact of the policy/service (positive or negative) on any of the following areas</td>
<td>1. Positive. Trust view’s discrimination as misconduct</td>
</tr>
<tr>
<td></td>
<td>53. eliminating discrimination</td>
</tr>
<tr>
<td></td>
<td>54. promoting equal opportunities</td>
</tr>
<tr>
<td></td>
<td>3. promoting good race relations</td>
</tr>
</tbody>
</table>

Recommendation: Further impact assessment required Yes
### Human Resources

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<th>New or existing policy / service</th>
<th>Date of assessment</th>
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</thead>
<tbody>
<tr>
<td>Human Resources</td>
<td>Capability Procedure</td>
<td>Jane Clawson, Millie Douglas</td>
<td>Existing</td>
<td>09/05/05</td>
</tr>
</tbody>
</table>

1. Who is responsible for the policy / Service (function) that is being assessed?
   - Director of HR, John Watts

2. Describe the aims, objectives and purpose of the policy / service
   - Provide a framework for managers to take the appropriate course of action once a poorly performing employee has been identified.
   - Ensure that poorly performing employees are treated fairly and consistently across the Trust.

3. Are there associated objectives of the policy / service? - if so please explain
   - e.g. National Service Framework, national targets

4. Who will benefit from this policy / service?
   - All staff – ensuring that if their performance becomes poor it will be dealt with appropriately.

5. What outcomes do you want to achieve from this policy / service?
   - For managers to tackle poorly performing employees appropriately and in good time

6. What factors could contribute or Management discretion on an individual’s performance
<table>
<thead>
<tr>
<th>Question</th>
<th>Response</th>
</tr>
</thead>
<tbody>
<tr>
<td>7. Could the policy/service have a differential impact on different racial groups</td>
<td>No (if yes – which groups)</td>
</tr>
<tr>
<td>The policy/procedure is applicable to all poorly performing staff. It will be a manager who will invoke this procedure based on judgement and evidence they have gathered regarding performance. The Trust has recruited professionals from overseas and provided a comprehensive adaptation to the NHS. The different needs of overseas professionals may have an impact on performance. It is recognised, therefore, that monitoring of ethnic background against this policy would be beneficial.</td>
<td></td>
</tr>
<tr>
<td>8. Briefly explain any reasons / evidence you have regarding this impact</td>
<td>eg take up of services, different needs, language barriers, consultation or complaints etc</td>
</tr>
<tr>
<td>9. If you answered yes to the above, please describe the impact of the policy/service (positive or negative) on any of the following areas</td>
<td>This policy provides a framework for managers to manage performance and for individuals to understand what is expected of them. This is positive in terms of eliminating discrimination.</td>
</tr>
<tr>
<td>55. eliminating discrimination</td>
<td></td>
</tr>
<tr>
<td>56. promoting equal opportunities</td>
<td></td>
</tr>
<tr>
<td>3. promoting good race relations</td>
<td></td>
</tr>
<tr>
<td>Recommendation:</td>
<td>Further impact assessment required                                                                                               No</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Directorate / Department</th>
<th>Policy title / Service</th>
<th>Assessor (s)</th>
<th>New or existing policy / service</th>
<th>Date of assessment</th>
</tr>
</thead>
<tbody>
<tr>
<td>Human Resources</td>
<td>Flexible Patterns of Working Policy</td>
<td>Millie Douglas Jane Clawson</td>
<td>Existing</td>
<td>5 May 2005</td>
</tr>
</tbody>
</table>

1. Who is responsible for the policy / Service (function) that is being assessed?  
Director of Human Resources : Mr John Watts

2. Describe the aims, objectives and purpose of the policy / service  
In accordance with the Trust’s Equal Opportunities policy, it is intended that whenever possible, an employee’s or potential employee’s request for a flexible working contract will be accommodated. Flexible contractual arrangements and work patterns include: Job Sharing, Career Break Scheme, Flexi Time, Part-Time Working, Flexi-Year/Annual Hours and Term-Time Contracts.

3. Are there associated objectives of the policy / service? - if so please explain  
- Improving Working Lives Standards  
- Equal Opportunities  
- Legislation re Right to Request Flexible Working  
- e.g. National Service Framework, national targets

4. Who will benefit from this policy / service?  
These schemes are open to all full-time and part-time, male and female employees therefore there is a potential for all staff who require flexible patterns of working to benefit. It will also help the organisation to recruit and retain more staff.

