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#### 1. Equality and Human Rights Impact Analysis (EHRIA)

1.1 Board Lead:	Diane Hill, Chief Nurse	1.2 Analysis Start Date:	04/05/2018						
		1.3 Analysis Submission Date:	07/06/2016						
			27/07/2018						
1.4 Analysis Team Members:	Author / Editor: Lindy Montandon, Lead Nurse     Chief Nurse	se for Safer Staffing eRostering ar	d Justine Rosser, Deputy						
1.5 If this is a cross agency	2) Frontline Staff:								
policy/service or strategy please	3) Patient / End-user: All registered Nurses wor	king for Sussex Partnership NHS F	oundation Trust						
indicate partner agencies and	4) I/We, being the author(s), Service Managers,	acknowledge in good faith that the	nis analysis uses accurate						
their formal title	evidence to support accountable decision-ma	kers with due regard to the Natio	onal Equality Duties, and that						
	the analysis has been carried out throughout the design or implementation stage of the service or policy.								
1.6 Completion Statement									
This policy outlines the process and arrangements to support revalidation for registered nurses (including those on the Bank) employed by SPFT. The aim of the policy is to assist nurses and the Trust in the implementation and delivery of a robust and quality assured system to support revalidation that meets the requirements of the NMC.									
Send draft analysis along with the policy, strategy or service to equality.diversity@sussexpartnership.nhs.uk for internal quality control prior to ratification.									
1.8 Quality Assessor sign off	Cassa	andra Blowers							
1.9 Reference Number	9 Reference Number CB261B								

Equality and Human Rights Impact Analysis (EHRIA)

2. Evidence Pre-Analysis – The type and quality of evidence informing the assessment

X	Patient / Employee Monitoring Data		Risk Assessments	P	lease provide detailed evidence for the areas
F	Recent Local Consultations		Research Findings	h	ighlighted , and also any other Evidence that may be
	Complaints / PALS / Incidents		DH / NICE / National Reports	re	elevant (please state):
	Focus Groups / Interviews	X	Good Practice / Model Policies		IMC
	Service User / Staff Surveys	X	Previous Impact Analysis		luman Resources
	Contract / Supplier Monitoring Data		Clinical Audits	T	rade Unions
	Sussex Demographics / Census		Serious Untoward Incidents		
	Data from other agencies, e.g. Services, Police, third sector		Equality Diversity and Human Rights Annual Report		

**3.** Impact and outcome Evaluation – Any impacts or potential outcomes are described below.

				F	People	e's Ch	aracte	eristic	cs (Ma	rk wi	ith 'X'	'):
		lark ne <b>X</b>	Describe how this policy, strategy or service will lead to positive + outcomes for the <u>protected characteristics.</u> Describe how this policy, strategy or service will lead to negative - outcomes for the <u>protected characteristics.</u>		oility & rs	r ınment	incy & nity		n &		ation	ر
Ref	+	-	(Please describe in full for each)		Disabil Carers	Gende Reassig	Pregna Materi	Race	Religion Belief	Sex	Sexual	Human Rights
3.1	X		We recognised and support nurses with protected characteristic under the Equality Act 2010. Under 2.2 of the policy, it stated that any member of the staff who has been assessed as having difficulties (e.g dyslexia), support should already be in place to enable them to undertake their current role.	Х	X	X	X	X	X	X	X	X
3.2	Х		We recognised under exceptional circumstances when a registrant may make a request to their line manager for deferment due to the following:		X		Х					X
			<ul> <li>Breaks in practice due to sickness or maternity leave.</li> </ul>									
			<ul> <li>Breaks in practice due to absence abroad or sabbaticals.</li> </ul>									

Ref	Mark one X		Describe how this policy, strategy or service will lead to positive   outcomes for the protected characteristics.  Describe how this policy, strategy or service will lead to negative   outcomes for the protected characteristics.  (Please describe in full for each)	Age	Disability & doad	Gender so. Reassignment 43	Pregnancy & Maternity	Race Race	Religion & S Belief	rk wi	Sexual TY Orientation	Human ::
			<ul> <li>Breaks in practice due to suspension from clinical work as a result of the registrant being investigated into concerns over his/her performance or behaviour.</li> </ul>									
			Each case will be dealt with on its merits and the Trust is mindful that no registrant must be disadvantaged or unfairly penalised as a result of pregnancy, sickness or disability.									

#### 4. Monitoring Arrangements

Report

4.1 The arrangements to monitor the effectiveness of the policy, strategy or service considering relevant characteristics? E.g.

 □ survey results split by age-band reviewed annually by EMB and Trust Board

 □ Service user Disability reviewed quarterly by Equality and Diversity Steering Group or annually in the EDHR Annual

The Deputy Chief Nurse will monitor the effectiveness of the policy to support the revalidation processes, audit and update the policy in order to ensure compliance with current regulations, legislation and guidance.

## **5.** Human Rights Pre-Assessment

The Impacts identified in sections () have their reference numbers (e.g. 4.1) inserted in the appropriate column for each relevant right or freedom							
	+	-					
A2. Right to life (e.g. Pain relief, DNAR, competency, suicide prevention)							
A3. Prohibition of torture, inhuman or degrading treatment (e.g. Service Users unable to consent)	3.1 &3.2						
A4. Prohibition of slavery and forced labour (e.g. Safeguarding vulnerable patients policies)							
A5. Right to liberty and security (e.g. Deprivation of liberty protocols, security policy)							
A6&7. Rights to a fair trial; and no punishment without law (e.g. MHA Tribunals)							
A8. Right to respect for private and family life, home and correspondence (e.g. Confidentiality, access to family etc)	3.1 &3.2						
A9. Freedom of thought, conscience and religion (e.g. Animal-derived medicines/sacred space)							
A10. Freedom of expression (e.g. Patient information or whistle-blowing policies)							
A11. Freedom of assembly and association (e.g. Trade union recognition)							
A12. Right to marry and found a family (e.g. fertility, pregnancy)							
P1.A1. Protection of property (e.g. Service User property and belongings)							
P1.A2. Right to education (e.g. accessible information)							
P1.A3. Right to free elections (e.g. Foundation Trust governors)							

## 6. Risk Grading

6.1 Consequence of negative impacts scored (1-5)

2 6.2 Likelihood of negative impacts scored (1-5):

2 6.3 Equality & Human Rights Risk Score = Consequence x Likelihood scores:

7. Analysis Outcome— The outcome (A-D) of the analysis is marked below ('X') with a summary of the decision

	7.1 The outcome selected (A-D):	7.2 Summary for the outcome decision (mandatory)
A.	Policy, strategy or service addresses quality of outcome and is positive in its language and terminology. It promote equality and fosters good community relations	This policy will be reviewed as and when there
В.	X Improvements made or planned for in section 9 (potential or actual adverse impacts removed and missed opportunities addressed at point of design)	are changes in the law or discriminatory
C.	Policy, service or strategy continues with adverse impacts fully and lawfully justified (justification of adverse impacts should be set out in section 3 above	
D.	Policy, service or strategy recommended to be stopped. Unlawful discrimination or abuse identified.	

# **8.** Equality & Human Rights Improvement Plan

Actions should when relevant and proportionate meet the different needs of people.

Impact Reference(s) (from assessment)	What directorate (team) action plan will this be built into	<u>Action</u>	Lead Person	Timescale	Resource Implications

Add more rows if necessary