

Sandwell and West Birmingham Hospitals NHS Trust
Midland Metropolitan Hospital Project
Outline Business Case

Appendix 7f Equality impact assessment

Equality Impact Assessment

Toolkit



A guide for staff who need to complete Equality Impact Assessments

Equality & Diversity
Team



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Introduction

The equalities duties provide a framework for the Trust to carry out its functions more effectively and to tackle discrimination in a proactive way. It ensures that equality considerations are consistently integrated into day-to-day business through Equality Impact Assessments. This will not only engender legal compliance, but also help to ensure that Trust services best support the healthcare needs of the local population it serves and its workforce.

As a manager or someone who is involved in a service, policy, or function development, you are required to complete an Equality Impact Assessment (more commonly referred to as Equality Analysis) [EIA] using this toolkit.

Service	A system or organisation that provides for a public need.
Policy	A written statement of intent describing the broad approach or course of action the Trust is taking with a particular service or issue.
Function	Any of a group of related actions or functions contributing to a larger action.

Age Discrimination ban

On 1st October 2012, new provisions in the Equality Act 2010 come into force, extending the ban on age discrimination to cover services. Direct and indirect age discrimination, harassment and victimisation will be unlawful when providing services and when carrying out public functions.

The new ban means that in most cases service providers will not be able to operate upper and lower age limits.

There is no express exception for health and social care. This means that organisations responsible for planning, commissioning or delivering health or social care services can only differentiate in the treatment of service users in different age groups if this can be objectively justified. However, many age-based services currently provided in these sectors will be able to satisfy this legal test; for example, winter flu injections for over 65s.

The ban on age discrimination in services and public functions does not apply to those under 18 years of age. In contrast, the ban on age discrimination in clubs and associations applies to all ages.

What is the Equality Impact Assessment (EIA) Toolkit all about?

The EIA toolkit aims to make the process of equality impact assessing easier to understand and implement. It is designed to make it simpler for you to complete your EIA and make the process and outcomes meaningful for you and others involved. It is also intended to provide a sensible and proportionate approach that ensures the Trust gives due regard to the requirements to promote equality alongside other competing requirements such as Health & Safety.

What is an EIA?

Equality Impact Analysis [EIA] is a way of examining your services, functions and policies to see if it could have a negative or the potential for a negative impact on any member of the protected characteristics.

The Equality Act covers nine protected characteristics on the grounds upon which discrimination is unlawful.

Protected Characteristic	Descriptor
Age	The length of time that one has existed; duration of life, from cradle to grave.
Disability	A person has a disability if s/he has a physical or mental impairment, which has a substantial and long-term adverse effect on that person's ability to carry out normal day-to-day activities.
Gender Reassignment	<p>A personal process (rather than a medical process) which involves a person expressing their gender in a way that differs from or is inconsistent with the physical sex they were born with. This may include undergoing medical procedures or it may simply include choosing to dress in a different way as part of the personal process of change.</p> <p>Trans man – someone who has transitioned from female to male. Note that some people, following treatment, strongly prefer to be thought of as simply a woman.</p> <p>Trans woman – someone who has transitioned from male to female. Caveats as per trans man.</p>
Marriage and civil partnership	Marriage is defined as a 'union between a man and a woman'. Same-sex couples can have their relationships legally recognised as 'civil partnerships'. Civil partners must be treated the same as married couples on a wide range of legal matters.
Pregnancy and maternity	Pregnancy is the condition of being pregnant or expecting a baby. Maternity refers to the period after the birth, and is linked to maternity leave in the employment context. In the non-work context, protection against maternity discrimination is for 26 weeks after giving birth, and this includes treating a woman unfavourably because she is breastfeeding.
Race	This could include Asian or Asian British people, Black or Black British people, Chinese people, Gypsy, Roma or Traveller people, Irish people, People of mixed heritage, White people, people of other ethnic backgrounds and Asylum seekers and refugees.
Religion and belief	<p>Includes any religion and any religious or philosophical belief (such as humanism or atheism). It also includes a lack of any such religion or belief.</p> <p>Religious belief' goes beyond beliefs about and adherence to a religion or its central articles of faith and may vary from person to person within the</p>

	same religion.
Sex	A person's sex refers to the fact that they are male or female. In relation to a group of people, it refers to either men or women or to either boys or girls.
Sexual orientation	<p>Sexual orientation means the attraction a person feels towards one sex or another (or both), which determines who they form intimate relationships with or are attracted to.</p> <p>Some people are only attracted to those of the same sex (lesbian women and gay men).</p> <p>Some people are attracted to people of both sexes (bisexual people).</p> <p>Some people are only attracted to the opposite sex (heterosexual people).</p>

