



## Freedom of Information Policy

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## Freedom of Information Policy

Document Reference	Freedom of Information Act 2000
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Equality Analysis	Completed
Linked procedural documents	Policy for the Development of Procedural Documents Records Management Framework and Guidelines Records Management Policy and Procedures Release of Information Policy
Dissemination requirements	All managers and staff, via email and intranet
Part of Trust's publication scheme	Yes

The East of England Ambulance Service NHS Trust has made every effort to ensure this policy does not have the effect of unlawful discrimination on the grounds of the protected characteristics of: age, disability, gender reassignment, race, religion/belief, gender, sexual orientation, marriage/civil partnership, pregnancy/maternity. The Trust will not tolerate unfair discrimination on the basis of spent criminal convictions, Trade Union membership or non-membership. In addition, the Trust will have due regard to advancing equality of opportunity between people from different groups and foster good relations between people from different groups. This policy applies to all individuals working at all levels and grades for the Trust, including senior managers, officers, directors, non-executive directors, employees (whether permanent, fixed-term or temporary), consultants, governors, contractors, trainees, seconded staff, homeworkers, casual workers and agency staff, volunteers, interns, agents, sponsors, or any other person associated with the Trust.

All Trust policies can be provided in alternative formats.



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## 1. Introduction

The Freedom of Information Act 2000 (FOIA) forms part of the Government's commitment to greater openness within the public sector. The East of England Ambulance Service NHS Trust (the Trust) is fully supportive of this and actively promotes a culture of transparency within the organisation. FOIA enables both members of the public and staff to scrutinise the decisions made by public authorities in order to improve accountability and ensure services are efficiently delivered.

## 2. Purpose

The purpose of this policy is to provide a framework within which the Trust can fairly and consistently manage Freedom of Information requests whilst ensuring compliance with relevant legislation and regulations. The policy will present a clear route to access the information required within the timescales established by FOIA. By applying to all staff, this policy should underpin the fundamental operations of the organisation.

## 3. Duties

### 3.1 Trust Board

The Board will receive assurance that an internal process is being adhered to, operating effectively and that objectives are being achieved through the Information Governance Group.

### 3.2 Audit Committee

The Information Governance Group reports to the Audit Committee which is a sub-committee of the Trust Board. The Audit Committee is accountable to the Board regarding, and responsible for, Information Governance.

### 3.3 Information Governance Group

The Information Governance Group is authorised by the Board to review risk and governance strategies, review and approve policies and procedures associated with risk and governance and recommend them to the Board for approval. The Information Governance Group is responsible for monitoring, and reviewing progress on, compliance with the Freedom of Information Act. In order to perform this duty Freedom of Information issues are reported to the Group at meetings as required.

### 3.4 Chief Executive

Ultimate responsibility for Freedom of Information rests with the Chief Executive who has overall responsibility for ensuring that the Trust is compliant with FOIA. The Chief Executive has delegated this responsibility to the Director of Clinical Quality & Improvement who will ensure that all Freedom of Information requests are dealt with effectively and efficiently.

### 3.5 Director of Clinical Quality & Improvement

The Director of Clinical Quality & Improvement is responsible for managing effective handling of all Freedom of Information requests on behalf of the Board and the Chief Executive. Day to day responsibility is further delegated to the Compliance and Standards Lead and the Information Governance Manager, the Corporate Records Manager/FoI Officer and the Clinical Records Manager/FoI Officer.

### 3.6 Directors and Senior Managers

All requests will be sent to the relevant Directors and Senior Managers, who will then provide the relevant information to respond. This must be done in a timely manner, ideally within 10 working days of receiving the request. Directors are also responsible for approving responses in a timely manner to ensure the 20 working day time limit in the FOIA is met. Any responses/approvals not received within



the timescale set will be sent to the Information Governance Manager for escalation. Continued delays will be escalated to the Information Governance Group.

### **3.7 Information Governance Manager**

The Information Governance Manager is responsible and accountable for overseeing the Freedom of Information request process. Any delayed responses from departments or approvals will be escalated to, and dealt with by, the Information Governance Manager. The Information Governance Manager is responsible for escalating any delays to the Information Governance Group as required.

