



LA035

EQUALITY ANALYSIS TOOL

INITIAL SCREENING TOOL

Title of policy/service/function/procedure/programme/ or strategy being assessed:

(Please remember that even informal policies & procedures need to be equality analysed.)

Is it new **or revised**

(If revised, please attach a copy of the original Equality Analysis.)

Senior Manager Responsible: Steve Sale (not present at EQIA)

Department: Operations

Section: _____

EQUALITY ANALYSIS SCREENING TEAM: (Please enter below the names of the project team members who carried out this initial screening with you and their role in the screening (e.g. team colleague or critical friend))

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Name	Department	Role
Athar Khan	A&E Ops	AOM
David Whitmore	C & Q Directorate	Senior Clinical Advisor
Kudakwashe Dimbi	C & Q Directorate	Clinical Adviser for Mental Health
Carmel Dodson-Brown	Governance	Assistant Director

Date of screening: 06/06/2013

Please summarise below the aims and objectives of this policy/service/function etc. including any intended outcomes.

Introduction: The London Ambulance Service NHS Trust (LAS) have the right to undertake their duties free from abuse and violence. The LAS collates evidence where past experience suggests that the personal safety of ambulance staff may be at risk. The evidence provides a basis for entries onto a Location Alert Register (the register) which holds names and addresses of individuals who are reported to have physically assaulted/intimidated or verbally abused members of staff.

Notification will be sent to all patients whose address is held on the register informing them of their inclusion. The notification also includes details on how to challenge the information held on the register.

The procedure has been revised to take account of the following areas:

- Change of name to Location Alert Register (formerly High Risk Address Register) which recognises the change of emphasis of the register where the four categories determine the seriousness of each incident with the adoption of an action plan approach
- Clarification and more emphasis on carrying out dynamic risk assessments
- Transfer of responsibility to Ambulance Operations Managers (AOMs) for informing addresses of their inclusion on the

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register and removal where appropriate

- More detailed guidance on how to carry out reviews
- Increased emphasis on setting up local forums to improve information about each address
- Consideration of what is the most appropriate referral for vulnerable patients

Objectives of procedure:

- To capture relevant information where experience suggests that there is an increased risk of physical assault or intimidation or verbal abuse, requiring the address to be added to the register
- To ensure the safety and welfare of staff through effective use of the register
- To enable mechanisms to promote and devise specific care management plans arising from the identified needs of patients

Intended outcomes of the procedure:

1. To specify the actions to be taken by ambulance personnel who have been physically assaulted/intimidated or verbally abused in cases where an entry in the register may be appropriate to ensure staff safety
2. To set out a framework for consideration of alternative actions in managing challenging patients by promoting the devising of care management strategies to enhance patient care
3. To ensure addresses are reviewed periodically so that they are not kept on the register unnecessarily
4. To ensure that local engagement occurs with relevant agencies to improve intelligence about each address
5. To move the central management of the register to local complexes
6. To ensure that all addresses are written to, thus giving them the right of challenge for inclusion

Please state below who is intended to benefit from this policy/service/function etc. and in what way.

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The aim of the procedure is to provide guidance on the management of addresses which may pose a risk to crew staff. Crew staff are advised by the Emergency Operations Centre (EOC) about previous incidents at locations on the register prior to attendance at the address. Managers at ambulance stations have a clear framework to work within, to manage the actions following incidents of abuse.

The LAS has a 'Duty of Care' to both patients and staff and all requests to attend location alert addresses will require operational staff to assess the situation to reduce the risk to LAS crews and minimise any delays in responding to patients.

The decision to enter an address lies with the crew, based on the information provided to them by EOC, by carrying out a dynamic risk assessment and from any updated information received from the caller. This approach ensures that any decision making is made with all the relevant information available to the crew, therefore minimising the risk to ambulance personnel and delays in treating the patient

Liaison with local stakeholders is obtained with a view to considering whether further work needs to be undertaken, thus enhancing patient care as well as developing good working relations with external agencies.

Those patients with an action plan (to achieve appropriate care management as a direct result of a medical condition) will benefit from a more informed response to the patient, supporting both improved patient care and crew safety. Action plans must be completed for all Category 4 addresses. These may be in the format of PSPs (patient specific protocols), IDPs (individual despatch protocols) or action plans formulated in conjunction with a multidisciplinary team.