We also have to pay due regard to members of other socially excluded groups e.g. Homeless people, sex workers, drug users, obese patients.

Aims

Why should I carry out an EIA?

An EIA allows you to find out whether your service, policy or function has a negative or potential negative impact on anyone from the protected groups.

Importantly EIAs allow the Trust to establish meaningful outcomes for its diverse communities and workforce offering a pro-active approach to achieving equal outcomes.

- **Direct discrimination:** treating staff or workers or job applicants less favourably than others because they belong to a particular equality group.
- **Indirect discrimination:** Having policies or practices in place that applies to all employees however they could disadvantage people.
- **Associative discrimination** - This is direct discrimination against someone because they associate with another person who possesses a protected characteristic, e.g. an employee is stopped from promotion as he is the main carer for his disabled wife.
- **Perceptive discrimination** - This is direct discrimination against an individual because others think they possess a particular protected characteristic. It applies even if the person does not actually possess the characteristic.

For existing services, policies or functions, an EIA should be undertaken when formally reviewed. An EIA should be carried out every three years or when changes are required.

When should an Equality Impact Assessment be undertaken?

An EIA should be carried out at the same time as developing a new service, policy or function and also at the review stage of said service, policy or function.

Once the service, policy or function has been developed/reviewed an EIA must be completed and present for submission/ratification. It should be monitored to ensure the intended outcome is being achieved. Any concerns about the way it is working can then be addressed.

What are the main aims of an EIA?

The main aim of an EIA is to:

- Take account of services provided by The Trust and those affected by what it does.
- Consider other ways of achieving the outcomes of the service, policy or function.
- Allow you to have more contact with the diverse groups in our community.
- Change the way you think about your work and the decisions you make.
- Help you to think more about the needs of the community we serve.
- Remove any negative impact for members of the protected groups.
- Implement any reasonable adjustments as and when required.

The EIA process allows you to assess whether your services, policies or functions:

- eliminate unlawful discrimination, harassment or victimisation;
- advance equality of opportunity; and
- foster good relations.

Note: In relation to marriage and civil partnership, the assessment applies only to the elimination of discrimination.

What is a Reasonable Adjustment?

Under the Equality Act 2010 an employer has a duty to make reasonable changes for service users and employees. These are known as 'reasonable adjustments'. Adjustments should be made to avoid you being put at a disadvantage compared to others.

Reasonable Adjustments could include:

- changing standard procedures, such as admissions or assessment procedures
- adapting facilities, such as those in laboratories, or library or IT facilities
- providing additional services, such as a sign language interpreter or information materials in alternative formats
- altering the physical environment to make it more accessible.

How to determine what is reasonable

What is deemed reasonable depends on the individual circumstances of the case, including how important the adjustment is, how practical it is, and the financial or other resources of the institution.

It is the financial resources of the institution as a whole and not the budget of an individual department or service area that counts