### **3.8 Fol Officers**

The Corporate Records Manager/Fol Officer and the Clinical Records Manager/Fol Officer (Fol Officers) are responsible for the co-ordination and administration of all Freedom of Information requests. By promoting Freedom of Information awareness within EEAST, the Fol Officers will support the Information Governance Manager in ensuring organisational compliance with FOIA. The Fol Officers will review as required the Publication Scheme, including the Disclosure Log.

### **3.9 All members of staff**

All staff have individual responsibility for:

- The creation of their own records and for adhering to the Records Management Policy and Procedures.
- Passing any Freedom of Information requests to the Fol Officers immediately.
- Supplying the Fol Officers with any information requested in a timely manner in order to comply with a Freedom of Information request.

### **3.10 Consultation and Communications with Stakeholders**

Representatives of all relevant stakeholder groups have been consulted during the development of this Policy through the Information Governance Group.

## **4. Definitions**

### **4.1 Freedom of Information Act**

The Freedom of Information Act 2000 provides public access to information held by public authorities. (Information Commissioner's Office)

### **4.2 Freedom of Information request**

In order to be an official Freedom of Information request, such a request must:

- Be a written request from a named person – this includes requests from social networking sites, e.g. Twitter, Facebook
- Have a return address for the information to be sent to – email/post
- Contain a clear question

However a Freedom of Information request does not have to mention FOIA.

The email address for Freedom of Information requests is: [oeasnt.foi@nhs.net](mailto:oeasnt.foi@nhs.net)

### **4.3 Exemptions**

There are a number of exemptions listed within the FOIA. These are agreed reasons which under certain circumstances allow a public organisation to legitimately withhold the information requested. A full list of exemptions can be found in Appendix B of this policy.

## **5. Development**

### **5.1 Prioritisation of Work**

As required by FOIA the Trust must respond to Freedom of Information requests fully and in a timely manner. This document is an important part of this as it explains the response process and the responsibilities of all staff.

## 5.2 Identification of Stakeholders

All staff who create/receive records as part of their role within EEAST are stakeholders in this Policy, as all records produced by/for the Trust are potentially disclosable.

## 5.3 Responsibility for Document's Development

The responsibility for the developing and updating of this document lies with the Corporate Records Manager/Fol Officer; approval will be through the Information Governance Group.

## 6. Publication Scheme

In order to comply with section 19 of FOIA, the Trust has adopted the model Publication Scheme (see Appendix D). The Publication Scheme is online and details the classes of information that EEAST routinely makes available to the public.

The Publication Scheme will be regularly reviewed and updated to ensure that the information contained within it is relevant and up to date.

Included in the Publication Scheme is the Disclosure Log, this contains the requests made to the Trust and the responses. In addition, the Trust has Transparency and Frequently Requested Information pages, both of which contain a variety of information about the Trust and are updated regularly to further improve transparency.

## 7. Freedom of Information Requests

Section 1 of FOIA gives a general right of access from 1<sup>st</sup> January 2005 to recorded information held by public authorities. Subject to certain conditions and exemptions, any person making a request for information is entitled:

- to be informed in writing whether the Trust holds the information
- to obtain a copy of that information.

In accordance with section 8 of FOIA, a request for information must be received in writing (including fax and email), stating the name of the applicant, an address for correspondence, and describing the information requested.

Under section 16 of FOIA the Trust has a duty to provide advice and assistance to persons who have made, or wish to make, requests for information. The Trust will ensure that systems and procedures are in place to meet this duty.

On receipt of the request for information the Fol Officers and Information Governance Manager will determine which Act is most appropriate to the request. For example, if the applicant is requesting their own medical records this should be dealt with under the current data protection legislation (see the Release of Information Policy). If the applicant is requesting environmental information then the request should be dealt with under the Environmental Information Regulations.

If the decision is made that the request is a valid Freedom of Information request then it must be logged onto DATIX. The FoI Officers will endeavour to forward the request to the relevant senior manager within two working days from receiving the original Freedom of Information request.