5. What outcomes do you want to achieve from this policy / service?  
- Attracting employees who have appropriate skills and experience into vacancies and helping to retain staff whose circumstances change.  
- Supports the Trust’s commitment to equal opportunities, promoting diversity and Improving Working Lives Standard  
- Contributes towards being an employer of choice.
<table>
<thead>
<tr>
<th>6. What factors could contribute or detract from the outcome?</th>
<th>Communication and raising awareness of benefits to the service and staff morale would positively contribute to the uptake of flexible working.</th>
</tr>
</thead>
</table>
| 7. Could the policy/service have a differential impact on different racial groups | Yes  
( if yes – which groups ) |
| 8. Briefly explain any reasons / evidence you have regarding this impact | Policy is available to all staff  
eg take up of services, different needs, language barriers, consultation or complaints etc |
| 9. If you answered yes to the above, please describe the impact of the policy/service (positive or negative) on any of the following areas |  
57. eliminating discrimination  
58. promoting equal opportunities  
3. promoting good race relations |
| Recommendation : Further impact assessment required | Yes  
No  
√ |
# Human Resources

<table>
<thead>
<tr>
<th>Directorate / Department</th>
<th>Policy title / Service</th>
<th>Assessor (s)</th>
<th>New or existing policy / service</th>
<th>Date of assessment</th>
</tr>
</thead>
<tbody>
<tr>
<td>Human Resources</td>
<td>Reimbursement of Removal and Associated Expenses Policy</td>
<td>Millie Douglas Jane Clawson</td>
<td>Existing</td>
<td>5 May 2005</td>
</tr>
</tbody>
</table>

1. **Who is responsible for the policy / Service (function) that is being assessed?**
   - Director of Human Resources: Mr John Watts

2. **Describe the aims, objectives and purpose of the policy / service**
   - To facilitate the relocation of new Trust employees and their families to the Sheffield area in a fair and equitable manner.

3. **Are there associated objectives of the policy / service?**
   - no

   - e.g. National Service Framework, national targets

4. **Who will benefit from this policy / service?**
   - All substantive medical and dental employees and those on fixed term appointments of three or more years with the exception of Specialist registrars who are covered by a separate lead unit policy.

5. **What outcomes do you want to achieve from this policy / service?**
   - To enable the recruitment of medical and dental staff who do not live within a reasonable commuting distance to find residence within the Sheffield area.
<table>
<thead>
<tr>
<th>6. What factors could contribute or detract from the outcome?</th>
<th>Finding suitable affordable accommodation.</th>
</tr>
</thead>
<tbody>
<tr>
<td>7. Could the policy/service have a differential impact on different racial groups?</td>
<td>Yes No ✓ (if yes – which groups)</td>
</tr>
<tr>
<td>Applies to all employees who must change residence as a necessity to allow the individual to carry out the duties and responsibilities of their post effectively</td>
<td></td>
</tr>
<tr>
<td>8. Briefly explain any reasons / evidence you have regarding this impact</td>
<td>eg take up of services, different needs, language barriers, consultation or complaints etc</td>
</tr>
<tr>
<td>9. If you answered yes to the above, please describe the impact of the policy/service (positive or negative) on any of the following areas</td>
<td></td>
</tr>
<tr>
<td>1. eliminating discrimination</td>
<td></td>
</tr>
<tr>
<td>2. promoting equal opportunities</td>
<td></td>
</tr>
<tr>
<td>3. promoting good race relations</td>
<td></td>
</tr>
<tr>
<td>Recommendation: Further impact assessment required</td>
<td>Yes No ✓</td>
</tr>
<tr>
<td>Directorate / Department</td>
<td>Policy title / Service</td>
</tr>
<tr>
<td>-------------------------</td>
<td>------------------------</td>
</tr>
<tr>
<td>Human Resources</td>
<td>Carers and Domestic</td>
</tr>
</tbody>
</table>

1. Who is responsible for the policy / Service (function) that is being assessed?
   - Director of Human Resources : Mr John Watts

2. Describe the aims, objectives and purpose of the policy / service
   - To enable employees to take leave in the event of unforeseen, unplanned urgent domestic or carers circumstances
   - To support employees pursuing adoption arrangements or paternity leave
   - To support employees who wish to take leave during their child’s first 14 years
   - To promote equal opportunities in the pursuance of flexible working arrangements for employees who do not fall into the above categories

3. Are there associated objectives of the policy / service? - if so please explain
   - National guidelines for maternity, paternity, adoption leave entitlements
   - Legislation re the right to time off to deal with an emergency
   - e.g. National Service Framework, national targets

4. Who will benefit from this policy / service?
   - Leave arrangements apply to all staff. However, to be eligible for certain leave employees will have to satisfy some service requirements with the National Health Service

