

# **Equality Analysis**

Legislation requires that our policy documents consider the potential to affect groups differently and eliminate or minimise this where possible. This process helps to address inequalities by identifying steps that can be taken to ensure equal access, experience, and outcomes for all groups of people.

# **Step One – Policy Definition**

Function/policy name and number:	Minor Procedure Room Operational Policy			
tunction/nolicy/	This policy is intended to give a standard for all staff and visitors to follow in the way the Minor Procedure Rooms function operationally on a daily basis at Russell's Hall Hosptial.			
	Reviewed policy to replace older version (2019). Communication Trust wide via the Intranet			
Who will be affected/benefit from the policy?	All staff			
State type of document	Policy			
Is an EA required? NB: Most policies/functions will require an EA with few exceptions such as routine procedures-see guidance attached	Yes			
Accountable Director: (Job Title)	Chief Operating Officer			
Assessment Carried out by:	Team Leader			
Date Completed:	05/11/2024			

#### Step Two – Evidence & Engagement

What evidence have you identified and considered? This can include research (national, regional, local) surveys, reports, NICE guidelines, focus groups, pilot activity evaluations, clinical experts or working groups, information about Dudley's demographics, The Dudley Group equality and diversity reports, Joint Strategic Needs Assessment (JSNA) or other equality analyses, Workforce Race and Disability Equality data, anecdotal evidence.

Research/Publications	Working Groups	Clinical Experts					
STANDARD INFECTION CONTROL PRECAUTIONS: HAND HYGIENE AND PERSONAL PROTECTIVE EQUIPMENT POLICY- The Dudley Group NHS Foundation Trust 2022 Infection Control Training		The HUB 2024					
Safe management of care equipment Guidance Infection prevention and control: resource for adult social care (updated 1 March 2024) <u>Infection prevention and</u> control: resource for adult social care - <u>GOV.UK</u>		Government Guidance 2024					
NICE guideline [NG125] Published: 11 April 2019 Last updated: 19 August 2020 <u>Surgical site infections: prevention</u> and treatment		NICE 2020					
The Association for Perioperative Practice Infection control AfPP - Infection Control - V2.indd		AfPP 2024					
Engagement, Involvement and Consultation: If relevant, please state what engagement activity has been undertaken and the date and with which protected groups:							

Engagement Activity	Protected	Date
	Characteristic/	
	Group/ Community	

Discussion/ risk assessment with Infection Control, Review of Datix regarding incidents involving wheelchair users in MPR, Moving and Handling assessment		(Previous to writing the 2019 version of the policy)					
For each engagement activity, please state the key feedback you have received and then use this in step 3. List a summary of the Feedback in the 'list of feedback received' column, then add your mitigation and then your action to address.							

#### Summary of the feedback:

Decision to exclude wheelchair users in MPR pertains to the safety concerns with the limited space to manoeuvre the wheelchair in both ward areas and theatre. There is limited floor space within the ward and theatre in the Minor Procedure Rooms. The ward has 4 patient recliners and curtained off areas that are not large enough to accommodate a hoist. In 2024 there was an incident datixed due to a patient injuring themself on their own wheelchair whilst changing in the ward due largely to lack of physical space to negotiate transferring from the wheelchair to the standing and back again.

Space limitations and infection control specifications prohibit the use of wheelchairs and hoists in theatre.

One must also take in account observation of the sterile field of the operating trolley and scrubbed operating staff, whilst manoeuvring around fixed furniture as well as required medical equipment and devices.

The above publications do not specifically state guidance on patient's personal wheelchairs in theatre. However, the use of theatre shoes and shoe covers is mentioned as well as the practice of cleaning medical equipment before and after use in theatre. Therefore, one can infer that any wheels can pose the same infection risk as shoes worn outside clinical 'clean' areas and can transfer from 'dirty' clinical areas into patients' vehicles and homes. Wheelchair wheels pose the same risk as medical equipment wheels that must be cleaned before and after use in a theatre setting.

## Step Three – Assessment of Impact

	Negative Impact HIGH MEDIUM LOW DR Negative (not both)	Neutral Impact (Tick)	<ul> <li>List concerns raised for possible negative impact OR</li> <li>List beneficial impact</li> <li>(utilise information gathered during assessment)</li> </ul>	Mitigation List actions to redress concerns raised if a negative impact has been identified in previous column	Lead [title]	Timescale	How are actions going to be monitored/reviewed/ reported? (incl. after implementation			
1) Age Describe age related impact and evidence. This can include safeguarding, consent, and welfare issues:										
		X								
2) Disabil	lity									
	cribe disability r e impairments:		ct and evidence. This can include attitudi	nal, physical, communication and socia	barriers as	well as mental	health/ learning disabilities,			
	Low		Patients must be able to transfer from wheelchair to operating trolley as there is no hoist available in MPR due to size of equipment, space within the minor procedure room to safely use the equipment and follow infection control guidelines while maintaining the sterile field.	Patients that cannot self- transfer are listed on operating lists in departments where suitable transfer equipment can be utilised.		As and when required	Feedback between theatre staff and doctors referring for procedures.			
3) Gender re-assignment Describe any impact and evidence on transgender people. This can include issues such as privacy of data and harassment:										
		X								
4) Marriage and civil partnership Describe any impact and evidence in relation to marriage and civil partnership. This can include working arrangements, part-time working, and caring responsibilities:										
		X								

