

EQUALITY IMPACT ASSESSMENT – SCREENING TOOL

Please complete the following when screening your policy or service for potential impact on equality groups.

1. Name of lead	Sharon Thomas
Contact number and email	Ext 1398 sharon.thomas@dgh.nhs.uk
Directorate or Department and Team	Community Services & Integrated Care: Health Records Department
2. Name of service or policy	The Creation and Management of Patients Health Records Policy
2.1 Version	v1
Is this a new or existing piece of work?	Replaces an existing policy
3. Target audience e.g. patients and public; NHS staff; professional health organisations; voluntary organisation; internal staff	Internal Staff
4. What are the aims of the service/ Policy?	The aim of the policy is to provide a framework and guidance for the creation and subsequent management of patient records across the Trust.
5. Does any part of this service/ Policy have a <i>positive impact</i> on our duty to promote good race relations, eliminate discrimination and promote equality based on a person's age, disability, ethnic origin, gender, religion/belief or sexual orientation? If no, please provide brief reasons.	No - this policy provides guidance to staff on good records management principles.
6. Could any part of this service/Policy have an adverse impact on our duty to promote good race relations, eliminate discrimination and promote equality based on a person's age, disability, ethnic origin, gender, religion/belief or sexual orientation? If no, please provide brief reasons.	No - this policy provides guidance to staff on good records management principles.

<p>7. Are there any factors that could lead to differential take-up, outcomes or satisfaction levels based on people's age, disability, ethnic origin, gender, religion/belief or sexual orientation?</p> <p>If no, please provide brief reasons.</p>	<p>No - this policy provides guidance to staff on good records management principles.</p>
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If you have answered yes to any of questions 5 - 7, you must now complete a full Equality Impact Assessment using the proforma provided by the Trust.

If you have answered no to all of the above questions, a full assessment is not required. Please complete the following sign-off section and send a copy of this screening to your Head of Service, Matron or Head of Department, as appropriate, **and** to Liz Abbiss, Communications Manager at Trust HQ.

Name of person completing this screening: Sharon Thomas

Job Title: Patient Administration Manager

Date sent to Head of Service, Matron or Head of Department: June 2012

Date sent to Head of Communications, Trust HQ: January 2013