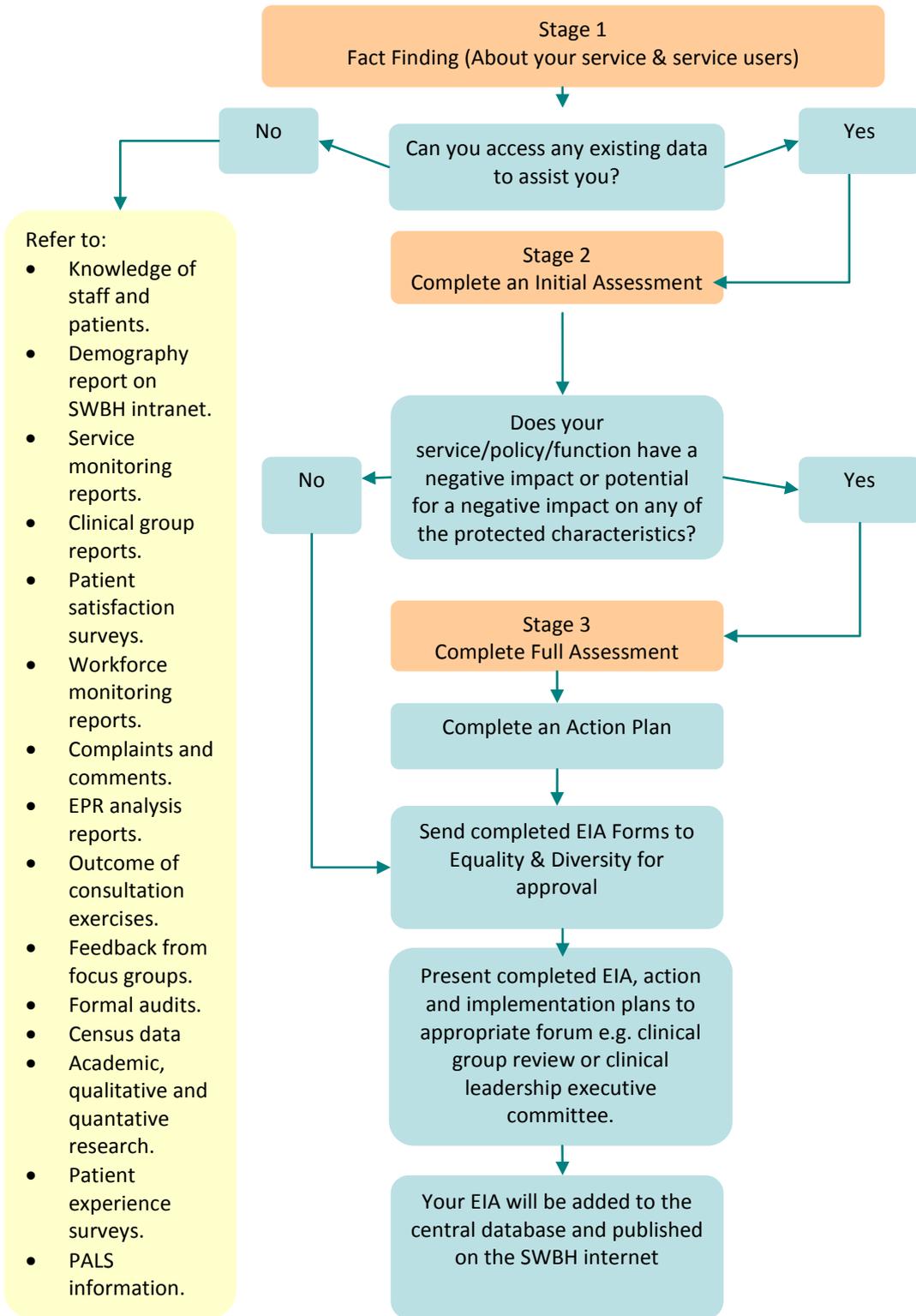
How will the information collected be used?

By gathering and using equality information from our service users the Trust will be able to:

- Improve services.
- Establish and improve the outcome/experience of our patients.
- Stop discrimination happening now and in the future.
- Make sure that services are accessible to everyone in the local community.
- Help improve the way staff and patients are treated.
- Understand the effect of our current and proposed services, policies and function have on members of the protected groups.
- Identify the key priority equality issues for the Trust.
- Set the most appropriate equality objectives and measure our progress against them.
- Demonstrate compliance with equality legislation
- Demonstrate to our service users how we are performing and what we are achieving.

Monitoring Actions

The Trust holds a central database and of the actions required to be undertaken as a result of the Equality Impact Assessment. These actions are monitored on a quarterly basis and included in a quarterly progress report to Trust Board.