Should clarification be required for the Trust to be able to respond to the request, an email must be sent to the requestor asking that they provide this clarification within 20 working days. If clarification is not received, an email will be sent to the requestor formally closing the request. All requests will be put on hold until the request is clarified or closed.

These provisions are fully retrospective at the point of request, in that if EEAST holds the information requested it has a duty to communicate it (subject to certain conditions and exemptions)

## **8. Refusal of Requests**

The Trust is not obliged to comply with a request for information in four situations:

- a) Where the cost of compliance exceeds the appropriate limit
- b) Where a fees notice has been issued but remains unpaid after three months
- c) Where a request is vexatious or repeated
- d) Where an exemption applies (see Section 8.1)

### **8.1 Exemptions**

There are two types of exemptions under FOIA i) qualified exemption and ii) absolute exemption. The latter allows an organisation to immediately exempt the disclosure of information. The qualified exemptions require an organisation to consider the public interest test and whether the public interest in maintaining the exemption outweighs the public interest in disclosure.

A full list of exemptions can be found in Appendix B of this policy.

With regard to the public sector contracts exemption under section 43 of the Act, the Trust abides by the rules set out by the Government Procurement Service and uses the standard NHS terms and conditions of contract that have been drawn up by the Department of Health. Unless an exemption under FOIA is applicable, the Trust will be obliged to disclose that information contained in the contract.

The approval of the Compliance and Standard Lead and/or the Information Governance Manager is required before an exemption can be claimed.

## **9. Charges and Fees**

The Trust will not generally charge for information that it has chosen to publish in its Publication Scheme. However, charges may be raised where hard copies are requested or information is to be copied onto other media (e.g. CD-ROM). The charges will be regularly reviewed.

The Trust is not obliged to comply with a Freedom of Information request if it estimates that the cost of determining if it holds the relevant information, locating and retrieving the information and, where necessary, extracting the information from a document would exceed the appropriate limit set under section 12 of the Act.

Wherever possible the Trust will work with the applicant to provide alternative information that falls within the appropriate limit in line with section 16 of FOIA.

If the request does fall within the appropriate limit then the information must be released to the applicant. The Trust may charge the applicant for any costs incurred in providing the information, a fees notice outlining the amount charged should be sent.



## 10. Timescales for Dealing with a Freedom of Information Request

The Trust has a duty to respond within a 20 working day period on receipt of a written request. The Trust will establish systems and procedures to monitor all requests and ensure compliance with the time frames contained in FOIA.

If the Trust chooses to apply an exemption to any information; or refuse a request because it appears to be vexatious or repeated; or exceeds the appropriate limit for costs of compliance; a refusal notice will be issued within 20 working days informing the applicant of this decision.

If the Trust needs to apply the public interest test to a request for exempt information, it may not be possible to reach a decision relating to disclosure within the 20 working day time limit. In this situation, the Trust will write to the applicant within 20 working days of receipt of the request with a realistic estimate of when a decision will be reached.

If a fees notice is issued, the 20 working day time limit for responses begins on the day that the request is first received. However the working days between the fees notice being issued and the fee being paid will be disregarded for the purposes of the 20 working day deadline.

## 11. Transferring Requests

A request for information may be transferred where the Trust receives a request for information that it does not hold but which is held by another public authority. If a request is partly for information that the Trust does hold and partly for that which it does not, the transfer will only be made in respect of the part of that information it does not hold.

The Trust will offer advice and assistance to applicants in situations where some or all of the information requested is not held.

## 12. 'Round robin' requests

A 'round robin' request is one that has been sent to a number of different organisations by the same person. In some cases it may not be immediately obvious that the request has been sent to other organisations.

The Trust may decide to inform other organisations of this request for their information, and it may be necessary to liaise appropriately.

There may be times when on seeking advice from other organisations that a co-ordinated response is deemed to be the most suitable. However, the Trust will always make an individual determination on such a response and whether it is felt that this complies with FOIA.

## 13. Staff requests

Any requests for information under FOIA from staff members must still be forwarded promptly to the FoI Officers at [eoasnt.foi@nhs.net](mailto:eoasnt.foi@nhs.net) for processing. However, if the request is for minor information that is easily to hand this can be responded to directly as a staff request and a copy of this must be sent to the FoI Officers to ensure a record is kept of all information sent out.

