

## Appendix 3: Equality and Diversity Impact Assessment

<b>1. Policy or Function Title</b>		Low Priority Treatments extended policy	
<b>2. Purpose of the Function/Policy</b>		This policy includes additional procedures that have been added to the existing proscribed Low Priority Treatments policy, implemented from 1 <sup>st</sup> September 2010.	
<b>3. Name of Person Carrying out Assessment</b>		Lynda McDonald/Programme Manager	<b>4. Date</b> 14 <sup>th</sup> December 2011
<b>5. Evidence for assessment of the current arrangements (attach to form)</b>		<p>The Low Priority Treatments (LPTs) extended policy includes a number of additional procedures.</p> <p>NCL activity data has been obtained for each additional treatment listed in the LPTs extended policy, this detail is attached as Appendix 4.</p> <p>Assessment of this data shows that the implementation of this policy will impact on a small number of people across the sector, approximately 2,997 in a full year, and that there will be no differential negative impact.</p>	
<input type="checkbox"/>	UK Census data (London, Borough, or National)	<b>6. Does the evidence show that this policy/function is likely to have a differential negative impact?</b>	
<input checked="" type="checkbox"/>	NCL data	<input checked="" type="checkbox"/>	<b>No</b> – If “No”, Stop the assessment
<input type="checkbox"/>	Other Trust research/audit/survey data Describe data... Describe data... Describe data... Describe data...	<input checked="" type="checkbox"/> <b>No</b> – Race/Ethnicity <input checked="" type="checkbox"/> <b>No</b> – Disability <input checked="" type="checkbox"/> <b>No</b> – Sex/Gender <input checked="" type="checkbox"/> <b>No</b> – Religion/Belief <input checked="" type="checkbox"/> <b>No</b> – Sexual Orientation <input checked="" type="checkbox"/> <b>No</b> – Age If “Yes”, continue with the form	
<input type="checkbox"/>	Other External research/audit/survey data Describe data... Describe data... Describe data... Describe data...	<b>7. Can any differences be justified?</b>	
		<input type="checkbox"/>	<b>Yes/No</b> – If Yes, complete the description below, then Stop the assessment Describe the justification, i.e." Positive Action Initiative" etc...
<input type="checkbox"/>	Other evidence Describe evidence... Describe evidence... Describe evidence...	<b>8. What is the expected level of impact?</b>	
		<input type="checkbox"/>	<b>Low</b> – If low, Stop the assessment
		<input type="checkbox"/>	<b>High</b> – If High, continue with the form

**9. Proposed Actions**

List the actions required for correcting the negative impact, including dates and lead manager...

**10. Consultation**

It is expected that patients/public, among others, should be involved in any consultation

List details of consultation on actions...

**11. Monitoring**

Monitor and review evidence to confirm that planned actions do actually result in changes/improvements sought for relevant under-represented or disadvantaged groups

Describe monitor and review process...

**12. Other Comments/Notes**

Enter any other comments/notes if applicable...