How do I begin my EIA?

There are three stages to our EIA process:

Stage 1

This is the fact-finding stage where you gather as much information about the service, policy or function you intend to EIA. Who will be using the service, policy or function and the outcomes you want to achieve. It is important to make sure that your service, policy or function has clear aims and objectives.

Stage 2

This stage allows you to identify whether your policy, service or function has a negative or potential negative impact on the protected characteristics. In some cases an initial EIA (Appendix A) is all you will need to establish whether you are providing equal outcomes for staff and/or patients. On discovering a negative or the potential for a negative impact you will need to undertake a full EIA (Appendix B), unless it has already been identified as a corporate trend, in which case you must identify the reasonable adjustment you have put in place to mitigate the impact.

Stage 3

This stage involves questioning aspects of a proposed/existing service, policy or function and forecasting the likely effect. The answer to the questions will require time and research in order for you to answer them sufficiently. The Trust can provide you with some of the data you require, although the sources of information will vary depending on the nature of the service, policy or function.

Remember, it is vital to concentrate on the main objectives of the EIA and not lose sight of the outcomes, know when to stop! Look for practical outcomes and focus on identifying any negative impact in the current provision. If it is not possible for you to get data easily or immediately, this should be highlighted in your final action plan.

Action Planning

The real value of completing an EIA comes from the actions that will take place and the positive changes that will emerge through conducting the assessment. To ensure that the action plan is more than just a list of proposals and good intentions, the following should be included:

- Each action be attributed to a key person who is responsible for its completion
- An achievable timescale that is also at the same time reasonable
- Relevant and appropriate activities and progress milestones
- Any cost implications and how these will be addressed.
- If the concerns identified cannot be addressed because of other considerations (such as financial constraints) say what they are.

It is necessary that the action plan feeds into service and team plans and links to the Trusts Equality Objectives (EDS), which can be found on the Trust intranet/internet site.

The action plan should include realistic and achievable actions or activities likely to have an impact. This should not be a comprehensive list of all the possible things that might help. It is unlikely that any action plan will have less than four activities, but an action plan that rolls over to six pages is unlikely to be providing sufficient focus for most activities.

Corporate trends must be included on the action plan along with what actions (reasonable adjustments) are being taken locally whilst the corporate trends are being addressed.

Submission of completed EIAs and related documents

Equality and Diversity will provide advice and support throughout the process of completing EIAs. Once you have completed your EIA you must submit these documents to Equality and Diversity to be approved before you are able to present them at clinical group /ward reviews or to the clinical leadership executive committee.

How will EIAs help me improve my service?

Equality Impact Assessments involve looking at your equality information and the outcome of any engagement activity in order to understand the effect or potential effect of your decisions on members of the different protected groups. It will help you to identify practical steps you can take to tackle any negative effects or discrimination, and to advance equality of opportunity.

What are the benefits of EIAs?

EIAs are an opportunity to promote inclusive and fair service delivery. They identify where users may be unfairly discriminated against, or where particular sections of a community are not benefiting from a particular service. It is impossible to deliver excellent services for all without due regard to this process.

The EIA process will help to avoid claims of unlawful discrimination as it provides a framework that ensures the Trust meets its legislative duties. The process helps the Trust to anticipate problems and make informed and open decisions. This process will guide The Trust from where we are now to where we want to be.

Can a negative impact ever be justified?

Although unlawful discrimination can never be justified, there may be occasions where it is appropriate that an activity impacts less favourably on some people. For example, The Trust may be targeting services to a particular part of the population that have been historically referred to as 'hard-to-reach' or 'traditionally disadvantaged'. Increasing involvement levels for that community but not for some others who are traditionally easier to engage is acceptable. It will be necessary to consider whether the potential for less favourable impact on one or more communities can be justified.

What is positive action?

There are some situations in which a healthcare provider can provide (or refuse to provide) all or some of its services to people based on a protected characteristic.

Equality law also allows a healthcare to treat disabled people more favorably than non-disabled people. The aim of the law in allowing this is to remove barriers that disabled people would otherwise face to accessing services. For example, a hospital provides parking spaces for disabled patients closer to the entrance so they don't have so far to go (this may also be a reasonable adjustment).