## 14. Requests for person identifiable information

Subject Access Requests (SAR) are those where the requestor is asking for information about them. SARs from the public are dealt with by the Legal Services team, while all staff SARs are processed by



HR. Requests for Information (RFI) are dealt with by the Legal Services team and are requests for personal information by a third party.

Requests for such information can be made here: <http://www.eastamb.nhs.uk/contact-us/requests-for-information.htm>

## **15. Complaints**

EEAST has a Complaints Procedure for Freedom of Information requests and this can be found at Appendix C.

## **16. Records Management**

In accordance with the Records Management Policy and Procedures, all Freedom of Information requests should be retained for a minimum of three years. Requests which were subsequently appealed should be retained for six years from the date of the final response.

## **17. Equality Analysis**

An Equality Analysis has been completed for this Policy; this can be found in Appendix F.

## **18. Dissemination and Implementation**

### **18.1 Dissemination**

The Freedom of Information Policy will be disseminated to all managers and staff by email and the intranet in line with the Policy for the Development of Procedural Documents.

The Policy will also be published on the Trust's public website.

### **18.2 Implementation**

It is important that all managers and staff familiarise themselves with their responsibilities in the process of managing Freedom of Information requests. Training regarding these matters should be arranged by the Learning and Development Unit or the Fol Officers if required.

Staff should be encouraged to seek advice from the Fol Officers in any requests for information they receive.

## **19. Process for Monitoring Compliance and Effectiveness**

The Information Governance Group will receive reports at its meetings covering:

- the number of Freedom of Information requests received
- analysis of compliance with timescales relating to Freedom of Information requests
- complaints arising from Freedom of Information requests, including analysis and feedback

Through the Information Governance Group, the Board will monitor the Freedom of Information process, the allocation of responsibility for and implementation of any actions arising.

The process for monitoring can be found in the Monitoring Table in Appendix E.

## **20. Standards/Key Performance Indicators**

The Standards/Key Performance Indicators that this policy is measured against can be found in the Monitoring Table in Appendix E.

## **21. References**

- Freedom of Information Act 2000
- Data Protection Act 2018
- ICO model publication scheme