5. What outcomes do you want to achieve from this policy / service?
   - That all employees can achieve a healthy work / life balance through carers or domestic leave when changes their circumstances require it
<table>
<thead>
<tr>
<th>6. What factors could contribute or detract from the outcome?</th>
<th>The requirements of the service if several employees in the same area requires leave at the same time. Some types of leave, particularly unplanned urgent domestic or carer’s distress can be subject to managerial discretion where some managers could potentially be more accommodating than others.</th>
</tr>
</thead>
<tbody>
<tr>
<td>7. Could the policy/service have a differential impact on different racial groups Yes No (if yes – which groups)</td>
<td>There should be no differential impact on employees from different racial groups as the policy applies the same to all staff who meet the requirements for the leave. Whilst the needs of the service should be taken into account, sympathetic consideration must be given to request for Carer’s leave, Parental leave or Domestic leave in accordance with the policy.</td>
</tr>
<tr>
<td>8. Briefly explain any reasons / evidence you have regarding this impact eg take up of services, different needs, language barriers, consultation or complaints etc</td>
<td>No evidence of differential impact</td>
</tr>
<tr>
<td>9. If you answered yes to the above, please describe the impact of the policy/service (positive or negative) on any of the following areas</td>
<td></td>
</tr>
<tr>
<td>1. eliminating discrimination</td>
<td></td>
</tr>
<tr>
<td>2. promoting equal opportunities</td>
<td></td>
</tr>
<tr>
<td>3. promoting good race relations</td>
<td></td>
</tr>
<tr>
<td>Recommendation : Further impact assessment required Yes No</td>
<td>Yes No √</td>
</tr>
<tr>
<td>Directorate / Department</td>
<td>Policy title / Service</td>
</tr>
<tr>
<td>--------------------------</td>
<td>------------------------</td>
</tr>
<tr>
<td>Human Resources</td>
<td>Organisational Change, Pay Protection and Staff Arrangements</td>
</tr>
</tbody>
</table>

1. Who is responsible for the policy / Service (function) that is being assessed?
   Director of Human Resources : Mr John Watts

2. Describe the aims, objectives and purpose of the policy / service
   To ensure the most appropriate pay protection and staff arrangements are achieved following organisational change such as mergers, rationalisations, relocations, competitive tendering, skill mix reviews etc. When organisational change is proposed, management will identify the number and content of posts required within the new service and the number and content of posts occupied by substantive post holders and identify any exact matches, shortfall or surplus at particular pay levels and or within particular work groups.

3. Are there associated objectives of the policy / service? - if so please explain
   Employment Rights Act 1996  
   e.g. National Service Framework, national targets

4. Who will benefit from this policy / service?
   All staff who are involved in organisational change

5. What outcomes do you want to achieve from this policy / service?
   That staff are treated fairly and not disadvantaged because of the change
<table>
<thead>
<tr>
<th>Question</th>
<th>Response</th>
</tr>
</thead>
<tbody>
<tr>
<td>6. What factors could contribute or detract from the outcome?</td>
<td>The nature of the change and the implications for staff particularly if the outcome of the change was unpopular</td>
</tr>
</tbody>
</table>
| 7. Could the policy/service have a differential impact on different racial groups? | Yes  
( if yes – which groups )                                               |
| 8. Briefly explain any reasons / evidence you have regarding this impact | The impact will be on all staff affected by the change not due to any racial element |
| 9. If you answered yes to the above, please describe the impact of the policy/service (positive or negative) on any of the following areas |  
1. eliminating discrimination  
2. promoting equal opportunities  
3. promoting good race relations |

**Recommendation :**  
Further impact assessment required  
Yes  
No  
✓
## Human Resources

<table>
<thead>
<tr>
<th>Directorate / Department</th>
<th>Policy title / Service</th>
<th>Assessor (s)</th>
<th>New or existing policy / service</th>
<th>Date of assessment</th>
</tr>
</thead>
<tbody>
<tr>
<td>Human Resources</td>
<td>Equal Opportunities Policy</td>
<td>Millie Douglas, Jane Clawson</td>
<td>Existing</td>
<td>5 May 2005</td>
</tr>
</tbody>
</table>

1. **Who is responsible for the policy / Service (function) that is being assessed?**
   - Director of Human Resources: Mr John Watts

2. **Describe the aims, objectives and purpose of the policy / service**
   - To ensure that all employees, candidates for employment and users of the service, shall receive equal treatment and shall not be disadvantaged for any reason

3. **Are there associated objectives of the policy / service?**
   - Legislation covering: race relations, disability, sex discrimination, sexual orientation and religion
   - Recruitment and Selection
   - Rehabilitation of Offenders
   - Harassment at Work
   - Carers / Domestic Leave Arrangements
   - Flexible Working
   - Disciplinary/Grievance/Capability Procedures

4. **Who will benefit from this policy / service?**
   - Applies to all applicants for posts within the Trust, to all employees where a Contract of Employment or a contract for training within the Trust exists, any casual, self employed, bank workers for whom there is a contract for services, to those who are on Trust premises under a Letter of Authority, Honorary Contract, work experience placement or who is employed under the volunteer scheme. Will ultimately benefit service users

5. **What outcomes do you want to achieve from this policy / service?**
   - That all employees or potential employees regardless of background are treated in a fair and equitable way. The Trust will be viewed as an employer of choice where discrimination on any grounds will not be tolerated
6. What factors could contribute or detract from the outcome?  

