

SCREENING TEMPLATE

For further information on screening, please refer to the 'Guidance Notes', which are also available in hard copy from your organisation's equality contact.

(1) INFORMATION ABOUT THE POLICY/DECISION

1.1 Title of policy/decision

Policy for accompanying patients to the Department of Radiology

1.2 Description of policy/decision

- **what is it trying to achieve? (aims/objectives)**
- **how will this be achieved? (key elements)**
- **what are the key constraints? (e.g. financial, legislative)**

This policy details the procedure for accompanying patients to the Department of Radiology for imaging examinations or interventional procedures. This will ensure that any patient care needs are met during this time. This policy encompasses both patient safety and patient experience standards and ensures compliance with Clinical Governance.

1.3 Main stakeholders affected

(e.g. staff, actual or potential service users, other public sector organisations, voluntary and community groups, trade unions/professional organisations or private sector organisations)

- Assistant Directors
- Ward Sisters
- Nursing staff and healthcare assistants
- Midwifery staff, support workers, health care assistants, maternity
- Superintendent Radiographers
- Radiographers/Ultrasonographers
- Consultant Radiologists
- Patients
- Portering staff
- Medical staff

1.4 Other policies/decisions with a bearing on this policy/decision

- **what are they?**
- **who owns them?**

Central Nursing Advisory Committee Delegation Decision making Framework

(2) SCREENING THE POLICY/DECISION

2.1 In terms of groupings under Section 75, what is the make up of those affected by the policy/decision ?

Group	<i>Please provide details</i>
Gender	Female/Male
Age	Variable
Religion	Any
Political Opinion	n/a
Marital Status	Any
Dependent Status	n/a
Disability	It is possible that some patients may have a disability. Patients' needs are taken into consideration and reasonable adjustments made
Ethnicity	If a patient does not speak english as a first language a face to face or telephone interpreting service is available.
Sexual Orientation	n/a

2.2 Is there any indication or evidence of higher or lower participation or uptake by different groups?

Group	Yes/No/ Don't Know	Please provide details
Gender	No	
Age	Variable	
Religion	No	
Political Opinion	No	
Marital Status	No	
Dependent Status	No	
Disability	No	
Ethnicity	No	
Sexual Orientation	No	

2.3 Is there any indication or evidence that different groups have different needs, experiences, issues and priorities in relation to the policy/decision?

Group	Yes/No/ Don't Know	Please provide details
Gender	No	
Age	No	
Religion	No	
Political Opinion	No	
Marital Status	No	
Dependent Status	No	
Disability	No	It is possible that some patients may have a disability. Patients' needs are taken into consideration and reasonable adjustments made
Ethnicity	No	If a patient does not speak english as a first language a face to face or telephone interpreting service is available
Sexual Orientation	No	

2.4 Is it likely that the policy/decision will meet those needs?

Group	Yes/No/ Don't Know	Please briefly give details
		No Impact on need of all nine categories
<i>N.B. continue as appropriate</i>		

2.5 Is there an opportunity to better promote equality of opportunity or good relations by altering the policy/decision or working with others in government or in the larger community?

Group	Suggestions
	N/A
<i>N.B. continue as appropriate</i>	

2.6 What changes to the policy/decision – if any – or what additional measures would you suggest to ensure that it promotes good relations?

Group	Suggestions
Religion	No changes
Political Opinion	No Changes
Ethnicity	No Changes

2.7 Have previous consultations with relevant groups, organisations or individuals indicated that particular policies create problems that are specific to them? Also, please detail information used to answer any of the questions above (e.g. statistics; research reports; views of colleagues, service users, or other stakeholders).

The Radiology Services Manager and the Clinical Manager for Surgery are responsible for the implementation of this policy. It is the responsibility of Assistant Directors/Ward Sisters to ensure that this policy has been brought to the attention of all relevant staff and it is the responsibility of those staff to read and adhere to the contents.

This policy will be disseminated to the following groups of staff:-

- Assistant Directors
- Ward Sisters
- Nursing and midwifery staff
- Midwifery support worker/health care assistants midwifery
- Superintendent Radiographers
- Radiographers/Ultrasonographers
- Consultant Radiologists
- Patients
- Porter staff
- Medical staff

2.8 Please detail what data you will collect in the future in order to monitor the effect of the policy/decision on any of the groups under Section 75?

An audit of compliance will be undertaken annually.

Complaints and incidents relating to the policy principles will be monitored and addressed as required.

(3) SHOULD THE POLICY/DECISION BE SUBJECT TO EQUALITY IMPACT ASSESSMENT?

Equality impact assessment procedures are confined to those policies/decisions considered likely to have significant/major implications for equality of opportunity.

**If your screening has indicated that a policy/decision is likely to have an adverse differential impact, how would you categorise it?
Please tick.**

Significant/major impact	
Low impact	No impact

Do you consider that this policy/decision needs to be subjected to a full equality impact assessment?

Yes	
No	x

(4) DISABILITY DISCRIMINATION

4.1 Does the policy/decision in any way discourage disabled people from participating in public life or does it fail to promote positive attitudes towards disabled people?

No – patients’ needs are taken into consideration and reasonable adjustments made

4.2 Is there an opportunity to better promote positive attitudes towards disabled people or encourage their participation in public life by making changes to the policy/decision or introducing additional measures?

No

4.3 Please detail what data you will collect in the future in order to monitor the effect of the policy/decision with reference to the disability duties?

As for 2.8

(5) CONSIDERATION OF HUMAN RIGHTS

5.1 Does the policy/decision affect anyone's Human Rights? [PLEASE COMPLETE THE TABLE BELOW]

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 st protocol Article 1 – Right to a peaceful enjoyment of possessions & protection of property			X
1 st protocol Article 2 – Right of access to education			X

*If the effect you have identified is positive or neutral please move on to **Question 5.3.***

5.2 If you have identified a likely negative impact who is affected and how?

N/A

At this stage we would recommend that you consult with your line manager to determine whether to seek legal advice and to refer to Human Rights Guidance to consider:

- *whether there is a law which allows you to interfere with or restrict rights*
- *whether this interference or restriction is necessary and proportionate*
- *what action would be required to reduce the level of interference or restriction in order to comply with the Human Rights Act (1998).*

5.3 Outline any actions which could be taken to promote to ensure compliance with the legislation in relation to the policy/decision.

Consultant Radiologists / Reporting Radiographers / Medically qualified non-radiologists who have agreed to provide a documented report for each PF imaging examination they interpret. must be given the required level of accredited training and supervision prior to practice.

To ensure compliance with the policy and to reduce the risk of delays in Plain Film reporting the number of unreported examinations is monitored on a daily basis by the Radiology Services Manager (RSM). In addition, DRTTs are monitored on a monthly basis

Policy/Decision Screened by: Alyson Lattimer

Date: 14th April 2014

Please note that having completed the screening, you will need to ensure that a consultation on the outcome of screening is undertaken, in line with Equality Commission guidance.