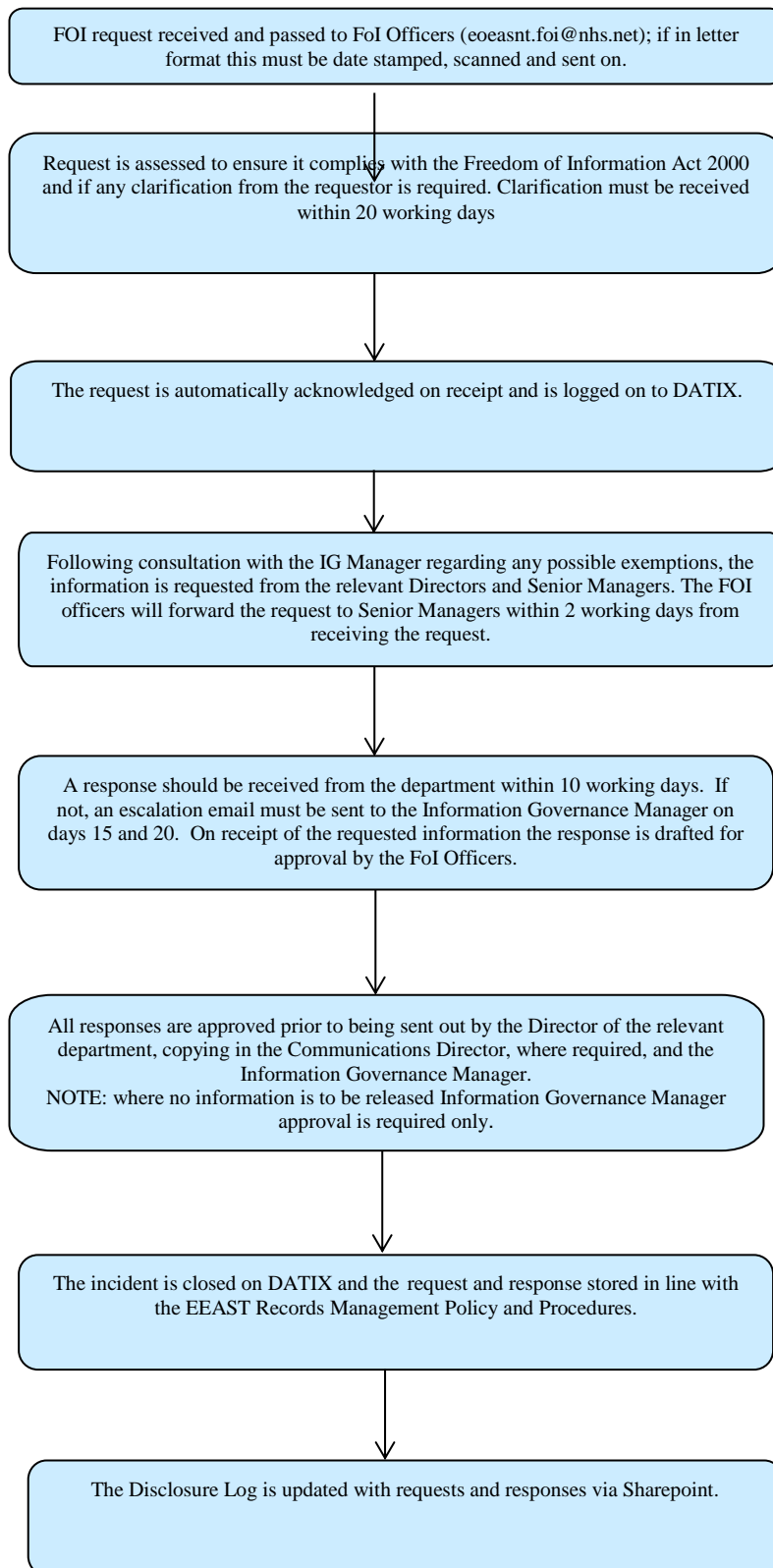
## 22. Associated Documents

- Policy for the Development of Procedural Documents
- Records Management Framework and Guidelines
- Records Management Policy and Procedures
- Release of Information Policy

## Appendices

- A Freedom of Information Procedure Flow Diagram
- B Exemptions under the Freedom of Information Act 2000
- C Freedom of Information Act 2000 – Complaints Procedure
- D Publication Scheme
- E Monitoring Table
- F Equality Analysis

## APPENDIX A: Freedom of Information Procedure Flow Diagram



## Appendix B – Exemptions under the Freedom of Information Act 2000

### A. Qualified exemptions

- s.22 Information intended for future publication
- s.24 National security
- s.26 Defence
- s.27 International relations
- s.28 Relations within the United Kingdom
- s.29 The economy
- s.30 Investigations and proceedings conducted by public authorities
- s.31 Law enforcement
- s.33 Audit functions
- s.35 Formulation of government policy
- s.36 Effective conduct of public affairs (except information held by the House of Commons and the House of Lords)
- s.37 Communications with Her Majesty
- s.38 Health and safety
- s.39 Environmental information
- s.40 Personal information
- s.42 Legal professional privilege
- s.43 Commercial interests
- s.43 Public sector contracts

### B. Absolute exemptions

- s.21 Information accessible to applicants by other means
- s.23 Information supplied by or relating to security bodies
- s.32 Information contained in court records
- s.34 Parliamentary
- s.36 Effective conduct of public affairs (House of Commons and House of Lords only)
- s.40 Personal information (where the applicant is the subject of the information)
- s.42 Information provided in confidence
- s.44 Prohibitions on disclosure where a disclosure is prohibited by an enactment or would constitute contempt of court

If you would like more information regarding the exemptions under the Freedom of Information Act 2000 then please go to:

[http://www.ico.gov.uk/for\\_organisations/freedom\\_of\\_information/guide/refusing\\_a\\_request.aspx](http://www.ico.gov.uk/for_organisations/freedom_of_information/guide/refusing_a_request.aspx)



## **Appendix C – Freedom of Information Act 2000 – Complaints Procedure**

If you have made a request for information under the Freedom of Information Act 2000 and you are unhappy with the response from the Trust either because of the amount the Trust wishes to charge you or for EEAST's application of an exemption, you can request an internal review by following the steps below.