The principles within the policy promote fair practices for all. However, the implementation is dependant on the individuals executing it in a consistent way.

---

7. Could the policy/service have a differential impact on different racial groups? Yes  Y  No

(If yes – which groups)

There is a perception that people from most BME groups are less likely to get equal opportunities.

---

8. Briefly explain any reasons / evidence you have regarding this impact:

- Discussions with BME staff employed within the Trust
- Staff attitude survey
- Lack of BME representation in senior positions

- eg take up of services, different needs, language barriers, consultation or complaints etc

---

9. If you answered yes to the above, please describe the impact of the policy/service (positive or negative) on any of the following areas:

1. eliminating discrimination
2. promoting equal opportunities
3. promoting good race relations

The principles of this policy are positive in respect of the general duties. However, we need to ensure our monitoring processes are effective to capture the incidents of potential inequalities amongst BME groups. We will particularly focus on the monitoring requirements under the specific duties of the RR(A)A and take appropriate action to redress any inequalities found.

---

Recommendation: Further impact assessment required  Yes  Y
<table>
<thead>
<tr>
<th>Directorate / Department</th>
<th>Policy title / Service</th>
<th>Assessor(s)</th>
<th>New or existing policy / Service</th>
<th>Date of assessment</th>
</tr>
</thead>
<tbody>
<tr>
<td>Patient Partnership</td>
<td>Information for Patients Policy</td>
<td>Sally Parker Patient Information Manager</td>
<td>New</td>
<td>22/04/05</td>
</tr>
</tbody>
</table>

1. **Who is responsible for the policy / Service (function) that is being assessed?**

   The Patient Information Manager and the Patient Information Strategy Group

2. **Describe the aims, objectives and purpose of the policy / service**

   To ensure, through a variety of mechanisms, that the Trust provides the highest quality information for patients and the public which has been developed in consultation with users and produced in the most cost effective manner.

3. **Are there associated objectives of the policy / service? - if so please explain**

   - National Service Frameworks information policies
   - Compliance with Disability Discrimination Act
   - Compliance with Race Relations Amendment Act
   - Standards for Better Health
   - Clinical Negligence Scheme for Trusts
   - NHS New Plan, Chapter 10
   - NHS Corporate Identity requirements
   - Trust standards for patient information

4. **Who will benefit from this policy / service?**

   All patients and public who use or have dealings with the Trust

5. **What outcomes do you want to achieve from this policy / service?**

   That every user of our service is empowered to access high quality information in the medium and/or language of their choice that allows them full involvement in decisions about their health care.
6. What factors could contribute or detract from the outcome?

<table>
<thead>
<tr>
<th>Upper Management support or lack of it</th>
</tr>
</thead>
<tbody>
<tr>
<td>Resources available for implementing the policy or lack of</td>
</tr>
<tr>
<td>General literacy levels amongst users</td>
</tr>
<tr>
<td>Staff and public attitude to/ awareness of the policy</td>
</tr>
<tr>
<td>Compromising on quality to save money</td>
</tr>
</tbody>
</table>

7. Could the policy/service have a differential impact on different racial groups

| Yes ✔ |
| No |

(if yes – which groups)

| Differential literacy levels in mother tongue languages |
| Differential IT literacy levels |
| Lack of community based support network for certain groups – newly arrived in Sheffield |
| Cultural barriers to the access of information |
| Unidentified needs arising from lack of awareness or contact with a specific group |

8.Briefly explain any reasons / evidence you have regarding this impact

| eg take up of services, different needs, language barriers, consultation or complaints etc |

Much of the evidence for this impact has to be drawn from the departments experience as the facilitators of the Interpretation service, which identifies some of the differentials mentioned above. Also, the central database clearly states where information is provided in other languages and media and examples are very rare. No evidence of requests for information in other languages from individual patients Majority requests come through clinical staff wanting results from other countries translated so they can treat a patient who’s mother tongue is not English.

