

## Equality, Good Relations and Human Rights Screening Template

**\*\*\*Completed Screening Templates are public documents and will be posted on the Trust's website\*\*\***

See [Guidance Notes](#) for further background information on the relevant legislation and for help in answering the questions on this template (follow the links).

### **(1) Information about the Policy/Proposal**

(1.1) Name of the policy/proposal

**SET Deceased Organ and Tissue Donation Policy**

(1.2) Is this a new, existing or revised policy/proposal?

**Revised – supercedes SET/PtCtCare (63) 2019**

(1.3) What is it trying to achieve (intended aims/outcomes)?

- Facilitate staff in helping to ensure patients can donate organs after death if right and proper for them to do so.
- Highlights processes in place and sources of further information
- Aligns Trust Policy with current national best practice recommendations.

(1.4) Are there any Section 75 categories (see list in 3.1) which might be expected to benefit from the intended policy/proposal?

- Any patient on a Transplant waiting list from any of those groups
- Patients who become donors and are fulfilling their own wishes for their end of life
- The above could be from any Section 75 category.

(1.5) Who owns and who implements the policy/proposal - where does it originate, for example DHSSPS, HSCB?

- This is a SEHSCT policy, it links where appropriate to documents from national bodies.



(1.6) Are there any factors that could contribute to/detract from the intended aim/outcome of the policy/proposal/decision? (Financial, legislative or other constraints?)

- Not to our knowledge

(1.7) Who are the internal and external stakeholders (actual or potential) that the policy/proposal/decision could impact upon? (staff, service users, other public sector organisations, , trade unions, professional bodies, independent sector, voluntary and community groups etc)

- This policy is most relevant to staff caring for critically ill patients in the South Eastern Health and Social care Trust. Most suitable patients for solid organ donation are managed in the Intensive Care Unit, however on occasion this care may be provided in Theatres or the Emergency Department.

(1.7) Other policies with a bearing on this policy/proposal (for example regional policies) - what are they and who owns them?

- NHSBT (National Health Service Blood and Transplant) have their own operational policies which specialist staff would use alongside this policy.

## (2) Available evidence

Evidence to help inform the screening process may take many forms. What evidence/information (both qualitative and quantitative) have you gathered to inform this policy? Specify details for relevant Section 75 categories.

<b><i>Details of evidence/information</i></b>
<ul style="list-style-type: none"> <li>- As this is an updated policy we had the benefit of knowledge that the preceding policy had not raised any Section 75 concerns</li> <li>- We aim to offer organ donation as a policy in any case where it is suitable- there is no barrier to any Section-75 category.</li> <li>- NHSBT has a special interest in trying to improve donation / transplantation rates in different ethnic groups and publishes regular statistical summaries- available from <a href="https://www.odt.nhs.uk/statistics-and-reports/annual-report-on-ethnicity-differences/">https://www.odt.nhs.uk/statistics-and-reports/annual-report-on-ethnicity-differences/</a></li> </ul>

## (3) Needs, experiences and priorities

(3.1) Taking into account the information above what are the different needs, experiences and priorities of each of the Section 75 categories and for both service users and staff.

<b>Category</b>	<b>Needs, experiences and priorities</b>	
	<b><i>Service users</i></b>	<b><i>Staff</i></b>
Gender	Nil specific	Nil specific
Age	Nil specific	Nil specific
Religion	Nil specific	Nil specific
Political Opinion	Nil specific	Nil specific

Marital Status	Nil specific	Nil specific
Dependent Status	Nil specific	Nil specific
Disability	Nil specific	Nil specific
Ethnicity	Nil specific – see above also	Nil specific
Sexual Orientation	Nil specific	Nil specific

(3.2) Provide details of how you have involved stakeholders, views of colleagues, service users and staff etc when screening this policy/proposal.

The policy was sent out twice for consultation and has been shared amongst stakeholder groups.

#### (4) Screening Questions

You now have to assess whether the impact of the policy/proposal is major, minor or none. You will need to make an informed judgement based on the information you have gathered.