Please state in the table below whether the policy/service/function etc. could have any potential impact on anyone from a "protected characteristic" group, whether service users, staff or other stakeholders

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“Protected Characteristic Group”	Is there likely to be a positive or neutral impact in regard to:	If the impact is adverse, can this be justified on the grounds of promoting equality of opportunity for a “protected characteristic” group or for another reason?
Age	Neutral	No adverse impact currently identified however monitoring will be implemented to assess whether the revised procedure will have an impact on the protected characteristics
Disability	Neutral	No adverse impact currently identified however monitoring will be implemented to assess whether the revised procedure will have an impact on the protected characteristics The procedure states that an action plan approach must be adopted for all Category 4 patients. This will assist with understanding the reasons for the original incident which prompted the entry on the register. The action plan approach should provide a more informed response to the patient based on information collected from other sources eg GPs, Mental Health Trusts. The number of Category 4 addresses with / without an action plan can be monitored on a regular basis.
Gender Reassignment	Neutral	No adverse impact currently identified however monitoring will be implemented to assess whether the revised procedure will have an impact on the protected characteristics
Marriage and Civil Partnership (duty only applies to elimination of discrimination)	Neutral	No adverse impact currently identified however monitoring will be implemented to assess whether the revised procedure will have an impact on the protected characteristics
Pregnancy and Maternity	Neutral	No adverse impact currently identified however monitoring will be implemented to assess whether the revised procedure will have an impact on the protected characteristics
Race	Neutral	No adverse impact currently identified however monitoring will be implemented to assess whether the revised procedure will have an impact on the protected characteristics
Religion or Belief	Neutral	No adverse impact currently identified however monitoring will be

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		implemented to assess whether the revised procedure will have an impact on the protected characteristics
Sex	Neutral	No adverse impact currently identified however monitoring will be implemented to assess whether the revised procedure will have an impact on the protected characteristics
Sexual Orientation	Neutral	No adverse impact currently identified however monitoring will be implemented to assess whether the revised procedure will have an impact on the protected characteristics

Can the policy/service/function etc. be used to advance equality and foster good relations, including for example, participation in public life? If so, how?

The procedure encourages AOMs to engage at local level, setting up good working relations with external agencies/stakeholders. This will include Mental Health Teams, General Practitioners, Metropolitan Police, Social Services etc.

Please provide and summarise below any relevant evidence for your declaration above, including any engagement activities – this could include for example the results of specific consultations, complaints or compliments, customer satisfaction or other surveys, service monitoring and take-up, comments from stakeholders and demographic data.

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Sources of information used, with references, location or links:

1. LAS Health & Safety policies & procedures
2. LAS Incident Reporting procedure
3. LAS Data Protection policy
4. LAS Management of Frequent and Vexatious users procedure
http://www.londonambulance.nhs.uk/talking_with_us/freedom_of_information/classes_of_information/our_policies_and_procedures.aspx
5. Data Protection Act (1998)
http://www.ico.gov.uk/for_organisations/data_protection.aspx
6. Tackling violence against staff (DH, March 2007) –[SMS/VASV2/03/07/02]
http://www.nhsbsa.nhs.uk/SecurityManagement/Documents/SecurityManagement/Tackling_violence_against_staff_2009.pdf
7. Non-Physical Assault Explanatory Notes – (NHS SMS, November 2004)
http://www.nhsbsa.nhs.uk/SecurityManagement/Documents/non_physical_assault_notes.pdf
8. Use of violent warning markers
<http://www.ico.gov.uk>
9. The local Authority Social services & NHS Complaints Regulations (2009)
<http://www.dh.gov.uk/en/Managingyourorganisation/Legalandcontractual/Complaintspolicy/index.htm>

The above policies and procedures have all been taken into account when revising the Location Alert Register procedure.

Are there any gaps in the evidence you have which make it difficult for you to determine whether there would be an adverse impact?

No Yes

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If yes, please state below how you intend to acquire this evidence and your timescales for doing so.

There is no evidence that suggests the register could have a potential impact on anyone from a “protected characteristic” group, as the register does not currently hold data about the addresses that could be used to identify whether any particular groups are being over represented. It would be difficult to capture this type of data directly from the Abuse & High Risk Address Information Report Form (LA277) due to the nature of the register. The majority of entries on the register are as a result of an incident at an address where a patient/relative or other person present has behaved in an unreasonable way, so an attempt to capture data at that moment in time could exacerbate a potentially volatile situation.

The procedure recommends that a LAS Equalities Monitoring Form be sent to every address on the register. If information is received from addresses on the register, then analyses can be carried out across the protected characteristic groups. Local complexes will be encouraged to develop links with stakeholders to assist with capturing information on the protected characteristics.

Good practice identified at complexes will be shared across the LAS and briefing/training of operational staff is crucial

Routine information will be provided at local area governance meetings.

The procedure is to be reviewed after 1 year or sooner if an adverse impact is identified through 6 months of local monitoring of the LAS Equalities Monitoring Form.

You must complete a full Equality Analysis if you have identified a positive or negative potential impact for any “protected characteristic” group, which is not legal or justifiable or if you have identified any gaps in evidence which make it difficult for you to determine whether there would be adverse impact. Please insert below any issues you have identified/recommendations for the full Equality Analysis.

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A full equality analysis will be carried out if any adverse impact is identified through the monitoring of the LAS Equalities Monitoring Form received from the addresses

If you have only identified a neutral or positive impact on any “protected characteristic” group then no further action is required, other than having your Director sign off this form, a copy stored on the shared drive and sent to Communications for publication on the Trust’s website.

Name of Director: JASON KILLENS

Signature:



Date: 10.06.13

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