9. If you answered yes to the above, please describe the impact of the policy/service (positive or negative) on any of the following areas

| 1. Very positive long term impact that becomes more significant as each new piece of information in other languages/media is added to the central database. |
| 2. Very positive long-term impact |
| 3. Very positive |

| 3. eliminating discrimination |
| 4. promoting equal opportunities |
| 3. promoting good race relations |

Recommendation: Further impact assessment required

<p>| Yes ✔ |
| No |</p>
<table>
<thead>
<tr>
<th>Directorate / Department</th>
<th>Policy title / Service</th>
<th>Assessor (s)</th>
<th>New or existing policy / service</th>
<th>Date of assessment</th>
</tr>
</thead>
<tbody>
<tr>
<td>Volunteering</td>
<td>Volunteer Protocol</td>
<td>Jackie Knowles</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

1. Who is responsible for the policy / Service (function) that is being assessed?
   - Director Patient Services Dept -

2. Describe the aims, objectives and purpose of the policy / service
   - To encourage a diverse population into volunteering as a way of skill building, employment and to deliver an enhanced service to patients, staff and visitors to the Trust.

3. Are there associated objectives of the policy / service? - if so please explain
   - In development with the Young People’s Project, targeting specific areas of youth population such as disadvantaged BME and Disabled Groups
   - e.g. National Service Framework, national targets

4. Who will benefit from this policy / service?
   - All people across the city.

5. What outcomes do you want to achieve from this policy / service?
   - To promote volunteering as an opportunity to access training and employment within the Trust.
<table>
<thead>
<tr>
<th>Question</th>
<th>Answer</th>
</tr>
</thead>
<tbody>
<tr>
<td>6. What factors could contribute or detract from the outcome?</td>
<td>Funds, placements. Encouraging people from areas of the community that are not already actively involved in volunteering.</td>
</tr>
<tr>
<td>7. Could the policy/service have a differential impact on different racial groups Yes X No (if yes – which groups)</td>
<td>Many BME groups are under represented</td>
</tr>
<tr>
<td>8. Briefly explain any reasons / evidence you have regarding this impact</td>
<td>Many people are from disadvantaged backgrounds that perhaps do not have the opportunity to access this area. Educational needs/barriers, lack of awareness of the opportunities available within volunteering language barriers etc.</td>
</tr>
<tr>
<td>9. If you answered yes to the above, please describe the impact of the policy/service (positive or negative) on any of the following areas</td>
<td>As one of the largest employers in Sheffield, we do not reflect largely on the local community. Encouraging people from the local community to volunteer would reflect more evenly.</td>
</tr>
<tr>
<td>5. eliminating discrimination</td>
<td>People with varying skills from various backgrounds would develop a hugely successful workforce that would in turn encourage equal opps for all.</td>
</tr>
<tr>
<td>6. promoting equal opportunities</td>
<td>By working together to meet the needs of the community would promote excellent relationships within the community.</td>
</tr>
<tr>
<td>3. promoting good race relations</td>
<td>Recommendation: Further impact assessment required Yes √ No</td>
</tr>
</tbody>
</table>
### Chief Nurse’s Office
#### Link worker Service

<table>
<thead>
<tr>
<th>Directorate / Department</th>
<th>Policy title / Service</th>
<th>Assessor(s)</th>
<th>New or existing policy / service</th>
<th>Date of assessment</th>
</tr>
</thead>
<tbody>
<tr>
<td>Patient Partnership Department</td>
<td>Linkworker service</td>
<td>Chetna Patel Sue Butler</td>
<td>Existing</td>
<td></td>
</tr>
</tbody>
</table>

1. **Who is responsible for the policy / Service (function) that is being assessed?**
   - Chetna Patel – Diversity Manager
   - Sue Butler – Head of Patient Partnership

2. **Describe the aims, objectives and purpose of the policy / service**
   - **Aims of the service** – To provide a Linkworker service across the hospital trust
   - Raise staff awareness and understanding of the role of the Linkworker and the Linkworker service

3. **Are there associated objectives of the policy / service?**
   - If so please explain
   - **e.g. National Service Framework, national targets**

4. **Who will benefit from this policy / service?**
   - Patients and staff across the Trust

5. **What outcomes do you want to achieve from this policy / service?**
   - Better communication between patients and staff
   - Create understanding of cultural issues of BME communities
   - Increase access of services for BME communities
   - Raise staff awareness of Linkworker service
<table>
<thead>
<tr>
<th>Question</th>
<th>Answer</th>
</tr>
</thead>
<tbody>
<tr>
<td>6. What factors could contribute or detract from the outcome?</td>
<td>Staff training and awareness of Linkworker service</td>
</tr>
<tr>
<td>7. Could the policy/service have a differential impact on different racial groups</td>
<td>Yes ☑  No</td>
</tr>
<tr>
<td>8. Briefly explain any reasons / evidence you have regarding this impact</td>
<td></td>
</tr>
</tbody>
</table>
| 9. If you answered yes to the above, please describe the impact of the policy/service (positive or negative) on any of the following areas | | | 1. Eliminating discrimination Positive – encouraging understanding of BME communities and issues they face  
2. Promoting equal opportunities positive – Enabling patients to access services  
3. Promoting good race relations positive - Creating communication and culturally appropriate services for BME communities |

