

## Impact Assessment Policy

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P132	Quality Impact Assessment Policy	Quality and Standards Committee	3 Years

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## 1. Introduction

Understanding the potential impact on services of cost improvement schemes, skill mix reviews, policy change, service change and service development proposals and plans is essential for the Trust in order to continue to maintain and improve service standards. Having a systematic process in place supports such understanding and is vital to informed decision making. It is an essential part of continuous quality improvement and is part of the learning from the Francis Report and also a number of best practice standards.

## 2. Policy Statement

AWP wants to do its very best and be successful and to achieve these goals it needs to ensure that its decision making is in line with its objectives and is informed by an evaluation of the impact of change. For the purposes of this policy, 'impact' is described as being the broader or longer term effects of a project, initiative or policy on the Trust, its stakeholders and the communities it serves.

It is important that there is a clear organisational memory recorded for AWP's decision making. Impact assessments can not only inform decision making, they can also help demonstrate the difference a change has made in return for the resources invested and signify performance improvements.

The Trust will ensure that impact assessments are undertaken for all significant cost improvement schemes, skill mix reviews, policy change, service change and service development proposals and plans.

Impact assessments will be approved by the Trust's Clinical Executive, are an integral part of the planning process and will inform decision making and are part of the Trust's approach monitoring, maintaining and improving the quality of services.

## 3. Purpose or Aim

This policy describes and explains the Trust's approach to:

- Quality impact assessments
- Privacy impact assessments
- Equality impact assessments

Reporting the outcome of impact assessments to the Board will enable the Trust to fulfil its corporate responsibility and ensure that cost improvement plans and service changes are not detrimental to the quality of services.

## 4. Scope

The policy applies to all significant cost improvement schemes, skill mix reviews, policy development, service change and service development proposals and plans and any other projects which may impact on services.

## 5. Trust Approach to Impact Assessments

When any cost improvement scheme, skill mix review, policy change, service change or service development which has a potential impact on service quality is being considered, an impact assessment must be carried out. The outcome of a impact assessment will inform the initial decision to proceed with a proposal and is an integral part of the planning process.

Regardless of the assessment type, the Trust will take the following approach, which is described fully in the guidance documents referenced below:

### 5.1 Quality impact assessments

The quality impact assessment assesses quality risks in relation to the following three quality and safety domains:

- Patient safety
- Clinical effectiveness
- Patient experience.

The implementation of quality impact assessments is described in detail in the Quality Impact Assessment Guidance. The [Quality Impact Assessment template is available here](#).

### 5.2 Data protection impact assessments

A data protection impact assessment (DPIA) is a process which helps clarify privacy risks to individuals in the collection, use and disclosure of personal information. A failure to properly embed appropriate privacy protection measures may result in a breach of privacy laws such as Data Protection Act 2018, a declaration of incompatibility with the Human Rights Act or a costly fix later in ensuring legal compliance.

The implementation of DPIAs is described in detail in the DPIA Guidance. The [Privacy Assessment template is available here](#).

### 5.3 Equality impact assessments

While the Equality Act 2010 no longer places a statutory duty on public sector organisations to carry out equality impact assessments, there is a requirement to give due regard to the impact that our policies and practices have on those who are affected by them. AWP's approach to equality impact assessments covers the nine protected characteristics of the Equality Act (age, disability, gender reassignment, marriage and civil partnership, pregnancy and maternity, race, religion and belief, sex and sexual orientation), and also gives consideration to other disadvantaged or seldom heard groups.

The implementation of equality impact assessments is described in detail in the Equality Impact Assessment Guidance. The [Equality Impact Assessment template is available here](#). (EIA Toolkit)

## 6. Roles and responsibilities

**The Trust Board** has corporate responsibility for ensuring that cost improvement plans and service changes are not detrimental to the quality of services. The Trust Board will receive quarterly impact assessment overview reports through the Quality and Standards Committee.

**The Quality and Standards Committee** will:

- seek assurance that this policy is used consistently across the organisation
- scrutinise and challenge the impact assessment process and outcomes for individual projects on behalf of the Board
- scrutinise the potential or actual negative impacts on quality and review mitigations put in place to manage negative impacts
- scrutinise quarterly quality impact assessment overview reports on behalf of the Board.

**The Director of Nursing and Quality** has overall responsibility for the Impact Assessment Policy and associated procedures.

**The Medical Director and Director of Nursing** (the Clinical Executive) are responsible for scrutinising individual impact assessments prior to approving them. Impact assessments will not be valid until agreed and approved by both clinical executive directors.

**Cost Improvement Scheme or Service Change and Service Development Plan Project Executive Leads** are responsible for:

- ensuring that impact assessments are completed in line with this policy and the associated guidance
- ensuring that the clinical executive directors receive impact assessments for scrutiny and approval
- ensuring that action is taken on the basis of impact assessment scores
- ensuring that impact assessments are reported to the Executive Team, trust wide management group and/or the Quality and Standards Committee as appropriate.

**Policy Writers, Cost Improvement Scheme or Service Change and Service Development Plan Leads** are responsible for:

- undertaking impact assessments in line with this policy and the associated guidance
- reporting the outcome to project groups and Executive leads
- maintaining an evidence base and rationale of how and why scores were applied and any mitigating actions
- ensuring that project risk registers include any risks identified through the Impact Assessment process
- involving service users, carers and Healthwatch representatives in impact assessment where appropriate
- ensuring early warning quality indicators are identified to measure any impact on quality and that these will be monitored during and after the implementation of the project.

## 7. Standards

The approach is based on Monitor guidance and the National Quality Board guidance.

## **8. Training**

There is no dedicated training provision for this policy; however, supervision can be sought from experienced project leaders or from the lead executive director.

## **9. Monitoring or Audit**

The Quality and Standards Committee will monitor the implementation of the policy. This will be by reviewing individual quality impact assessments and receiving overview reports.

## **10. References**

[The National Quality Board. How to Quality Impact Assess Provider Cost Improvement Plans June 2012](#)

<b>Version History</b>				
<b>Version</b>	<b>Date</b>	<b>Revision description</b>	<b>Editor</b>	<b>Status</b>
1.0	13 March 2013	New policy	Deputy Director Quality and Healthcare Governance	Draft
1.2	1 May 2013	Admin amendments agreed by Quality & Safety Committee – Minuted 13 March	Head of Quality Information & Systems	Final approved by Tony Gallagher Chair
1.3	13 April 2016	Re-draft	Head of Patient Safety Systems	Draft
2.0	19 April 2016	Approved by Quality and Standards	Head of Patient Safety Systems	Approved
2.1	3 September 2020	Extended until March 2020	JK – Nursing Director	Approved