### **Step 1**

In the first instance please contact the Corporate Records Manager/Fol Officer or Clinical Records Manager/Fol Officer by emailing [eoasnt.foi@nhs.net](mailto:eoasnt.foi@nhs.net). Alternatively you can write to:

Freedom of Information team  
East of England Ambulance Service NHS Trust  
Hospital Approach  
Broomfield  
Chelmsford  
Essex  
CM1 7WS

The Corporate Records Manager or Clinical Record Manager will discuss the Trust's response to your Freedom of Information request in order to try and resolve any issues you may have with the management of your request.

If you are unhappy with the outcome of this discussion then please move on to Step 2.

### **Step 2**

Please contact the Information Governance Manager if you wish to complain about the Trust's response to your Freedom of Information request by emailing [eoasnt.foi@nhs.net](mailto:eoasnt.foi@nhs.net). Alternatively you can make a written complaint by writing to the Information Governance Manager at the above address.

You should include the following details in your complaint:

- your name and address
- what information was requested and when

If you do complain about the Trust's response, your complaint will be acknowledged within three days and an investigation into the issue started immediately. The Trust will aim to respond to your complaint within twenty working days however if for any reason there is a delay, this will be communicated to you together with the reason for the delay.

If you remain dissatisfied with the Trust's response please move on to Step 3.

**Step 3**

If you remain dissatisfied with the the Trust's response to your complaint then please contact the Information Commissioner's Office:

Telephone: 01625 545745

Email: Please complete the Freedom of Information and Environmental Information Regulations Complaint Form on the website ([www.ico.gov.uk](http://www.ico.gov.uk)) and email to: [mail@ico.gsi.gov.uk](mailto:mail@ico.gsi.gov.uk)

Post: Please complete the Freedom of Information and Environmental Information Regulations Complaint Form on the website ([www.ico.gov.uk](http://www.ico.gov.uk)) and send to:  
Case Reception Unit  
Customer Services Team  
Information Commissioner's Office  
Wycliffe House  
Water Lane  
Wilmslow  
Cheshire  
SK9 5AF



## **Appendix D – Publication Scheme About the Freedom of Information Act 2000**

The Freedom of Information Act 2000 enables members of the public to access documents and other information about public authorities. It is governed by the Information Commissioner’s Office, who also manages the current data protection legislation and the Environmental Information Regulations 2004.

The aim of the Freedom of Information Act 2000 is to promote greater transparency and openness of public authorities by supporting members of the public in requesting information from and about public authorities.

Under section 20 of the Freedom of Information Act 2000, public authorities are required to publish and maintain a publication scheme. The publication scheme is a list of the information routinely published by the Trust and the purpose of the scheme is to enable significant amounts of information to be made available without the need for a specific request.

The publication scheme is split into seven categories and these are identified below:

**Who we are and what we do**

**What we spend and how we spend it**

**What are our priorities and how are we doing**

**How do we make decisions**

**Policies and procedures**

**Lists and registers**

**The services we offer**



**Appendix E – Monitoring Table**

What	Who	How	Frequency	Evidence	Reporting arrangements	Acting on recommendations	Change in practice and lessons to be shared
Number of Fol responses, number sent out within 20 working days	Fol Officers / Clinical Quality Systems team	Reports generated from Datix	Data provided to the Information Governance Group and any issues raised as necessary.	Figures taken from Datix collated into a report	The report will go before the Information Governance Group	The Fol Officers will be responsible for acting on any recommendations made by the Information Governance Group	The outcome of any changes will be fed back to the Information Governance Group
Timeliness of Fol responses	Fol Officers / Clinical Quality Systems team	Deadline dates recorded on Datix	Data provided to the Information Governance Group and any issues raised as necessary.	Figures taken from Datix	Report to the Information Governance Manager	The Fol Officers will be responsible for acting on any recommendations made	Any changes to processes as a result of this will be fed back to the Information Governance Group
Approvals process followed	Fol Officers	Emails requesting and giving approval will be retained	As required	Emails retained	Report to the Information Governance Manager	The Fol Officers will be responsible for acting on any recommendations made	Any changes to processes as a result of this will be fed back to the Information Governance Group



