

**Northern, Eastern and Western Devon Clinical Commissioning Group
South Devon and Torbay Clinical Commissioning Group**

Stage 1 Rapid Equality Impact Assessment Form –see checklist

Please use the guidance provided and give particular consideration to the needs of people with protected characteristics age, disability, gender reassignment, marriage and civil partnership, pregnancy and maternity, sex, race, religion or belief and sexual orientation.

This Equality Impact Assessment is applicable to the populations of Northern, Eastern and Western Devon Clinical Commissioning Group and South Devon & Torbay Clinical Commissioning Group who work together to carry out their responsibilities for making local decisions about the funding of medicines and treatments in the NHS.

Title of work:

Commissioning policy: Olanzapine long-acting (depot) injection for schizophrenia

Who does the proposed piece of work affect?

Staff Patients Carers Public

1. What are the aims and objectives of the work being assessed?

To establish a commissioning position on olanzapine long-acting (depot) injection for the treatment of patients with schizophrenia who are non-adherent to anti-psychotic medication or for whom first generation antipsychotic depot injections are not clinically appropriate.

Clinicians with an interest in, and patients with schizophrenia should have clarity on how long-acting (depot) injections will be commissioned by the Clinical Commissioning Groups in Devon.

It is noted that the need for an additional depot treatment option is recognised particularly in the management of high risk patients.

		Yes	No
2.	Will the proposal have any impact on discrimination, equality of opportunity or relations between groups?		✓
3.	Is the proposal controversial in any way (including media, academic, voluntary or sector specific interest) about the proposed work?		✓
4.	Will there be a positive benefit to the users or workforce as a result of the proposed work?	✓	
5.	Will the users or workforce be disadvantaged as a result of the proposed work?		✓
6.	Is there doubt about answers to any of the above questions (e.g. there is not enough information to draw a conclusion)?		✓

If the answer to any of the above questions is yes (except for question 4) or you are unsure of your answers to any of the above you should complete a full impact assessment.

A Full Impact Assessment is required is not required

If a full impact assessment is not required briefly explain why and provide evidence for the decision.

This commissioning policy makes an additional treatment option available for patients with a particular condition.

Job Title: Clinical Effectiveness Governance Manager

Directorate: Clinical Effectiveness and Medicines Optimisation

Date of assessment: 12th November 2014

For your records, keep one copy of this rapid impact assessment form and send an electronic copy, with the Board paper for publishing.