5) Pregnancy & Maternity										
Describe any impact and evidence on pregnancy and maternity. This can include working arrangements, part-time working, and caring responsibilities:										
		Х								
6) Race										
	e race related	mpact and e	evidenc	ce. This can includ	de information or	n different ethnic arou	ips. Roma gypsies.	Irish travellers	s. nationali	ies, cultures, and language
barriers:							1-, ,		,	,
		X								
/	n or Belief									
Describe	e any religion,		beliet i	mpact and eviden	ice. This can incl	ude dietary needs, co	onsent, and end of	life issues:		
		Х								
8) Sex Describe	e any impact a	nd evidence	on me	en and women. Th	nis could include	access to services a	nd employment:			
		X								
9) Sexual	Orientation	1								
Describe	Describe any impact and evidence on heterosexual people as well as lesbian, gay and bisexual people. This could include access to services and employment, attitudinal and social barriers:									es and employment, attitudinal
		Х								
10)Other marginalised groups e.g., Homeless people Describe any impact and evidence on groups experiencing disadvantage and barriers to access and outcomes. This can include lower socio-economic status, resident status (migrants, asylum seekers), homeless, looked after children, single parent households, victims of domestic abuse, victims of drugs / alcohol abuse: (This list is not exhaustive)										
		Х								
11)Privacy, dignity, respect, fairness etc.										
		X								

### **EQUALITY ANALYSIS - GUIDANCE NOTES**

Equality Analysis is a tool for ensuring that issues for equality, diversity and inclusion are considered when drawing up or revising policies or proposals which affect the delivery of services and the employment practice of the Trust.

#### Why do carry out Equality Analysis?

We are required to carry out equality impact assessments because:

- □ There is a legal requirement to do so in relation to the protected characteristics
- □ They are helpful in identifying gaps and make improvements to services
- □ They help avoid continuing or adopting harmful policies or procedures
- □ They help you to make better decisions
- They will help you to identify how you can make your services more accessible and appropriate
- □ They enable the Trust to become a better employer

#### Equality Impact Assessments help us to:

- Determine how Trust policies and practice, or new proposals, will impact or affect different communities groups, especially those groups or communities who experience inequality, discrimination, social exclusion, or disadvantage.
- Measure whether policies or proposals will have a negative, neutral, or positive effect on different communities.
- Make decisions about current and future services and practice in fuller knowledge and understanding of the possible outcomes for different communities or customer groups.

#### What do we need to assess?

Trust polices are subject to a 3-year review. Alongside the reviews new polices will emerge. Most policies, strategies, and business plan will need an EA.

However, EAs are not required in relation changes in routine procedures, administrative processes or initiative that will not have a material impact on staff, patients, carers, and the wider community. Examples include things such as checking the temperature of fridges, highly technical clinical procedures, office moves etc.

#### DGFT Process for EIAs

The revised EIA process is a single stage process carried out in three steps

#### Step One: Policy Definition

This involves a description of the policy details. This also decides whether the policy under consideration needs an assessment

#### Step Two: Evidence and Engagement

EAs should be underpinned by sound data and information. This should be sought from a variety of sources including information on Trust record systems, consultation and engagement activities, demographic information sources etc.

#### Step Three: Assessment of Impact

This is the main and the most important part of the EIA.

To help you to determine the impact of the policy think about how it relates to the Public Sector Equality Duty, the key questions as listed below and prompts for each protected characteristic.

-Eliminate unlawful discrimination, victimisation, and harassment -Advancing equality of opportunity -Fostering good community relations

#### **KEY QUESTIONS**

- What information /data or experience can you draw on to indicate either positive or negative impact on different groups of people in relation to implementing this function policy
- □ Are people with protected characteristics likely to be affected differently even though the policy is the same for everyone?
- Could there be issues around access, differences in how a service or policy is experienced and produces outcomes that vary across different groups
- □ Does the policy relate to the Trust's equality objectives?

NB It is important that, where adverse impact is known or is likely, mitigation measures must be identified and acted upon to reduce or minimise the impact.

#### **Step Four: Assurance**

This section enables the EA to be signed off