Recommendation:  Further impact assessment required  Yes ☑  No
<table>
<thead>
<tr>
<th>Directorate / Department</th>
<th>Policy title / Service</th>
<th>Assessor (s)</th>
<th>New or existing policy / service</th>
<th>Date of assessment</th>
</tr>
</thead>
<tbody>
<tr>
<td>Service Development</td>
<td>Health Informatics</td>
<td>David Whitham Informatics Director</td>
<td>Existing</td>
<td>May 2005</td>
</tr>
</tbody>
</table>

1. Who is responsible for the policy / Service (function) that is being assessed?

The Informatics Directorate is part of the Service Development Directorate. All service areas are responsible to Chris Linacre, Director of Service Development. All Senior Departmental Managers report via David Whitham the Informatics Director to him.

2. Describe the aims, objectives and purpose of the policy / service

The Informatics Directorate provides services in the following areas:
- IT Services
- Telecommunications
- Medical Records
- National Programme for IT
- Strategy development
- Information Governance

3. Are there associated objectives of the policy / service? - if so please explain

e.g. National Service Framework, national targets

Achieving national targets, standards and delivering the National Programme for IT. When planning services and developments, both Trust and our Commissioners bear in mind anything which makes service provision impact differently on racial or ethnic groups. This decision making is often directed nationally and no local considerations have to be made.

4. Who will benefit from this policy / service?

Our patients and staff benefit from our services being provided in a timely and accessible fashion, in line with National Standards.

5. What outcomes do you want to achieve from this policy / service?

A good and equitable level of service to staff and patients.
<table>
<thead>
<tr>
<th>6. What factors could contribute or detract from the outcome?</th>
<th>Adequate levels of funding, good planning and project management.</th>
</tr>
</thead>
<tbody>
<tr>
<td>7. Could the policy/service have a differential impact on different racial groups</td>
<td>Yes</td>
</tr>
<tr>
<td>(if yes – which groups)</td>
<td>I only believe that our public facing services – medical records and telecommunications could have a differential impact from an access point of view as all routine processes are carried out in English. Patient leaflets are produced in a number of different languages and access to interpreters is available.</td>
</tr>
<tr>
<td>8. Briefly explain any reasons / evidence you have regarding this impact</td>
<td>I have no evidence to support this.</td>
</tr>
<tr>
<td>eg take up of services, different needs, language barriers, consultation or complaints etc</td>
<td></td>
</tr>
<tr>
<td>9. If you answered yes to the above, please describe the impact of the policy/service (positive or negative) on any of the following areas</td>
<td></td>
</tr>
<tr>
<td>9. eliminating discrimination</td>
<td></td>
</tr>
<tr>
<td>10. promoting equal opportunities</td>
<td></td>
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<tr>
<td>3. promoting good race relations</td>
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</tbody>
</table>

Recommendation: Further impact assessment required | Yes | No |
## Service Development Waiting Lists

<table>
<thead>
<tr>
<th>Directorate / Department</th>
<th>Policy title / Service</th>
<th>Assessor(s)</th>
<th>New or existing policy / service</th>
<th>Date of assessment</th>
</tr>
</thead>
<tbody>
<tr>
<td>Service Development</td>
<td>Waiting List Policy</td>
<td>Dr A Peck</td>
<td>Existing Policy</td>
<td>April 2005</td>
</tr>
</tbody>
</table>

1. Who is responsible for the policy / Service (function) that is being assessed?

   Director of Service Development

2. Describe the aims, objectives and purpose of the policy / service

   Ensure that the Trust’s waiting list for both outpatients and inpatients are I) managed in accordance with national policies and best practice ii) equitable access for all patients iii) managed in an effective and efficient manner to meet waiting time guarantees.

3. Are there associated objectives of the policy / service? - if so please explain

   e.g. National Service Framework, national targets

   Achieve targets for 2008 of an 18 week maximum wait from referral to treatment.

4. Who will benefit from this policy / service?

   All patients.

5. What outcomes do you want to achieve from this policy / service?

   Achieve objectives set out in 2 above.
6. What factors could contribute or detract from the outcome? | Lack of investment by commissioners to provide enough capacity to treat patients.

