EIA Ref		
Lead Officer	Name	Natalie Johnson
	Position	Policy Officer, People Directorate (Adult Social Care)
	Contact details	0151 511 8909

SECTION 1 – Context & Background

1.1 What is the title of the policy / practice?

Halton Borough Council Overarching Medication Policy

1.2 What is the current status of the policy / practice?

Existing

Changed ✓ New

1.3 What are the principal aims and intended outcomes of the policy / practice?

The policy outlines the Council's vision for medicines management in social care and describes its commitment to enable and safeguard the health, safety and wellbeing of service users and staff.

1.4 Who has primary responsibility for delivering the policy / practice?

The policy applies to Halton Borough Council adult social care services with responsibility for administering medication. This includes the following services, which are supported to deliver the policy through service specific Standard Operating Procedures (SOPs):

- Adult Placement;
- Day Services;
- Oak Meadow (incl. reablement);
- Supported Housing Network.

1.5 Who are the main stakeholders?

Staff and services users within the services named above.

1.6 Who is the policy / practice intended to affect?

Residents Staff \checkmark Specific Group(s) \checkmark (add details below)

Those using the services to which the policy applies (detailed above). Commissioned services are expected to have their own internal policies/procedures/ processes that reflect the standards set out within this policy.

1.7 Are there any other related policies / practices?

The service specific SOPs; this overarching policy together with the relevant service specific procedure will ensure proper medicines management within a range of social care settings.

SECTION 2 – Consideration of Impact

2.1 Relevance: – the Public Sector Equality Duty

Does this policy / practice / service have due regard to the need to: -

- (a) Eliminate discrimination, harassment, victimisation and any other conflict that is prohibited by the Equality Act 2010
- (b) Advance equality of opportunity between two persons who share a relevant protected characteristic
- (c) Foster good relations between persons who share a relevant protected characteristic and persons who do not share it

Yes (✓) No ()

State reasons below (please refer Appendix 1)

The policy supports services in the safe and effective management of the medication requirements of their service users who may be vulnerable due to disability or old age and as such require support from adult social care services.

2.2 Has data and information been used in determining the impact of the policy / procedure under review?

(for example research, surveys, complaints, consultation, monitoring data)

Equality Group(s) N/A

Baseline data and information

Research into current legislation, regulations and good practice guidance.

2.3 On the basis of evidence, has the actual / potential impact of the policy/ practice been judged to be positive (+), neutral (=) or negative (-) for each of the equality groups and in what way? Is the level of impact judged to be high (H), medium ((M), or low (L)?

Protected Characteristic	Impact type +, =, -	Level H, M, L, -	Nature of impact				
Age	+	Н	The services that this policy applies to				
Disability	+	Н	exist to support people who are vulnerable and require adult social care support because of old age or disability. This policy will ensure that whilst being				
Gender	=	L					
Race / ethnicity	=	L					
Religion / belief	=	L	supported by the service, their medication needs are supported in such				
Sexual Orientation	=	L					
Transgender	=	L	a way that maintains their independence but also protects them from harm.				
Marital status/ Civil Partnerships	=	L					
Pregnancy/Maternity	=	L					
In Halton two further vulnerable groups have been identified: -							
Carers	=	L					
Socio – economic disadvantage	=	L	-				

2.4 Does the policy/practice have any potential impact on safeguarding vulnerable people?

The policy sets out proper management of medication thus ensuring the safety of service users. It also describes how issues should be escalated through the Safeguarding Adults in Halton Inter-Agency Policy, Procedures and Good Practice Guidance.

2.5 How will the impact of the policy / practice be monitored?

Regular competency checking of staff in administering medication. Reporting of medicines errors. Service audits and inspections.

2.6 Who will be responsible for monitoring?

Staff within affected service areas. Medicines Management Team. Quality Assurance Team.

2.7 If any negative impacts, or potential negative impacts, have been identified what mitigating actions will be put in place, thereby eliminating the need for a further Stage 2 assessment? Where none have been identified insert 'no further action required' in the first column.

Action & purpose / outcome	Priority	Timeframe	Lead Officer
No further action required	(H, M, L)		

2.8 Summary of stakeholders involved in this review

Name / Job Title	Organisation / representative of	
Natalie Johnson, Policy Officer	Policy, Performance and Customer Care Team People Directorate (Adult Social Care)	
Katherine Scragg, Care Home Medicines Management Technician	Medicines Management Team, NHS Halton Clinical Commissioning Group	

2.9 Completion Statement

As the identified Lead Officer of this review I confirm that:-No negative impact has been identified for one or more equality groups and that a Stage 2 Assessment is not required.

Completed EIAs should be sent to Corporate and Organisational Policy, to be given a unique reference number and for inclusion on the central register.

Public Sector Equality Duty – EIA Checklist

The Equality Act s149 (the Public Sector Equality Duty) requires is that HBC has due regard to the need to:-

- (a) Eliminate discrimination, harassment, victimisation and any other conduct that is prohibited by or under this Act;
- (b) Advance equality of opportunity between persons who share a relevant protected characteristic and persons who do not share it;
- (c) Foster good relations between persons who share a relevant protected characteristic and persons who do not share it.

These are matters that we must show we have taken into the reckoning in making decisions about the Council's functions. We therefore need evidence of the following:

- 1. We know about the duty
- 2. We have reflected on the duty
- 3. We have consulted those affected or likely to be affected
- 4. We have used relevant information already in the council's possession (surveys etc.)
- 5. \we have allowed adequate time for consultation with those affected and/or those who speak for those affected
- 6. We have allowed adequate time for earnest and genuine consideration of the information and views received
- 7. We have identified any adverse effects
- 8. We have sought to mitigate any adverse effects of decisions
- 9. We have identified principal options
- 10. Decision makers have not made up their mind in advance
- 11. We have considered all material considerations including our own financial situation, policy and strategy documents alongside along views received from consultees but have not applied those policies etc. In a rigid or unthinking way.