EQUALITY IMPACT ASSESSMENT

Care Group / Corporate Services:	Service:	
Health Informatics	Policy:	
Name of Service/Title of Policy or Strategy, Name of Event:	Event:	
Clinical Coding Policy	Strategy:	
Equality Impact Assessment Undertaken by:	Date undertaken:	
Karen Samuels-Hannan	23/05/2023	
Questions		
1. What are the main aims and purposes of the Policy / Service / Event or Strategy?		
To provide a framework to support the application of centralised clinical coding in adherence to the International Classification of Diseases 10th Revision (ICD-10), the Office of Population Censuses and Surveys 4th Revision (OPCS4) and the NHS Digital National Clinical Coding Standards.		
2. Who is involved in delivering the service, implementing the policy or strategy / organising the event? (i.e., partnerships, stakeholders or agencies)		
RDaSH staff cited under 'Responsibilities, Accountabilities and Dutie sourced Clinical coder.	es' section and externally	
3. What information / data or experience can you draw on to pr the potential inclusive / exclusive results of delivering this s implementing the policy or strategy to different groups of pe needs of people with protected characteristics in relation to event or strategy?	ervice or event / eople and the different	

ICD-10, has been devised by the World Health Organisation (WHO) and its codes, which cover all reasons for patients' admissions to hospital, and are widely used internationally. ICD-10 is the foundation for the identification of health trends and statistics globally. The application of ICD-10 has no discriminatory relevance as this relates to diagnosis only, regardless of any protected characteristics.

The codes included in the OPCS4, cover all operative procedures and interventions that patients have undergone during their hospital stay. These codes are used in the United Kingdom only. The application of OPCS4 has no discriminatory relevance as this relates to procedures only, regardless of any protected characteristics.

Protected Characteristics	Positive Impact	Negative Impact	Reasons for Impact	
Age	\boxtimes		Application of clinical coding is completed based on diagnosis and procedures regardless of age.	
Disability			Application of clinical coding is completed based on diagnosis and procedures regardless of disability	
Gender reassignment			Application of clinical coding is completed based on diagnosis and procedures regardless of gender/gender reassignment.	
Marriage and civil partnership			Application of clinical coding is completed based on diagnosis and procedures regardless of marriage/civil partnership status.	
Pregnancy and maternity			Application of clinical coding is completed based on diagnosis and procedures regardless of pregnancy/maternity status.	
Race			Application of clinical coding is completed based on diagnosis and procedures regardless of race	
Religion or belief			Application of clinical coding is completed based on diagnosis and procedures regardless of religion or belief.	
Sex			Application of clinical coding is completed based on diagnosis and procedures regardless of sex.	
Sexual Orientation	\boxtimes		Application of clinical coding is completed	

Protected Characteristics	Positive Impact	Negative Impact	Reasons for Impact
			based on diagnosis and procedures regardless of sexual orientation.
Disadvantaged groups			Application of clinical coding is completed based on diagnosis and procedures regardless of disadvantaged group status.

4. What positive impacts are there for this policy / service / event or strategy to better meet the needs of people with protected characteristics?

This policy has a neutral impact on people with protected characteristics.

- 5. 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.

None	
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6. 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)
No further action	The application of clinical coding has no discriminatory relevance			

7. Monitoring and reporting arrangements of EIA, for policies and strategies refer to section 7 of the Policy for the Development and Management of Procedural Documents.

For services / events please include the following:

- How the equality impact of the service will be monitored
 This EIA will be repeated in line with the policy review date.
- Frequency of monitoring

Every 3 years in line with the review of the policy.

- How the monitoring results will be used and where they will be published;
 Reviewed by the Information Governance Group and Data Quality Process Improvement Group in line with the policy review date and noted in minutes of meetings.
- Who will be responsible for reviewing monitoring results and initiating further action where required
 - Information Governance Group and Data Quality and Process Improvement Group
- Any changes that have been made to remove or reduce any negative impacts as a result of conducting the equality impact assessment?
 No
- Any action points should be included in Care Group / Corporate action plans, with monitoring and review processes.
 n/a

Is further work / consultation required? If yes, please explain how this is to be carried out and the time frame for completion.		
Yes No		
The Equality Impact Assessment will be reviewed in lingroups, legislation or policy review.	ne with changes to services, client or staff	
Name:		
Karen Samuels-Hannan		
Designation:		
Information Quality Officer		
Signature:	Date:	
Karen Samuels-Hannan	23/05/2023	