**(4.1) What is the likely impact of equality of opportunity for those affected by this policy/proposal, for each of the Section 75 equality categories?**

Section 75 category	Details of policy/proposal impact		Level of impact? Minor/major/none
	Services Users	Staff	
Gender			None
Age			None
Religion			None

Political Opinion			None
Marital Status			None
Dependent Status			None
Disability			None
Ethnicity			None
Sexual Orientation			None

<b>(4.2) Are there opportunities to better promote equality of opportunity for people within Section 75 equality categories?</b>	
<b>Section 75 category</b>	<b>Please provide details</b>
Gender	Gender is no barrier to becoming an organ donor
Age	National publicity has highlighted that age alone is not a disqualifying factor for assessment for potential as organ donor.
Religion	NHSBT has engaged extensively with religious leaders to ensure there is no hierarchical barrier to becoming a donor in any major religious group.
Political Opinion	n/a
Marital Status	n/a
Dependent Status	N/a
Disability	n/a A holistic assessment of donor potential is made for anyone referred regardless of disability
Ethnicity	n/a
Sexual Orientation	n/a

<b>(4.3) To what extent is the policy/proposal likely to impact on good relations between people of different religious belief, political opinion or racial group? minor/major/none</b>		
<b>Good relations category</b>	<b>Details of policy/proposal impact</b>	<b>Level of impact Minor/major/none</b>
Religious belief		None
Political opinion		None
Racial group		None

<b>(4.4) Are there opportunities to better promote good relations between people of different religious belief, political opinion or racial group?</b>	
<b>Good relations category</b>	<b>Please provide details</b>
Religious belief	As above. Trust chaplaincy services are also represented on the Organ Donation Committee
Political opinion	n/a
Racial group	N/a

## **(5) Consideration of Disability Duties**

<b>(5.1) How does the policy/proposal encourage disabled people to participate in public life and promote positive attitudes towards disabled people?</b>
n/a – this policy only applies to service users who are sadly in an intensive care unit and at an end-of-life stage.

## (6) Consideration of Human Rights

(6.1) Does the policy/proposal affect anyone's Human Rights?

Complete for each of the articles

Article	Positive impact	Negative impact = human right interfered with or restricted	Neutral impact
Article 2 – Right to life	X		
Article 3 – Right to freedom from torture, inhuman or degrading treatment or punishment			X
Article 4 – Right to freedom from slavery, servitude & forced or compulsory labour			X
Article 5 – Right to liberty & security of person			X
Article 6 – Right to a fair & public trial within a reasonable time			X
Article 7 – Right to freedom from retrospective criminal law & no punishment without law			X
Article 8 – Right to respect for private & family life, home and correspondence.			X
Article 9 – Right to freedom of thought, conscience & religion	X		
Article 10 – Right to freedom of expression			X
Article 11 – Right to freedom of assembly & association			X
Article 12 – Right to marry & found a family			X
Article 14 – Prohibition of discrimination in the enjoyment of the convention rights			X
1 <sup>st</sup> protocol Article 1 – Right to a peaceful enjoyment of possessions & protection of property			X



1 <sup>st</sup> protocol Article 2 – Right of access to education			X
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**Please note: If you have identified potential negative impact in relation to any of the Articles in the table above, speak to your line manager and/or Equality Unit. It may also be necessary to seek legal advice.**

(6.2) Please outline any actions you will take to promote awareness of human rights and evidence that human rights have been taken into consideration in decision making processes.

- policy hopes to aid improving Article 2 (right to life) in those awaiting a life saving transplant. Aims to facilitate Article 9 (freedom of conscience, religion, thought) by facilitating those who would wish to become a donor at the end of their own life.

## (7) Screening Decision

**(7.1) Given the answers in Section 4, how would you categorise the impacts of this policy/proposal?**

Major impact	
Minor impact	
No impact	X

**(7.2) Do you consider the policy/proposal needs to be subjected to ongoing screening**

Yes	
No	X

**(7.3) Do you think the policy/proposal should be subject to and Equality Impact Assessment (EQIA)?**

Yes	
No	X



(7.4) Please give reasons for your decision and detail any mitigation considered.

See above.

### **(8) Monitoring**

Please detail how you will monitor the effect of the policy/proposal for equality of opportunity and good relations, disability duties and human rights?

Trust donation activity is continuously monitored by the Potential Donor Audit which feeds into regional and national statistics. We would respond to any concern raised to ourselves.

Approved Lead Officer: \_\_\_\_\_

Position: \_\_\_\_\_

Date: \_\_\_\_\_

Policy/proposal screened by:

Dr Chris Gowers, SESHCT Clinical Lead Organ  
Donation  
and Professor Stephen Kirk, SEHSCT Chair of the  
Organ Donation Committee, AMD.

**Please forward completed schedule to:**

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