**Equality Impact Assessment**

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| **Care Group / Corporate Service:** |  | **Service:** |  |
| Corporate  Rotherham Care Group  Doncaster Care Group  North Lincolnshire Care Group |  | **Policy:** |  |
| **Name of Service/Title of Policy or Strategy, Name of Event:** |  | **Event:** |  |
| Blanket Restrictions Policy |  | **Strategy:** |  |
| **Equality Impact Assessment Undertaken by:** |  | **Date undertaken:** | |
| Helen Moran, MHA Manager |  | April 2021 | |

**Questions**

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| 1. **What are the main aims and purposes of the Policy / Service / Event or Strategy?** |
| The purpose of this policy is to evidence how the Trust is complying with its regulated activities as monitored by the Care Quality Commission by setting out the arrangements in place within the Trust to authorise, monitor and review restrictive practise with the overall aim of reducing their use to a minimum. |

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| 1. **Who is involved in delivering the service, implementing the policy or strategy / organising the event? (i.e., partnerships, stakeholders or agencies)** |
| Corporate services and clinical staff working in the following care groups  Doncaster Care Group.  Rothehram Care Group.  North Lincolnshire Care Group |

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| 1. **What information / data or experience can you draw on to provide an indication of the potential inclusive / exclusive results of delivering this service or event / implementing the policy or strategy to different groups of people and the different needs of people with protected characteristics in relation to this policy / service / event or strategy?** |
| Code of Practice – Mental Health Act 1983. (2015) Department of Health and Social Care. Last updated 31 October 2017.  Care Quality Commission Brief guide; the use of ‘blanket restrictions in mental health wards. www.cqc.org.uk |

| **Protected Characteristics** | **Positive Impact** | **Negative Impact** | **Reasons for Impact** |
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| **Age** | X |  | This policy aims to provide a consistent approach to the implementation of blanket restrictions so no patient should be treated differently on the basis of their age. |
| **Disability** | X | X | The potential for a person with a disability being in some way disadvantaged through the imposing of blanket restriction cannot be completely ruled out. This is due to the fact that as blanket restrictions are usually imposed to manage risk it may mean that patient access to certain areas is limited.  However as the policy requires an assessment of the impact of the blanket restriction on each individual patient clinical staff will be required to put plans in place to eliminate/ mitigate any disadvantage. |
| **Gender reassignment** | X |  | This policy aims to provide a consistent approach to the implementation of blanket restrictions so no patient should be treated differently on the basis of gender reassignment. |
| **Marriage and civil partnership** | X |  | This policy aims to provide a consistent approach to the implementation of blanket restrictions so no patient should be treated differently on the basis of their marriage/ civil partnership. |
| **Pregnancy and maternity** | X |  | This policy aims to provide a consistent approach to the implementation of blanket restrictions so no patient should be treated differently on the basis of being pregnant. |
| **Race** | X |  | This policy aims to provide a consistent approach to the implementation of blanket restrictions so no patient should be treated differently on the basis of their race. |
| **Religion or belief** | X |  | This policy includes guidance to staff in relation to someone who may carry a ceremonial knife as part of their religious beliefs. |
| **Sex** | X |  | This policy aims to provide a consistent approach to the implementation of blanket restrictions so no patient should be treated differently on the basis of their sex. |
| **Sexual Orientation** | X |  | This policy aims to provide a consistent approach to the implementation of blanket restrictions so no patient should be treated differently on the basis of their sexual orientation. |
| **Disadvantaged groups** | X |  | This policy aims to provide a consistent approach to the implementation of blanket restrictions so no patient should be treated differently due to being of a disadvantaged group. |

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| 1. **What positive impacts are there for this policy / service / event or strategy to better meet the needs of people with protected characteristics?** |
| Section 16 of Appendix 1 provides advice to staff in the event of a male Sikh being admitted who wishes to wear a ceremonial knife.  The requirement for the impact of any blanket restriction to be considered for each individual patient means that where a patient has a protected characteristic this will be taken into account. |

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| 1. **What action would be needed to ensure the policy / service / event or strategy overcomes:**  * Discriminatory negative impacts * Exclusion * Failure to meet the needs of people from across the protected characteristics and opportunities for promoting equality and inclusion are maximised. |
| For the impact of the blanket restriction on each individual patient to be considered. |

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| 1. **Recommended steps to avoid discrimination and ensure opportunities for promoting equality and inclusion are maximised. Include:** | | | | |
| **Options for action** | **Explanation if no further action is required** | **Lead responsible for overseeing actions** | **Timescales** | **Costs (where applicable)** |
| EDI mandatory training is up to date |  | Manager |  | n/a |
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1. **Monitoring and reporting arrangements of EIA, for policies and strategies refer to section 7 of the Procedural Documents (Development and Management) Policy.**

**For services / events please include the following:**

* How the equality impact of the service will be monitored
* Through the Governance that is in place around the use of blanket restrictions.
* Through review of any complaints which relate to the implementation of blanket resections.
* Frequency of monitoring
* Ongoing as blanket restrictions are imposed. Please refer to section 5.11 of the policy for full detail.
* How the monitoring results will be used and where they will be published;
* Quarterly via Operational Management Meeting and Executive Management Team
* Who will be responsible for reviewing monitoring results and initiating further action where required
* Please refer to section 5.11 of the policy for full detail.
* Any changes that have been made to remove or reduce any negative impacts as a result of conducting the equality impact assessment?

* Any action points should be included in Care Group / Corporate action plans, with monitoring and review processes.

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| **Is further work / consultation required? If yes, please explain how this is to be carried out and the time frame for completion.** |
| |  |  | | --- | --- | | Yes | No X | |
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The Equality Impact Assessment will be reviewed in line with changes to services, client or staff groups, legislation or policy review.

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| **Name:** |  |  |
| Helen Moran |  |  |
| **Designation:** |  |  |
| MHA Manager |  |  |
| **Signature:** |  | **Date:** |
| Helen Moran |  | April 2021 |