

Equality and Diversity - Policy Screening Checklist

Policy/Service Title: Intravenous Potassium Policy	Directorate: Pharmacy / Trust wide
Name of person/s auditing/developing/authoring a policy/service: R.J. Walton, reviewed by N.W. Poole	
Aims/Objectives of policy/service: Reduce the risks associated with concentrated potassium preparations.	

Policy Content:

- For each of the following check the policy/service is sensitive to people of different age, ethnicity, gender, disability, religion or belief, and sexual orientation?
- The checklists below will help you to see any strengths and/or highlight improvements required to ensure that the policy/service is compliant with equality legislation.

1. Check for DIRECT discrimination against any group of SERVICE USERS:

Question: Does your policy/service contain any statements/functions which may exclude people from using the services who otherwise meet the criteria under the grounds of:	Response		Action required		Resource implication	
	Yes	No	Yes	No	Yes	No
1.1 Age?		✓		✓		✓
1.2 Gender (Male, Female and Transsexual)?		✓		✓		✓
1.3 Disability?		✓		✓		✓
1.4 Race or Ethnicity?		✓		✓		✓
1.5 Religious, Spiritual belief (including other belief)?		✓		✓		✓
1.6 Sexual Orientation?		✓		✓		✓
1.7 Human Rights: Freedom of Information/Data Protection		✓		✓		✓

If yes is answered to any of the above items the policy/service may be considered discriminatory and requires review and further work to ensure compliance with legislation.

2. Check for INDIRECT discrimination against any group of SERVICE USERS:

Question: Does your policy/service contain any statements/functions which may exclude employees from operating the under the grounds of:	Response		Action required		Resource implication	
	Yes	No	Yes	No	Yes	No
2.1 Age?		✓		✓		✓
2.2 Gender (Male, Female and Transsexual)?		✓		✓		✓
2.3 Disability?		✓		✓		✓
2.4 Race or Ethnicity?		✓		✓		✓
2.5 Religious, Spiritual belief (including other belief)?		✓		✓		✓
2.6 Sexual Orientation?		✓		✓		✓

2.7	Human Rights: Freedom of Information/Data Protection		✓		✓		✓
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If yes is answered to any of the above items the policy/service may be considered discriminatory and requires review and further work to ensure compliance with legislation.

TOTAL NUMBER OF ITEMS ANSWERED 'YES' INDICATING DIRECT DISCRIMINATION =

3. Check for DIRECT discrimination against any group relating to EMPLOYEES:

Question: Does your policy/service contain any conditions or requirements which are applied equally to everyone, but disadvantage particular persons' because they cannot comply due to:	Response		Action required		Resource implication	
	Yes	No	Yes	No	Yes	No
3.1 Age?		✓		✓		✓
3.2 Gender (Male, Female and Transsexual)?		✓		✓		✓
3.3 Disability?		✓		✓		✓
3.4 Race or Ethnicity?		✓		✓		✓
3.5 Religious, Spiritual belief (including other belief)?		✓		✓		✓
3.6 Sexual Orientation?		✓		✓		✓
3.7 Human Rights: Freedom of Information/Data Protection		✓		✓		✓

If yes is answered to any of the above items the policy/service may be considered discriminatory and requires review and further work to ensure compliance with legislation.

4. Check for INDIRECT discrimination against any group relating to EMPLOYEES:

Question: Does your policy/service contain any statements which may exclude employees from operating the under the grounds of:	Response		Action required		Resource implication	
	Yes	No	Yes	No	Yes	No
4.1 Age?		✓		✓		✓
4.2 Gender (Male, Female and Transsexual)?		✓		✓		✓
4.3 Disability?		✓		✓		✓
4.4 Race or Ethnicity?		✓		✓		✓
4.5 Religious, Spiritual belief (including other belief)?		✓		✓		✓
4.6 Sexual Orientation?		✓		✓		✓
4.7 Human Rights: Freedom of Information/Data Protection		✓		✓		✓

If yes is answered to any of the above items the policy/service may be considered discriminatory and requires review and further work to ensure compliance with legislation.

TOTAL NUMBER OF ITEMS ANSWERED 'YES' INDICATING INDIRECT DISCRIMINATION =

Signatures of authors / auditors:

Date of signing:



Equality Action Plan/Report

Directorate:

Service/Policy:

Responsible Manager:

Name of Person Developing the Action Plan:

Consultation Group(s):

Review Date:

The above service/policy has been reviewed and the following actions identified and prioritised.
All identified actions must be completed by: _____

Action:	Lead:	Timescale:
Rewriting policies or procedures	Nil	
Stopping or introducing a new policy or service	Nil	
Improve /increased consultation	Nil	
A different approach to how that service is managed or delivered	Nil	
Increase in partnership working	Nil	
Monitoring	Nil	
Training/Awareness Raising/Learning	Nil	
Positive action	Nil	
Reviewing supplier profiles/procurement arrangements	Nil	
A rethink as to how things are publicised	Nil	
Review date of policy/service and EIA: this information will form part of the Governance Performance Reviews	Nil	
If risk identified, add to risk register. Complete an Incident Form where appropriate.	Nil	



When completed please return this action plan to the Trust Equality and Diversity Lead; Pamela Chandler or Jane Turvey. The plan will form part of the quarterly Governance Performance Reviews.

Signed by Responsible Manager:

Date:

