Trust Policy		NHS Worcestershire Acute Hospitals NHS Trust

INTEGRATED IDENTITY MANAGEMENT (IIM) PROCESS POLICY

Department / Service:	Human Resources/ Knowledge Management	
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Approved by:	Information Governance Steering Committee	
Date of approval:	29th July 2021	
Review Date: **This is the most current document and should be used until a revised version is in place**	31st July 2025	
Target Organisation(s)	Worcestershire Acute Hospitals NHS Trust	
Target Departments	Trust wide	
Target staff categories	Registration Authority (RA) staff; staff administering the workforce, recruitment, payroll and HR functions on ESR; Informatics and Information Governance personnel; smartcard users.	

Policy Overview

The purpose of the first edition of the policy was to outline the agreed working practices required to support the Electronic Staff Record (ESR) interface to the User Identity Manager (UIM) software used to provide the electronic management of access control.

In February 2015 UIM software was replaced by Care Identity Service (CIS) software which has led to some changes in procedure. A new national Registration Authority Policy was published in March 2019 which lays out the RA policy requirements that every organisation which has a Registration Authority needs to adhere to. A full operational and process guidance document was released in February 2016

This revision has taken the changes into account and complies with the national policy and procedure. It is not intended to be an exhaustive review of all HR/RA processes and procedures but rather will focus on the key processes for issuing NHS Care Records Service (NCRS) Smartcards. Depending on the role assigned, an NCRS Smartcard can give a user access to the NHS Care Record Service or other National Programme for IT applications such as the E-Referral Service (formerly Choose and Book).

The policy will be of primary interest to those staff working within the Registration Authority (RA) function of the Trust and on the workforce, recruitment, payroll and HR functions of ESR. It will also be of interest to managers requiring smartcards for their teams and IT and Information Governance personnel.

Key amendments:

Date	Amendment	By:
06/08/2015	Document extended for 12 months as per TMC paper approved on 22nd July 2015	TMC
14/11/16	Further extension as per TMC 22nd July 2015	TMC
December 2017	Document extended for 3 months as per TLG recommendation	TLG
March 2018	Document extended for 3 months as approved by TLG	TLG
June 2018	Document extended for 3 months as per TLG recommendation	TLG
February 2020	Document extended for 3 months whilst approval process is completed	David Chamberlain
May 2020	Document extended for 6 months during COVID-19 period	
22nd Jan 2021	Document extended for 6 months to enable thorough review to take place	David Chamberlain
11th June 2021	National RA policy link upgraded to 2020.	David Chamberlain
29th January 2025	Document extended for another 6 months whilst under review	David Chamberlain

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1 Introduction

1.1 From April 2008, NHS Employment Check Standards became a requirement in the NHS as part of the annual health check. Similarly, robust identity checks were also enforced using the same identity management standards carried out by an NHS organisation's Registration Authority (RA) to verify an individual's identity before [i]allowing access to NHS Care Records Service (NHS CRS) applications. Details of the requirements are given in the NHS Employers publication *Identity checks* http://www.nhsemployers.org/your-workforce/recruit/employment-checks/nhs-employment-check-standards/identity-checks

Combining these two parallel activities into a single **Integrated Identity Management** (IIM) process has been shown to deliver significant benefits

through HR/RA process integration and the move to Position Based Access Control (PBAC).

1.2 **ESR-CIS Interface** is used to link staff records in ESR to user records in NHS CRS in order to remove duplication and to drive access control based on the job that a person holds. HR functions currently update ESR when changes are made regarding an employee's assignment to an established ESR position. Where this position is linked to an NHS CRS Access Control Position, the ESR interface will be triggered by such changes and will automatically update an individual's access rights to NHS CRS compliant systems to reflect the requirements of their new position or status.

1.3 The main benefits are:

- Efficiency savings
  - The achievement of a paperless system for smartcard registration
- Improved governance
  - Automatic cancellation of NCRS access on leaving employment
  - Online signature of terms and conditions
  - Standard positions allocated for job roles through ESR

1.4 This policy document is compliant with the Registration Authority Policy 2020 and the Registration Authorities Operational and Process Guidance 2016.

2. Scope of the Policy

The policy applies to all employees and external contractors who require smartcards.

2.1 It is particularly relevant for staff working within the Registration Authority (RA) function of the Trust and on the workforce, recruitment, payroll and HR functions of ESR. It will also be of interest to managers requiring smartcards for their teams and IT and Information Governance personnel.

2.2 The document is not intended to be an exhaustive review of all HR/RA processes and procedures but rather will focus on the key processes for issuing NHS Care Records Service (NCRS) Smartcards.

2.3 Currently, Worcestershire Acute Hospitals NHS Trust uses NCRS Smartcards for access to the following systems:

- ESR Manager/Supervisor Self Service
- ESR e-learning
- E-Referral Service (formerly Choose & Book)
- Hospedia (for EZNotes)
- Secondary Users Service (SUS)
- Summary Care Record (SCR)
- TPP SystmOne

- UAG (remote access)

3 Definitions

Access Control Position (ACP)
An ACP contains a set of access rights that have been approved and granted though the RA process.

Care Identity Service (CIS)
The Care Identity Service is the smartcard registration application introduced in 2015 to perform Registration Authority activities.

E-GIF Level 3
Security standards for access to government systems.

Electronic Staff Record (ESR)
The electronic human resources management system used by the majority of organisations within the NHS.

Integrated Identity Management (IIM)
IIM provides an interface for the separate ESR process maintained by the Workforce Transformation Team and the CIS process maintained by the RA Team for capturing and managing an employee's identity and access to the spine.

NHS Care Records Service (NCRS or NHS CRS)
National IT system developed to store patient records and link information between organisations.

NHS CRS Smartcard
A plastic card containing an electronic chip that is used to access the NCRS and other NHS IT applications, along with a passcode. The chip does not contain any personal information.

Position Based Access Control (PBAC)
The PBAC concept groups access control requirements by job role allowing any number of employees to share generic access rights based on what they do rather than who they are. The positions can be associated with ESR positions thus enabling the inheritance of access rights via the ESR position that the employee is assigned to.

Registration Authority (RA)
The organisational structure within an NHS organisation that is responsible for registering and verifying the identity of health care professionals/workers who need access to the NHS Care Records Service or other NHS IT application. Staff need to prove their identity and have their application approved by a sponsor (usually their line manager) before being issued with a smartcard by the RA. The RA grants them an approved level of access. This process is essential to protect the security and confidentiality of the systems. The Executive Management Team of the NHS organisation should embed governance of their RA in the information governance and performance management framework.

Role Based Access Control (RBAC)

A national standard set of job roles and related activities and areas of work which can be approved by a sponsor and granted by the RA to a user. The database and users guide are at https://digital.nhs.uk/services/registration-authorities-and-smartcards the NHS digital national Role Based Access Code (RBAC) table can be downloaded from this link.

User Identity Manager (UIM)

UIM was the registration software managing access control to NHS CRS systems before the introduction of CIS.

User's Unique Identifier (UUID

The UUID is randomly applied on registration of users in CIS. It is displayed under the photo on the smartcard. The number is also held against employee records in ESR to validate that the employee has an active entry on NHS CRS.

4. Responsibility and Duties

NHS Digital is the single Registration Authority for the NHS. All organisations that run a local Registration Authority do so on a basis of delegated authority from NHS Digital. Mandatory requirements for an organisation to carry out this authority were given in the Registration Authority Policy 2020 The policy lays out the mandatory requirements for an organisation to carry out their own RA activities.

The local Registration Authority consists of the Board level individual accountable for RA activity, RA Manager, RA Agents and sponsors who have a responsibility to individuals providing healthcare services to the NHS directly or indirectly to ensure timely access to the spine enabled applications in accordance with their healthcare role. The RA Managers and sponsors are appointed by the Board or executive management team and have a written letter of appointment which they hold stored in a safe environment. HSCIC recommend that there should be a minimum of two individuals assigned to the RA Manager role for business continuity reasons.

4.1 Directorate level

Overall responsibility for this policy rests with the Trust Board. The lead Executive Director will be the Director of Human Resources and Organisational Development who has responsibility for ensuring that:

- The policy is implemented and operated effectively
- An audit trail is maintained
- All staff involved with the administration of IIM are aware of the policy and the procedures that apply to them.
- The accountable Director must report annually to the board on RA activity in the Trust, and must sign off the RA IG Toolkit submissions.

4.2 RA Manager

The Trust's RA Managers responsible for running the governance of the RA for Worcestershire Acute Hospitals NHS Trust. This involves:

- Agreeing and signing off local operational processes;

- Ensuring that these processes are being adhered to;
- Registering RA staff;
- Ensuring the effective training of RA staff;
- Facilitating the process for agreeing the organisation's access control positions;
- Ensuring that appropriate auditing is carried out;
- Ensuring users are compliant with the terms and conditions of smartcard usage;
- Ensuring verification of user's ID is to e-GIF level 3;
- Ensuring leavers have their access rights removed in a timely manner;
- Ensuring the security of RA records including archived paper records which must be kept for a period of either 6 years after the subject leaves service or until the subject's 79th birthday whichever is the later;
- Ensuring all service issues are raised appropriately locally and nationally.

4.3 Trust Sponsor/Line Managers

Line managers are responsible for informing the RA Manager via email appropriate personal details for members of staff who require smartcard access in the course of their duties. It is expected that they will be able to give an indication of the access requirements.

In case of a variance between the role requested by the line manager and that allocated by the Trust Sponsor, the RA Manager will consult with both parties to resolve the matter.

4.4 RA Agent Advanced

The CIS system introduced an additional level of authority. Advanced RA Agents have the ability to action nearly all the RA processes available to the RA Manager with the exception of assigning users to their RA roles.

4.5 RA Agent

An RA agent can check ID, register smartcard users, unlock smartcards and renew certificates.

4.6 RA Agent – ID Checker

This role checks the user's identity and grants their digital identity. It is intended for HR recruitment staff where ID checking has been centralised. The role is not currently allocated in Worcestershire Acute Hospitals NHS Trust.

4.7 Local Smartcard Administrator

This role only has the ability to unlock smartcards and assist in the renewal of certificates. The role in not currently allocated in Worcestershire Acute Hospitals NHS Trust.

4.8 Trust employees

Those employees who are deemed by their line manager to require a smartcard must:

- Provide the correct identity documents as defined as e-GIF Level 3;
- Undertake to observe the agreed terms and conditions and electronically sign this declaration when their card is issued (Appendix C).

4.9 External contractors

External contractors to the Trust who require access to systems accessed by smartcard will need to abide by the same terms and conditions as employees. Their application must be sponsored by a senior manager employed by the Trust. Their smartcard access will be set to expire on the end date of their contract. If the end date is not known it will be set at 3 months from the start date.

5 Creation of a national digital identity

All users including RA staff must have only one NHS smartcard issued to them showing their UUID and photograph. The primary purpose of NHS smartcards is to provide identification and system authentication to spine enabled applications.

5.1 Identity verification

Identity must be verified in a face to face meeting. It must be done by examining original documents and seeing that the identity relates to the individual who presents themselves at the meeting. RA staff should verify at the face to face meeting that the applicant's current UK driving licence photo card and/or passport photograph are a true likeness and that all documents are original and have not been altered. Identity must be verified to the previous inter-governmental standard known as e-GIF Level 3. This provides assurance that the identity is valid across any organisation an individual works within.

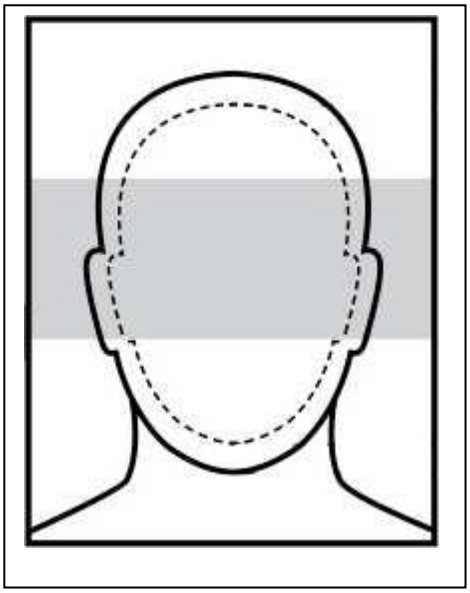
The documents that can be used to verify an identity are listed in the NHS Employers publication *Identity checks* which can be currently found at http://www.nhsemployers.org/your-workforce/recruit/employment-checks/nhs-employment-check-standards/identity-checks

5.2 Photographs

The photograph assigned to the user's profile and printed on the smartcard must adhere to the following standards and specifications:

- It must be cropped so that it appears as in the diagram;
- It must be taken against a plain background with adequate lighting;
- The photograph must be between 420x525 pixels and 630x788 pixels in size.
- On completion of the registration process the photograph should be removed from local files as it is then stored securely on CIS.

Further information is at https://www.gov.uk/photos-for-passports.



6. Registration processes

6.1 Process for Worcestershire Acute Hospitals NHS Trust employees

If a member of staff is required by their line manager to have a smartcard, the line manager inform the RA Manager of the person's full name and job title, with the reason they require a smartcard using a locally designed form on the

smartcards intranet page. The line manager will email the form to the email address specified on the Registration Authority intranet page. The information is archived in the RA requests file on the RA shared drive on the intranet which is accessible only to RA and ESR staff.

The person will then be invited by an RA Agent to bring their ID documents to the Trust library most convenient for them. Their ID information will be checked by RA staff in accordance with e-GIF level 3 as described in paragraph 5.1.

The RA Agent will register the person, integrating the record with the ESR record and print the card. The user will then be invited back to collect their card, add their personal pass code and digitally sign the terms and conditions.

6.1.1 New starters with smartcards issued by other Trusts

Increasingly new starters previously employed by the NHS will already have been issued with a smartcard. In this case, the line manager will enter the new starter's UUID when requesting a smartcard. Once the ID checks have been completed by the RA Agent and the card checked that the photograph is still a good likeness, the record can be associated with ESR and the old card can be used. If the person's appearance no longer matches the photograph on the card a new photograph will be taken and a replacement card issued.

6.1.2 Personal details changes

The ESR system automatically informs the RA via a request in CIS of any personal detail changes, ensuring that the data is kept up to date in CIS and consistent with ESR.
The personal details that are synchronised between ESR and CIS are as follows:

Title
Surname
First name
Middle name
NI Number
Date of Birth
Email address
Work phone number
Work mobile number

If a change in core identity is requested such as a change of name, appropriate proof such as a marriage certificate must be seen.

6.1.3 External Shared Services Staff

External shared services staff include members of staff not directly employed by the Trust who assist in various elements of ESR including payroll, bulk updates of data and transfer of staff.

As these staff are not assigned to an ESR position they cannot have their NHS CRS access for Worcestershire Acute Hospitals NHS Trust controlled using the ESR-CIS Interface. However, they still require their Smartcard UUID to be entered into ESR to ensure that they can use their Smartcard to access the Trust's virtual private databases.

This requires ID checks to be recorded in ESR for the user and the 'association' to be completed using the RA Workbench rather than the ESR record.

6.2 CIS-only processes

CIS is used without connecting to ESR for managing NHS CRS System access for non-employees. These can be contractors (eg Health Records staff employed by Xerox) or employees of other NHS Trusts (eg Worcestershire Health & Care Trust staff who require access to Trust systems such as the E-Referral Service).

6.2.1 Contractors

The contractor's line manager within Worcestershire Acute Hospitals NHS Trust will enter a request though the RA intranet page giving the name and address of the person, their job title, the reason they need access and the end date of their contract. The request will also be recorded in the RA transactions log, and an appointment agreed with the new starter who will attend a face to face meeting with the RA staff and produce their ID documentation.

The RA Staff will then verify the person's ID and enter the relevant information into the transactions log and take a photograph of the user. RA staff will then add the details in CIS and print and issue the card, with the user electronically signing the terms and conditions. The card will be set to expire at the end date of the contract, or in 3 months if there is any doubt.

6.2.2. Inter-organisational agreements

Current examples are Worcestershire Acute Trust staff working with SystemOne which is managed by Worcestershire Health and Care Trust and Worcestershire Health and Care Trust staff who need to book patients into Worcestershire Acute Trust hospitals using the e-referrals service. We have a reciprocal agreement to allow 6 months access to these systems.

6.3 Temporary access cards (TACs)

If a user already has a verified digital identity it is allowable to issue them a temporary access card. A temporary access card has pre-assigned access and is issued for a set short period in particular circumstances.

Worcestershire Acute Hospitals NHS Trust has decided that temporary access cards are only issued by RA staff in the following circumstances:

- The user does not have their smartcard with them, they need to use it immediately and it is not feasible to collect it;
- The user needs different or continued access and RA functionality is not available to do this.

6.3.1 Creating a TAC

Details are entered in CIS as follows'

Given name: Temporary Access

Surname: Card

Preferred name: TAC [RWP][position name]

The ID information is entered in accordance with Registration Authorities Operational and Process Guidance (2016 p27)

6.3.2 Issuing a TAC

RA staff verify that the individual has a national digital identity and check that the photograph on their record is a true likeness.

A manual issue log is maintained for each TAC containing the following information: smartcard user name and UUID; reason for issue; time and date of issue; name and UUID of RA staff member issuing TAC; return time and date.

A TAC should normally be issued for a maximum of 72 hours.

On return, the TAC should be locked by entering an incorrect passcode 3 times.

The RA Manager will monitor the use of TACs and the issue log on a regular basis.

7. Positions Setup and Maintenance

7.1 Position Based Access Control (PBAC)

Worcestershire Acute Hospitals NHS Trust reviewed all of the NHS CRS Access used within the organisation when the IIM approach was adopted and developed the Access Control Positions (ACPs) using a 'bottom up' approach based on these findings.

ACPs are reviewed annually to ensure that the current requirements are still valid. When business practices require changes to be made adjustments will be processed using the relevant options below.

7.2 Changes to Access Control Positions

Any change will need to be approved Information Governance Steering Group, or if urgent, by the Information Governance Manager, before the amendment is made to the ACP.

In granting new ACPs, the RA Manager will have regard to the National RBAC Database at https://digital.nhs.uk/services/registration-authorities-and-smartcards the NHS digital national Role Based Access Code (RBAC) table can be downloaded from this link.

Upon receiving authorisation the ACP(s) will be created, approved and granted in CIS before being downloaded into ESR.

8. Implementation and dissemination

The revised policy has been implemented along with the adoption of the CIS software. The revised policy will be placed in the Trust's HR document library and linked to the RA intranet pages. It will be publicised through the Trust Daily Brief.

9. Training

9.1 RA Staff

The RA Manager ensures all RA staff have completed the e-learning provided by the HSCIC and that all training is recorded.

9.2 Users

New smartcard users are given an information leaflet when collecting their smartcard.

RA staff also make sure that new users are able to logon with their smartcards when they ask them to digitally sign to accept the terms and conditions when their smartcard is issued. If required, they will also show how to access ESR, e-learning or gain remote access. Smartcard use for other programmes will need more specialised training in the use of the specific systems.

10. Monitoring and Compliance

The RA transactions log and RA staff training records will be regularly monitored and available for audit. Quarterly reports will be submitted to the Trust's Information Governance Steering Group.

The full audit policy is given at Appendix D.

11. Policy Review

The Workforce and Organisational Development Group will review this policy on a biennial basis, or more frequently if required.

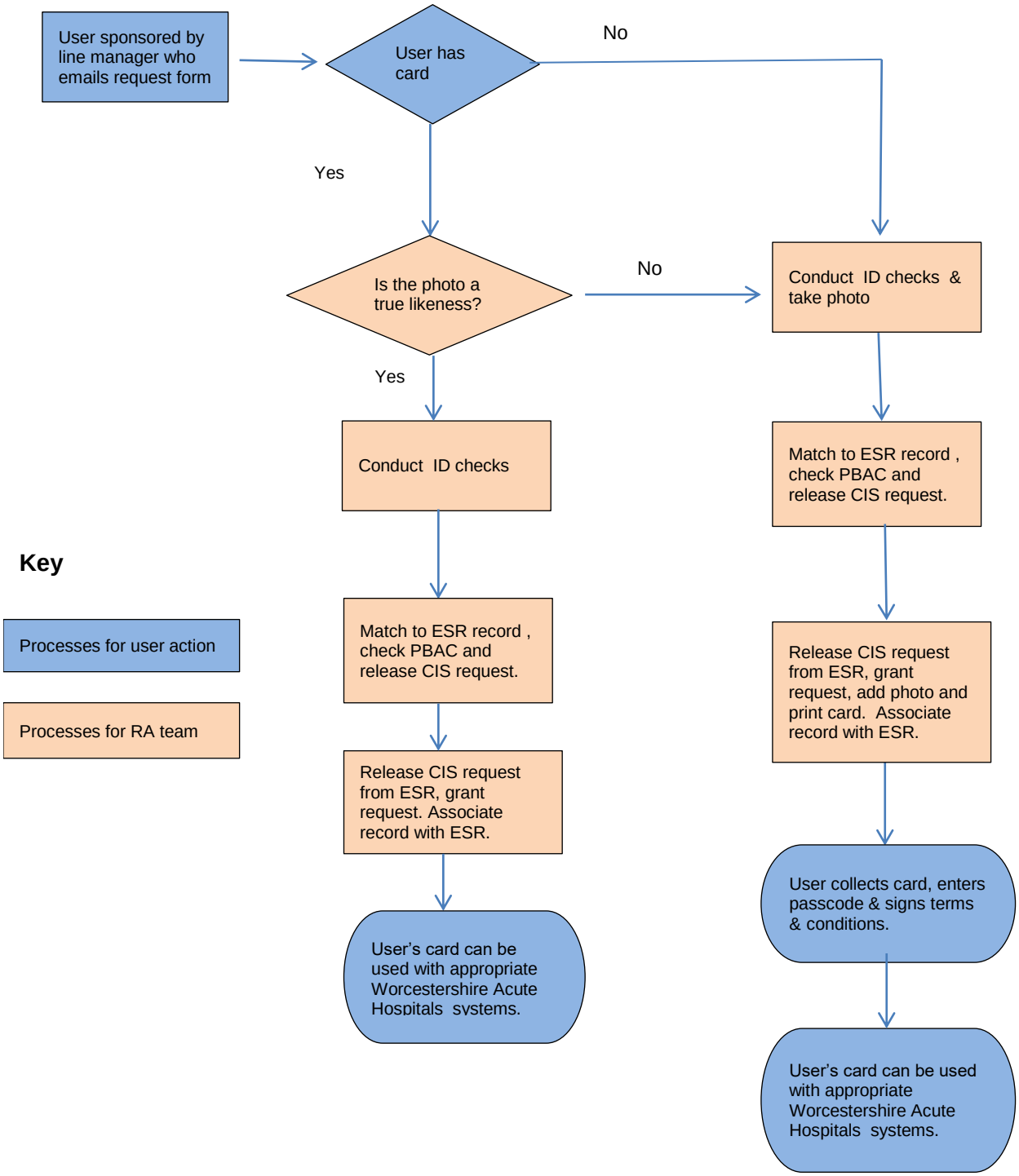
12. References

Document	URL
Registration Authority Policy NHS Digital, 2020.	Registration Authority Policy 2020
Registration Authorities Operational and Process Guidance 2016.	Registration Authorities Operational and Process Guidance 2016.
Identity checks. NHS Employers, 2015.	http://www.nhsemployers.org/your-workforce/recruit/employment-checks/nhs-employment-check-standards/identity-checks
Registration Authorities training modules	https://digital.nhs.uk/services/registration-authorities-and-smartcards/registration-authority-training

Data Security and Protection Toolkit	https://digital.nhs.uk/data-and-information/looking-after-information/data-security-and-information-governance/data-security-and-protection-toolkit

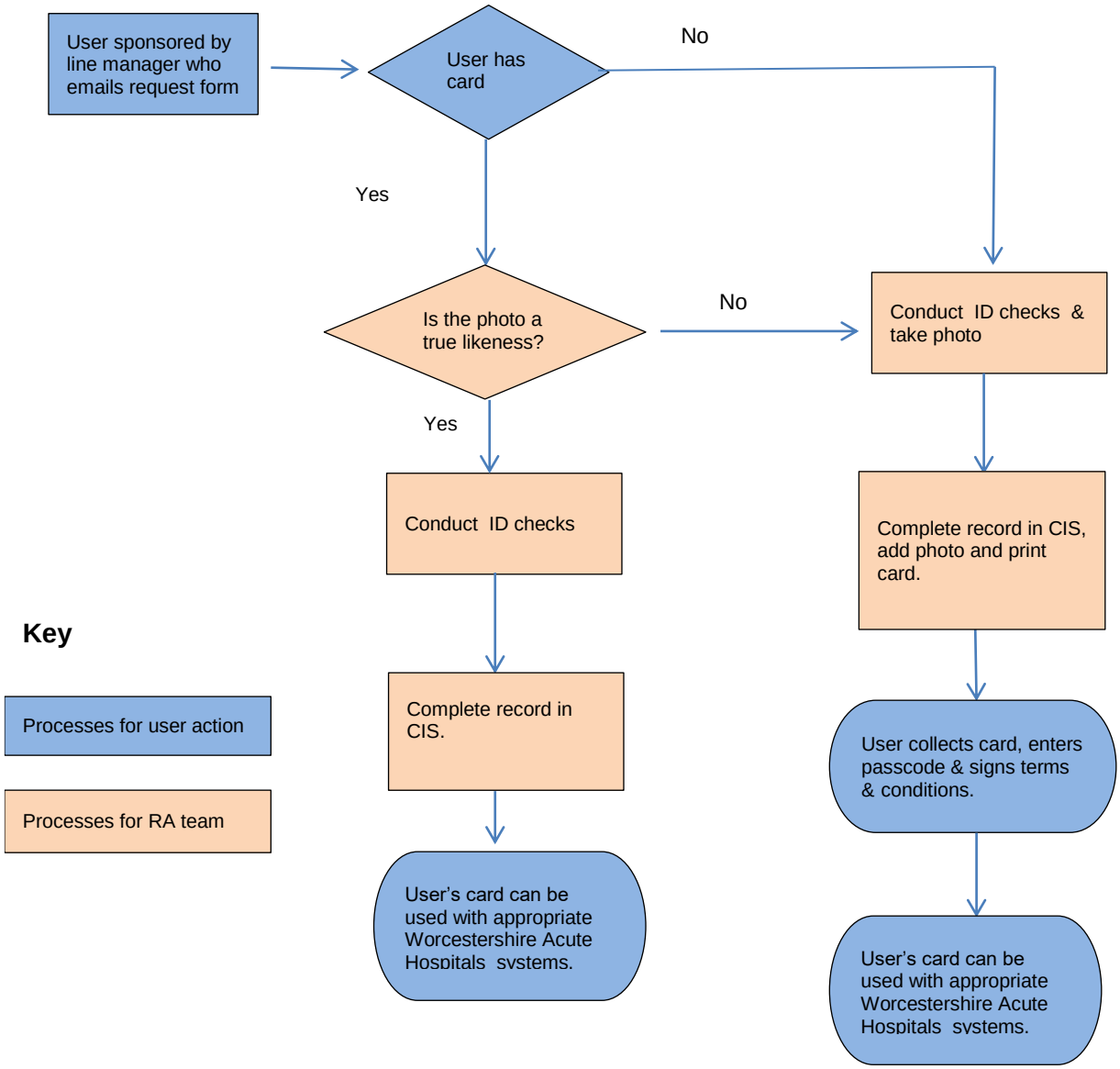
Appendix A:

Registration Process for Worcestershire Acute Hospitals Employee



Appendix B:

Registration Process for External Users



Appendix C NCRS Smartcard User Terms and Conditions

Terms and conditions

Privacy Notice to Smartcard users on the use of your personal data

NHS Digital will collect personal data on you, some of which you provide in your application, and some of which is collected by cookies when you access NHS Care Records Service applications[1].

NHS Digital is the data controller for this data, under powers arising from Directions[2].

This data will be processed:

- by local and other Registration Authorities for the purposes of validating your identity, managing your Smartcard and ensuring that you are given appropriate access to NHS Care Records Service applications, or applications that utilise the NHS Care Records Service authentication.
- by NHS Digital to record your use of the NHS Care Records Service applications.
- in accordance with General Data Protection Regulation (GDPR) data protection law.
- for disclosure and auditing of access to systems as part of our commitment to patients within the Care Record Guarantee, such as to the Summary Care Record (SCR) https://digital.nhs.uk/services/summary-care-records-scr (https://digital.nhs.uk/services/summary-care-records-scr) and in accordance with any complaint, investigation or as required by appropriate legislation.

Your data will:

- be held throughout your time as an active user and will be retained for up to 40 years after your Smartcard user profile has been closed, at which point it will be subject to review.
- not be transferred out of the European Economic Area.
- not be used for any automated decision making.

The above details the personal data processed in relation to the NHS Digital Smartcard registration itself. For details of how other NHS Digital programmes use data (that you may access using your smartcard) please see https://digital.nhs.uk (https://digital.nhs.uk).

Appendix D Audit Policy

Responsible for running RA Governance in their organisation

For RA Managers to fulfil their governance responsibility Registration Authorities must retain RA records and implement periodical audit activities.

Should the need arise, by retaining sufficient records of RA activity enables the RA manager to be able to determine, at a later date, the supporting evidence and methods used to verify and validate identity.

This may be useful to determine for example, the Sponsor or the RA Agent that had approved or granted the user's identity using the paper forms. Additional examples include checking when a user had originally signed the Terms and Conditions of Smartcard use using the RA01 form.

The NHS England Corporate Records Retention – Disposable Schedule and Retention http://www.england.nhs.uk/wp-content/uploads/2014/02/rec-ret-disp-sch-guid.pdf provides information on retaining RA records to organisations that operate a Registration Authority.

The above document states that the following RA records need to be retained by the local organisation for a period of either 6 years after subject of file leaves service or until subject's 79th birthday whichever is the later:

- Previous Calendra forms (RA01, RA02, RA03 forms etc.)
- Assignment Letters
- Inter-organisational agreements

CIS Audit Alerts

In the Care Identity Service application, an audit alert is raised on the system during the following workflows:

- Registering a user with an out of date identity document
- Directly assigning a user to a position

Reports on the audit alerts are in development which will then need to be reviewed by the organisations RA Manager to ensure that RA staff have valid reasons to raise the alert and the workflows are aligned to the local organisations processes.

RA audit policy

As part of the RA Manager responsibility of running RA Governance, RA Managers should develop the organisation's RA audit policy and conduct annual audits on NHS Smartcard usage.

RA Managers must implement a process to run the RA reports available in CIS on a regular basis. Further information on Reporting is in section 5.19 of the Registration Authorities Operational and Process Guidance

Supporting Document 1 - Equality Impact Assessment Tool

To be completed by the key document author and included as an appendix to key document when submitted to the appropriate committee for consideration and approval.

Please complete assessment form on next page;

NHS Worcestershire Acute Hospitals NHS Trust

Herefordshire & Worcestershire STP - Equality Impact Assessment (EIA) Form
Please read EIA guidelines when completing this form

Section 1 - Name of Organisation (please tick)

Herefordshire & Worcestershire STP		Herefordshire Council		Herefordshire CCG	
Worcestershire Acute Hospitals NHS Trust	x	Worcestershire County Council		Worcestershire CCGs	
Worcestershire Health and Care NHS Trust		Wye Valley NHS Trust		Other (please state)	

Name of Lead for Activity	**David Chamberlain**

Details of individuals completing this assessment	**Name**	**Job title**	**e-mail contact**
	David Chamberlain	**LKS Manager**	**David.chamberlain2@nhs.net**
	Debbie Drew	**Head of HR**	ddrew@nhs.net
Date assessment completed	**07/09/2021**		

Section 2

Activity being assessed (e.g. policy/procedure, document, service redesign, policy, strategy etc.)	**Title:** INTEGRATED IDENTITY MANAGEMENT (IIM) PROCESS POLICY			
What is the aim, purpose and/or intended outcomes of this Activity?	To review policy and procedure to ensure it follows NHS Digital guidelines			
Who will be affected by the development & implementation of this activity?	X x	Service User Patient Carers Visitors	x ❑ ❑ ❑	Staff Communities Other _____
Is this:	x Review of an existing activity			

	❑ New activity ❑ Planning to withdraw or reduce a service, activity or presence?
What information and evidence have you reviewed to help inform this assessment? (Please name sources, eg demographic information for patients / services / staff groups affected, complaints etc.	NHS Digital website for Registration Authority
Summary of engagement or consultation undertaken (e.g. who and how have you engaged with, or why do you believe this is not required)	Updated links that were failing
Summary of relevant findings	Policy is now current

Section 3

Please consider the potential impact of this activity (during development & implementation) on each of the equality groups outlined below. **Please tick one or more impact box below for each Equality Group and explain your rationale**. Please note it is possible for the potential impact to be both positive and negative within the same equality group and this should be recorded. Remember to consider the impact on e.g. staff, public, patients, carers etc. in these equality groups.

Equality Group	Potential positive impact	Potential neutral impact	Potential negative impact	Please explain your reasons for any potential positive, neutral or negative impact identified
Age		x		Policy relates to access to system via clinical role and is neutral to this impact
Disability		x		As above
Gender Reassignment		x		As above
Marriage & Civil Partnerships		x		As above
Pregnancy & Maternity		x		As above
Race including Traveling Communities		x		As above
Religion & Belief		x		As above
Sex		x		As above

Sexual Orientation		x		As above
Other Vulnerable and Disadvantaged Groups (e.g. carers; care leavers; homeless; Social/Economic deprivation, travelling communities etc.)		x		As above
Health Inequalities (any preventable, unfair & unjust differences in health status between groups, populations or individuals that arise from the unequal distribution of social, environmental & economic conditions within societies)		x		As above

Section 4

What actions will you take to mitigate any potential negative impacts?	**Risk identified**	**Actions required to reduce / eliminate negative impact**	**Who will lead on the action?**	**Timeframe**
	Policy outdated	*.Review Policy*	**RA Manager**	**2023**
How will you monitor these actions?	**RA Manager to put review date in calander**			
When will you review this EIA? (e.g in a service redesign, this EIA should be revisited regularly throughout the design & implementation)	**July 2023**			

Section 5 - Please read and agree to the following Equality Statement

1. Equality Statement

1.1. All public bodies have a statutory duty under the Equality Act 2010 to set out arrangements to assess and consult on how their policies and functions impact on

the 9 protected characteristics: Age; Disability; Gender Reassignment; Marriage & Civil Partnership; Pregnancy & Maternity; Race; Religion & Belief; Sex; Sexual Orientation

1.2. Our Organisations will challenge discrimination, promote equality, respect human rights, and aims to design and implement services, policies and measures that meet the diverse needs of our service, and population, ensuring that none are placed at a disadvantage over others.

1.3. All staff are expected to deliver services and provide services and care in a manner which respects the individuality of service users, patients, carer's etc, and as such treat them and members of the workforce respectfully, paying due regard to the 9 protected characteristics.

Signature of person completing EIA	David Chamberlain
Date signed	D. Cox
Comments:	
Signature of person the Leader Person for this activity	As above
Date signed	
Comments:	

NHS Worcestershire Acute Hospitals NHS Trust | NHS Herefordshire Clinical Commissioning Group | NHS Redditch and Bromsgrove Clinical Commissioning Group | NHS South Worcestershire Clinical Commissioning Group | NHS Wyre Forest Clinical Commissioning Group | NHS Wye Valley NHS Trust

NHS Worcestershire Health and Care NHS Trust | 2gether NHS Foundation Trust NHS | Taurus Healthcare | worcestershire county council | Herefordshire Council

Supporting Document 2 – Financial Impact Assessment

To be completed by the key document author and attached to key document when submitted to the appropriate committee for consideration and approval.

	Title of document:	Yes/No
1.	Does the implementation of this document require any additional Capital resources	No
2.	Does the implementation of this document require additional revenue	No
3.	Does the implementation of this document require additional manpower	No
4.	Does the implementation of this document release any manpower costs through a change in practice	No
5.	Are there additional staff training costs associated with implementing this document which cannot be delivered through current training programmes or allocated training times for staff	No
	Other comments:	

If the response to any of the above is yes, please complete a business case and which is signed by your Finance Manager and Directorate Manager for consideration by the Accountable Director before progressing to the relevant committee for approval