In addition, it may be possible for a healthcare provider to target its services at people with a particular protected characteristic through positive action. You must be able to show that the protected characteristic these people share means they have a different need or a past track record of disadvantage or low participation in the sort of services you run. If you are thinking about taking positive action, you must go through a number of steps to decide whether positive action is needed and what sort of action to take.

Scoring your adverse impact

You will also need to score each of your negative impacts and record the scoring in your Action Plan (page 18).

Matrix for Full Equality Impact Assessments (Stage 3)

- 1. PROBABILITY** - What is the likelihood of the service, policy or function having an impact on staff or patients of the Trust? Use the table below to assign this incident a category code.

MEASURES OF PROBABILITY		
Descriptor	Level	Description
Rare	1	The service, policy or function will only impact under exceptional circumstances
Unlikely	2	The service, policy or function is not expected to have an impact but will do in some circumstances
Possible	3	The service, policy or function may have an impact on occasion
Likely	4	The service, policy or function is likely to impact, but not on a persistent basis
Almost Certain	5	The service, policy or function is likely to impact on many occasions and on a persistent basis

Descriptor	Potential Impact on Individual(s)	The Potential for complaint/Litigation	Potential Impact on Organisation	Number of Persons likely to be affected
Negligible 1	<ul style="list-style-type: none"> No impact or adverse outcome 	<ul style="list-style-type: none"> Unlikely to cause complaint/litigation 	<ul style="list-style-type: none"> No risk at all to organisation 	0-1 Person
Low 2	<ul style="list-style-type: none"> Short term impact 	<ul style="list-style-type: none"> Complaint possible Litigation unlikely 	<ul style="list-style-type: none"> Minimal risk to organisation 	2-4
Medium 3	<ul style="list-style-type: none"> Semi-permanent impact 	<ul style="list-style-type: none"> Litigation possible but not certain. High potential for complaint. 	<ul style="list-style-type: none"> Needs careful PR Reportable to SHA External investigation (e.g. HSE) 	5-10 Persons
High 4	<ul style="list-style-type: none"> Permanent impact 	<ul style="list-style-type: none"> Litigation certain expected to be settled for < £1M 	<ul style="list-style-type: none"> Service closure Threat to Divisional/Directorate objectives/priorities Local publicity 	10-20 Persons
Very High 5	<ul style="list-style-type: none"> Permanent and severe impact 	<ul style="list-style-type: none"> Litigation certain expected to be settled for > £1M 	<ul style="list-style-type: none"> National adverse publicity Threat to Trust objectives/priorities 	Over 20 persons

- 3 Equality Impact Score** - Use the matrix below to grade the risk.
E.g. S-2 x P-4 = 8 = Yellow or
S-5 x P-5 = 25 = Red

Probability	Severity of Impact				
	Negligible 1	Low 2	Medium 3	High 4	Very High 5
1 Rare	1	2	3	4	5
2 Unlikely	2	4	6	8	10
3 Possible	3	6	9	12	15
4 Likely	4	8	12	16	20
5 Almost Certain	5	10	15	20	25

Examples of Discrimination according to descriptor

Descriptor	
Negligible 1	Patient complaining that their dignity has been infringed due to having to wait in reception after eyes being dilated.
Low 2	Temporary relocation of Clinic due to refurbishment. Patients required to travel longer distance to attend clinic.
Medium 3	Uneven surfaces making it dangerous for wheelchair users to manoeuvre across.
High 4	Service excludes particular patients due to their religious requirements.
Very High 5	Emergency Fire Escape: Lack of accessible escape routes for disabled patients.

Roles and Responsibilities

Lead person completing EIA

- To complete EIA toolkit
- To obtain Group Director approval for EIA before submitting to E&D for formal approval
- Forward EIA to E&D for approval
- To present EIA at ward / clinical group review
- To update E&D on progress of actions on a quarterly basis

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- To provide support and guidance in the completion EIA
- To review all Full Impact Assessment Action Plans.
- To review each action against the EIA Matrix
- To report all Medium, High and Very High impacts to the relevant CLE (Clinical Leadership Executive) Committee.