## Appendix F – Equality Analysis

**Title: Freedom of Information Policy**

**What are the intended outcomes of this work?** *Include outline of objectives and function aims*  
 To ensure that all Freedom of Information requests are processed in line with the Freedom of Information Act.

**Who will be affected?** *e.g. staff, patients, service users, general population etc*  
 All staff ,third party contractors and general population

**Evidence** *The Government’s commitment to transparency requires public bodies to be open about the information on which they base their decisions and the results.*<sup>1</sup>

**What evidence have you considered?** *List the main sources of data, research and other sources of evidence (including full references) reviewed to determine impact on each equality group (protected characteristic). This can include national research, surveys, reports, research interviews, focus groups, pilot activity evaluations etc. If there are gaps in evidence, state what you will do to close them in the Action Plan on the last page of this template.*

**Disability**

The policy can be made available in different formats if required.

**Gender**

No evidence found to highlight any differences/ allowances required

**Race**

The policy can be made available in different formats if required.

**Age**

The policy can be made available in different formats if required.

**Gender reassignment (including transgender)**

No evidence found to highlight any differences/ allowances required

**Sexual orientation**

No evidence found to highlight any differences/ allowances required

**Religion or belief**

No evidence found to highlight any differences/ allowances required

**Pregnancy and maternity**

No evidence found to highlight any differences/ allowances required

**Carers**

No evidence found to highlight any differences/ allowances required

**Other identified groups**

No evidence found to highlight any differences/ allowances required

## Engagement and involvement

*Was this work subject to the requirements for public engagement/consultation?*

*How have you engaged stakeholders in gathering evidence or testing the evidence available?*

*How have you engaged stakeholders in testing the policy/strategy or programme proposals?*

*For each engagement activity, please state who was involved, how and when they were engaged, and the key outputs:*

<sup>1</sup> [EEAS Being Open Policy](#)



### Summary of Analysis

No evidence to suggest that there is any potential differential impact for any of the protected characteristics.

### Eliminate discrimination, harassment and victimisation

No evidence to suggest that there is any potential differential impact for any of the protected characteristics.

### Advance equality of opportunity

No evidence to suggest that there is any potential differential impact for any of the protected characteristics.

### Promote good relations between groups

No evidence to suggest that there is any potential differential impact for any of the protected characteristics.

### What is the overall impact?

No evidence to suggest that there is any potential differential impact for any of the protected characteristics.

### Addressing the impact on equalities

No actions required

**Action planning for improvement** *Please give an outline of the key actions based on any gaps, challenges and opportunities you have identified. Actions to improve the policy/programmes need to be summarised (An action plan template is appended for specific action planning). Include here any general action to address specific equality issues and data gaps that need to be addressed through consultation or further research.*

Please give an outline of your next steps based on the challenges and opportunities you have identified. *Include here any or all of the following, based on your assessment*

- Plans already under way or in development to address the **challenges** and **priorities** identified.
- Arrangements for continued engagement of stakeholders.
- Arrangements for continued monitoring and evaluating the policy for its impact on different groups as the policy is implemented (or pilot activity progresses)
- Arrangements for embedding findings of the assessment within the wider system
- Arrangements for publishing the assessment and ensuring relevant colleagues are informed of the results
- Arrangements for making information accessible to staff, patients, service users and the public
- Arrangements to make sure the assessment contributes to reviews of EEAS strategic equality objectives.

### For the record

**Name of person who carried out this assessment:**

Gail Butler (Corporate Records Manager)

**Date assessment completed:**

28<sup>th</sup> September 2016

**Name of responsible Director:**

Sandy Brown (Director of Nursing and Clinical Quality)

**Date assessment was signed:** 8<sup>th</sup> December 2016