7. Could the policy/service have a differential impact on different racial groups | No.
   Yes No
   (if yes – which groups)

8. Briefly explain any reasons / evidence you have regarding this impact | Waiting list policy is applied in the same way to all patients.
   eg take up of services, different needs, language barriers, consultation or complaints etc

9. If you answered yes to the above, please describe the impact of the policy/service (positive or negative) on any of the following areas | N/A

   - 11. eliminating discrimination
   - 12. promoting equal opportunities
   - 3. promoting good race relations

Recommendation: Further impact assessment required | Yes No
## Service Development

### Internal Capacity Planning Process

<table>
<thead>
<tr>
<th>Directorate / Department</th>
<th>Policy title / Service</th>
<th>Assessor(s)</th>
<th>New or existing policy / service</th>
<th>Date of assessment</th>
</tr>
</thead>
<tbody>
<tr>
<td>Service Development</td>
<td>Internal Capacity Planning Process</td>
<td>Chris Brady Sue Humphrey</td>
<td>Existing</td>
<td>27/04/05</td>
</tr>
</tbody>
</table>

1. **Who is responsible for the policy / Service (function) that is being assessed?**
   - Director of Service Development

2. **Describe the aims, objectives and purpose of the policy / service**
   - To ensure the capacity of all the services provided by the Trust are adequate to meet the requirements of both our local community and the wider communities served by our specialist services.

3. **Are there associated objectives of the policy / service? - if so please explain**
   - This process is strongly associated with National Targets and is planned in close conjunction with our Commissioners (PCTs, acting either alone or in consortia). When planning services, both Trust and Commissioners need to bear in mind anything that makes service provision bear differentially on different racial or ethnic groups.
   - Increasingly, the Trust’s views of what service capacity it needs might be different from what Commissioners think (as expressed in the LDP, see relevant assessment). As funding now follows the patient (i.e. if a GP refers a patient to us, his PCT has no option but to pay) we are moving away from a centrally planned to a more market driven model. Ultimately, however, funding still comes via Commissioners so there is some dialogue.

4. **Who will benefit from this policy / service?**
   - Our patients and staff benefit from our Services being provided in a timely and accessible fashion, in line with National Standards.

5. **What outcomes do you want to achieve from this policy / service?**
   - The capacity of our Services to be such that treatment provision is adequate to meet the needs of our local community in a timely manner and to provide specialist services to a much wider geographical area. We also strive to maintain the best value for money, while providing services...
6. What factors could contribute or detract from the outcome?  
Funding from the commissioners of our services is the main external source of finance we have to pay for our Services. Limited resources therefore sometime constrain the service we are able to provide, and a very high proportion of the total additional resource available each year is taken up by trying to achieve targets centrally imposed on the NHS.

7. Could the policy/service have a differential impact on different racial groups  
No, not directly but the possibility should be borne in mind of a particular service being required more by certain ethnic groups than others.

8. Briefly explain any reasons / evidence you have regarding this impact  
Take up of service by different ethnic groups.  
Need for certain services by different ethnic groups.

9. If you answered yes to the above, please describe the impact of the policy/service (positive or negative) on any of the following areas  
By ensuring that all current and new services are equally available to all ethnic groups in our local community it is hope that harmonious race relations will be promoted and that discrimination is eliminated.

Recommendation: Further impact assessment required  
Yes  
No
### Service Development
**Local Delivery Plan**

<table>
<thead>
<tr>
<th>Directorate / Department</th>
<th>Policy title / Service</th>
<th>Assessor(s)</th>
<th>New or existing policy / service</th>
<th>Date of assessment</th>
</tr>
</thead>
<tbody>
<tr>
<td>Service Development</td>
<td>Local Delivery Plan</td>
<td>Chris Brady, Sue Humphrey</td>
<td>Existing</td>
<td>27/04/05</td>
</tr>
</tbody>
</table>

1. **Who is responsible for the policy / Service (function) that is being assessed?**

   Director of Service Development

2. **Describe the aims, objectives and purpose of the policy / service**

   To collate and prioritise the various bids for funding of new services or the continuation of services set up without recurrent funding from all areas of the Trust. Once the collation and prioritisation of the bids has taken place the Trust works closely with the Commissioners (PCT’s and NORCOM) of our services to take projects forward. It is the Commissioners who have the final say regarding which services are funded.

3. **Are there associated objectives of the policy / service? - if so please explain**

   - Achieving National Targets, NICE Guidance, NSF’s are all taken into account during the prioritising process.

4. **Who will benefit from this policy / service?**

   The Directorate and Services within the Trust receive funding to continue and development patient services, ultimately our patients and staff benefit from our Services being run in a fair, equitable and non-discriminatory fashion.