CLE (Clinical Leadership Executive) Committee

- To agree and discuss likely outcome and agree actions to follow.

Equality Impact Assessment

Stage 2 Initial Assessment form

The Initial Impact Assessment is a quick and easy screening process. It should:

- Identify those services, policies, or functions which require a full EIA by looking at:
 - Negative, positive or no impact on any of the protected characteristics.
 - Opportunity to promote equality for the protected characteristics.
 - Data / feedback prioritise if and when a full EIA should be completed
- Justify reasons why a full EIA is not going to be completed

Group:	<input type="text" value="Estates"/>
Directorate:	<input type="text" value="New Hospital Project"/>
Speciality/Service Area	<input type="text" value="New Hospital Project"/>
Is it a Service, Policy or Function:	<input type="text" value="Service"/>
Lead officer (enter name and designation):	<input type="text" value="Dawn Webster – MMH Project Manager"/>
Title of service , policy or function :	<input type="text" value="New Hospital Project"/>
Is this service aimed at:	Adults <input type="checkbox"/> Paediatrics <input type="checkbox"/> Both <input checked="" type="checkbox"/>
Existing:	<input type="checkbox"/>
New/proposed:	<input checked="" type="checkbox"/>
Changed:	<input type="checkbox"/>

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Q1) What is the aim of your service, policy or function (you may want to refer to the Operational Policy for your service)?

Planning, design and access arrangements for the proposed Midlands Metropolitan Hospital.

Q2) State which Trust strategic objective this service, policy or function relates to:

21st Century Facilities

Q3) Who benefits from your service, policy or function?

Patients, staff, visitors and the local community

Q4) Do you have any feedback data that influences, affects or shapes this service, policy or function?

Yes	No
<input checked="" type="checkbox"/> Please complete below.	<input type="checkbox"/> Please go to question 5

What is your source of feedback?

- Monitoring Data
- PALS
- Previous EIAs
- National Reports
- Internal Audits
- Patient Surveys
- Complaints / Incidents
- Focus Groups
- Equality & Diversity Training
- Equality & Diversity Team
- Other (please state)

What does this source of feedback reveal?

Feedback revealed possible issues for a variety of protected groups in the design of the new hospital.

Q5) Thinking about each group below does or could the service, policy or function have a negative impact on members of the protected characteristics below?
(Please refer to pages 3 & 4 for further definitions of protected characteristic)

Protected Characteristic	Yes	No	Unclear
Age	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Disability	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Race	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Sex	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>

Gender Reassignment	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Sexual Orientation	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Religion or belief	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Pregnancy & Maternity	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Marriage & Civil Partnership	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Other socially excluded groups	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>

If the answer is “yes” or “Unclear” please complete a full EIA

Q6) Who was involved in the EIA and how?

<p>Who:</p> <p><input checked="" type="checkbox"/> Staff members</p> <p><input checked="" type="checkbox"/> Consultants</p> <p><input checked="" type="checkbox"/> Doctors</p> <p><input checked="" type="checkbox"/> Nurses</p> <p><input checked="" type="checkbox"/> Local patient/user groups</p> <p><input checked="" type="checkbox"/> Other</p> <p>Please specify Foundation Trust Members</p>
<p>How were they involved?</p> <p><input type="checkbox"/> Surveys</p> <p><input type="checkbox"/> Team Meeting</p> <p><input type="checkbox"/> Group Review</p> <p><input checked="" type="checkbox"/> Other</p> <p>Please specify: Local EIA Steering Group. Foundation Trust consultation events re general design and access. Department specific boot camps to discuss design and patient flow.</p>

Q7) Have you identified a negative/potential negative impact (direct /indirect discrimination)?

No
 yes

Q7a) If ‘No’ Explain why you have made this decision?

Q7b) If ‘yes’ explain the negative impact – you may need to complete a full EIA

Possible negative impact for Age and Disability on accessing the new hospital, due to location. However, regular bus services are provided within the area and bus stops located on site adjacent main entrance.

If a negative impact has been identified please continue to Stage 3. If no negative impact has been identified please submit your Initial Equality Impact Assessment to swb-tr.SWBH-GM-EqualityDiversity@nhs.net

Please note: Issues relating to either interpreting/translating, ensuring single-sex accommodation or Bariatric issues have been identified as corporate trends, therefore if the negative impact you

have identified falls within these categories a full impact assessment is not required. However you must state what reasonable adjustment you have put in place to mitigate the impact temporarily.

Should you go full impact assessment Corporate trends must be included on the action plan (page 19) along with what actions (reasonable adjustments) are being taken locally whilst the corporate trends are being addressed.

Justification Statement:

As member of SWBH staff carrying out a review of an existing or proposal for a new service, policy or function you are required to complete this EIA by law. By stating that you have not identified a negative impact, you are agreeing that the organisation has not discriminated against any of the protected characteristics. Please ensure that you have the evidence to support this decision as the Trust will be liable for any breaches in the Equality Legislation.

Completed by:

Name:	Dawn Webster
Designation:	MMH Project Manager
Date:	15 November 2013
Contact number:	5469
Head of Service:	Daphne Lewsley

This EIA has been approved by the Group Director:

Name:	Graham Seager
Designation:	Director of Estates and New Hospital Project
Date:	18 November 2013
Contact number:	

This EIA has been signed off by Equality & Diversity:

Name:	Estelle Hickman (equality and Diversity Advisor)
Signature:	
Date:	18/11/2013
Contact number:	5561

Step 8) Now that you have ensured a full impact assessment does not need to be completed we need to publish your results for the public to view.

Tick list

- Send an electronic copy of ratified EIA to Equality and Diversity who will publish it on the website

Equality & Diversity contact details

You can contact Equality and Diversity by:

Tel: 0121 507 5561 or Email: swb-tr.SWBH-GM-EqualityDiversity@nhs.net

Equality Impact Assessment

Stage 3 Full Assessment Form

Having completed the Initial EIA Screening Form (Appendix A) which identified a negative or potential negative impact, you are required to complete this Full Assessment form. This will involve you questioning aspects of a proposed/existing service policy or function and forecasting the likely effect on different groups.

Step 1) What is the impact?

1) Why have you carried out this Full Equality Impact Assessment?

Possible impact for Age and Disability protected characteristics due to location of MMH and possible transport issues.

Please mention any additional impacts in the box below. This could include contributing factors or conflicting impacts/priorities (e.g. environment, privacy and dignity, transport, access, signage, local demography) that has resulted in indirect discrimination or anyone else who will be impacted on by your service, policy or function.

Step 2) what are the differences?

2a) Identify the Equality group(s) that will be affected by the impact and state what the differences are:

Protected Characteristic	Negative / Potential Negative Impact	Positive / Potential Positive Impact	How is the Equality group identified affected in a different way to others as a result of the service, policy or function?

Age	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Possible impact due to ability to travel to new hospital although the hospital is only one mile distant from current site
Disability	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Possible impact due to ability to travel to new hospital although the hospital is only one mile distant from current site
Race	<input type="checkbox"/>	<input type="checkbox"/>	
Sex	<input type="checkbox"/>	<input checked="" type="checkbox"/>	50% single rooms and 50% four bed bays, all provided with en suite facilities within acute ward settings
Gender Reassignment	<input type="checkbox"/>	<input checked="" type="checkbox"/>	50% single rooms provided with en suite facilities within acute ward settings
Sexual Orientation	<input type="checkbox"/>	<input type="checkbox"/>	
Religion or Belief	<input type="checkbox"/>	<input checked="" type="checkbox"/>	An All Faith Centre will be provided within the new hospital
Pregnancy & Maternity	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Maternity ward access has been supplemented by providing an additional lift to take ladies in labour directly into the waiting area for the maternity ward
Marriage & Civil Partnership	<input type="checkbox"/>	<input type="checkbox"/>	
Other socially excluded groups	<input type="checkbox"/>	<input checked="" type="checkbox"/>	The Trust is leading a project to provide medical care for the homeless in Birmingham