5. **What outcomes do you want to achieve from this policy / service?**

   To prioritise Local Delivery Plan bids in a way that allows the Trust to provide patient services of the highest standard, provided in quality facilities by a highly skilled, dedicated and diverse workforce. Ensuring that the needs of the whole of our local community are considered a priority and every effort is made to meet the needs of all our different ethnic user groups.
<table>
<thead>
<tr>
<th>6. What factors could contribute or detract from the outcome?</th>
<th>Resources only allow us to fund some of the services and developments that the Directorates would like to provide. Some developments are not financially possible.</th>
</tr>
</thead>
<tbody>
<tr>
<td>7. Could the policy/service have a differential impact on different racial groups?</td>
<td>Yes - depending on the service in question it may be that more individuals of certain ethnic groups might require a particular service. However it is the Commissioners (PCTs, either acting alone or in consortia) who hold the funding for the development of services and who have the lead role regarding where those funds are deployed.</td>
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<tr>
<td>8. Briefly explain any reasons / evidence you have regarding this impact</td>
<td>Take up of service by different ethnic groups. Need for certain services by different ethnic groups.</td>
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<tr>
<td>9. If you answered yes to the above, please describe the impact of the policy/service (positive or negative) on any of the following areas</td>
<td>By ensuring that the needs of all user groups are taken into account when funding new services/or resourcing current services it is our aim to eliminate any forms of discrimination. By ensuring that all current and new services are equally available to all ethnic groups in our local community it is hope that harmonious race relations will be promoted.</td>
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<td></td>
<td>15. eliminating discrimination</td>
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<td></td>
<td>16. promoting equal opportunities</td>
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<tr>
<td></td>
<td>3. promoting good race relations</td>
</tr>
<tr>
<td>Recommendation:</td>
<td>Further impact assessment required</td>
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</table>
## Service Development
**Capital Programme/ Medical Equipment**

<table>
<thead>
<tr>
<th>Directorate / Department</th>
<th>Policy title / Service</th>
<th>Assessor (s)</th>
<th>New or existing policy / service</th>
<th>Date of assessment</th>
</tr>
</thead>
<tbody>
<tr>
<td>Service Development</td>
<td>Capital Programme Medical Equipment</td>
<td>Chris Brady Sue Humphrey</td>
<td>Existing</td>
<td>27/04/05</td>
</tr>
</tbody>
</table>

1. **Who is responsible for the policy / Service (function) that is being assessed?**
   - Director of Service Development

2. **Describe the aims, objectives and purpose of the policy / service**
   - To collate and prioritise the various bids from all areas of the Trust for Capital Funding for amounts over £5k.
   - To collate and prioritise the various bids from all areas of the Trust for funding under the Medical Equipment Budget.

3. **Are there associated objectives of the policy / service? - if so please explain**
   - Achieving National Targets, NICE Guidance, NSF’s are all taken into account during the prioritising process. There is a strong correlation with the Capacity Planning Process.
   - Capital provision is not a ‘good’ in its own right: its justification lies in its contribution to the overall service being provided. In this sense, the process described here is really a sub set of Capacity Planning and, to some extent, of the local Delivery Plan (LDP), both of which have been separately assessed.

4. **Who will benefit from this policy / service?**
   - The Directorates and Services within the Trust receive funding to continue and develop patient services. Ultimately our patients and staff benefit from our Services being run in a fair, equitable and non-discriminatory fashion and one which supports the other service objectives of the Trust.

5. **What outcomes do you want to achieve from this policy / service?**
   - To prioritise Capital and Equipment bids in a way that allows the Trust to provide patient services of the highest standard, provided in quality facilities by a highly skilled, dedicated and diverse workforce. Ensuring that the needs of the whole of our local community are considered a priority and every effort is made to meet the needs of all our different ethic user groups.
<table>
<thead>
<tr>
<th>Question</th>
<th>Response</th>
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<tbody>
<tr>
<td>6. What factors could contribute or detract from the outcome?</td>
<td>Resources only allow us to fund some of the capital and equipment needs that the Directorates would like to see funded. It is not financially possible for all bids to be successful.</td>
</tr>
<tr>
<td>7. Could the policy/service have a differential impact on different racial groups</td>
<td>Yes  No 1  (if yes – which groups) No, but the possibility should be borne in mind of a particular service being required more by certain ethnic groups than others.</td>
</tr>
<tr>
<td>8. Briefly explain any reasons / evidence you have regarding this impact</td>
<td>Take up of service by different ethnic groups. Need for certain services by different ethnic groups.</td>
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<tr>
<td>9. If you answered yes to the above, please describe the impact of the policy/service (positive or negative) on any of the following areas</td>
<td>By ensuring that the needs of all user groups are taken into account when funding capital or equipment bids it is our aim to eliminate any forms of discrimination.</td>
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<tr>
<td></td>
<td>By ensuring that all current and new services are equally available to all ethnic groups in our local community it is hope that harmonious race relations will be promoted.</td>
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<tr>
<td>Recommendation :  Further impact assessment required</td>
<td>Yes  No</td>
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