Positive Impact for all groups also includes:

- A full range of diagnostics will be undertaken in three of the five community hospitals as well as the new hospital. X ray will be provided at all five community hospitals. In most cases, this should improve access.
- A whole systems approach to critical care will be implemented which should improve care for all groups.
- There will be an integrated childrens' inpatient service in a safe family focussed environment.
- The delivery suite will include an assessment function with admission to the Birth Centre or acute birth rooms with both areas providing single rooms.
- Operational policies will be reviewed and individual EIAs carried out to ensure that no groups are disadvantaged by change in clinical processes.
- The design vision reflects the requirement of creating a light and airy, uncluttered, non-threatening, confidence-inspiring environment which will help all groups.
- Planned adjacency of clinical departments will improve patient flows and improve the clinical care for all groups.

2b) This EIA indicates that there is insufficient evidence to judge whether there is differential impact. Please state why below.

As the project is still in the planning stage we are unsure if there will be an impact. Process for public engagement during the procurement phase to be developed. This will involve a range of equality interest group stakeholders. Feedback previously secured from special interest group which should be revisited.

Step 3) You are almost there - now all you need to do is to consult!

3a) Who have you consulted with on your service, policy or function and when did the consultation take place?

Local user group 2009. EIA Steering Group 2009 - 2011. Foundation Trust members 2013.

3b) As a result of the consultation are there any further changes to the service, policy or function indicated?

An action plan has been written

Step 4) Plan to address your Negative Impact

1. It is now time to complete your action plan using the table below. Please detail how you are going to address the negative impact, stating the timescales involved. Please refer to the matrix on pages 11 and 12. When including the rag rating please state how the score was achieved e.g. severity (S) 3 x Probability (P) 4 = 12.

Protected Characteristic	Negative Impact	Negative Impact Rag Rating	Action Required	Cost Implications	Expected Outcome	Lead (name and designation)	Timescale (specify dates)
Age and Disability	Travel to new hospital for frail, elderly and disabled	P=3 x s=2 = 6	Ensure effective transport links and regular bus service into new hospital premises. In 2011 a Travel and Access Strategy was produced by RCRH and approved by Partnership Board following 13 week	Nil to Trust	All patients can access new hospital	Core Project Team	4 years

			consultation				
Age and Disability	Further travel to new hospital for frail and elderly	P=3 x s=2 = 6	Possibility of providing an improved Shuttle bus service between hospital sites to include patients.	Cost of shuttle bus and driver.	All patients can access new hospital	Core Project Team	4 years
All groups	Design of building to provide suitable access for all	P=3 x s=2 = 6	Process for public engagement during the procurement phase to be developed. This will involve a range of equality interest group stakeholders. Feedback previously secured from special interest group which should be revisited.	N/A as part of design process	Access and provision of suitable facilities is available for all groups	Core Project Team	1 year

NB: As a requirement of the Clinical Group Review process, please ensure that you include the above actions within your Implementation Plan.

Step 5) Congratulations you have made it.

Completed by:

Name:	Dawn Webster
Designation:	MMH Project Manager
Date:	15 November 2013
Contact number:	5469
Head of Service:	Daphne Lewsley

This EIA has been approved by the Group Director:

Name:	Graham Seager
Designation:	Director of Estates and New Hospital Project

Date:	18 November 2013
Contact number:	

This EIA has been signed off by Equality & Diversity:

Name:	Estelle Hickman (Equality and Diversity Advisor)
Signature:	
Date:	18/11/2013
Contact number:	5561

Step 6) Now we need to publish your results for the public to view.

Please complete the tick list below.

- Please tick to indicate that this EIA has been approved by your Group Director.
- Please send your completed EIA to Equality and Diversity for approval. Once approved, your EIA will be placed on the SWBH webpage for the public to view.

Please email all EIAs to swb-tr.SWBH-GM-EqualityDiversity@nhs.net

Equality & Diversity contact details

You can contact Equality and Diversity by:

Tel: 0121 507 5561 or Email: swb-tr.SWBH-GM-EqualityDiversity@nhs.net