

Equality & Health Impact Assessment for Medical Gases Policy

Please read the Guidance Notes in Appendix 1, 2 & 3 (located at the back) prior to commencing the EHAI for help and support in completing this document.

Please note:

- The completed Equality & Health Impact Assessment (EHIA) must be
- Included as an appendix with the cover report when the strategy, policy, plan, procedure and/or service change is submitted for approval
- Published on the UHB intranet and internet pages as part of the consultation (if applicable) and once agreed.
- Formal consultation must be undertaken, as required (submit to equality team)
- Appendices 1-3 must be deleted prior to submission for approval
- We have put helpful hints in, to support you in completion of the Document. Please delete them before submission.
- Useful links have been added to relevant sections for quick reference and support.

Please answer all questions: -

1.	For service change, provide the title of the Project Outline Document or Business Case and Reference Number	Medical Gases Policy CAVUHB
2.	Name of Clinical Board / Corporate Directorate and title of lead member of staff, including contact details	Clinical Diagnostics & Therapeutics Gemma Taylor Nurse Advisor for Medicines Management Pharmacy Gemma.Taylor4@wales.nhs.uk
3.	Objectives of policy	To ensure that clinical staff are appropriately trained in the use of medical gases and equipment. To ensure that portering staff are appropriately trained in storing and transporting medical gases across the UHB. To ensure that service users are treated appropriately and safely when prescribed medical gases.
4.	Evidence and background information considered. For example • population data • staff and service user's data, as applicable • needs assessment • engagement and involvement findings • research • good practice guidelines • participant knowledge • list of stakeholders and how stakeholders have engaged in the development stages • comments from those involved in the design and development stages	This policy will impact all clinical staff that handle and administer medical gases as well as the services users receiving treatment. Following a Welsh Health Circular dated 2024, all UHB's were required to produce a policy for medical gases focusing on safe management, sustainable procurement, and decarbonisation, particularly reducing nitrous oxide use. The WHC stipulated that all staff must receive appropriate level of training for their role. Other stakeholders have been involved; BOC, and Aneurin Bevan Health Board have provided training packages for CAVUHB to use.
5.	Who will be affected by the policy	All clinical staff that handle and administer medical gases across the UHB Non clinical staff that transport medical gases

6. EQIA / How will the strategy, policy, plan, procedure and/or service impact on people?

Questions in this section relate to the impact on people based on their 'protected characteristics'. Specific alignment with the 7 goals of the Well-being of Future Generations (Wales) Act 2015 is included against the relevant sections.

How will the strategy, policy, plan, procedure and/or service impact on? -	Potential positive and/or negative impacts	Recommendations for improvement/ mitigation	Action taken by Clinical Board / Corporate Directorate. Refer to where the mitigation is included in the document, as appropriate
6.1 Age •	This policy will have a positive impact on patients of all ages as all clinical staff across all Clinical Boards and Directorates that administer medical gases will have a specific level of training. The potential negative impact to the UHB could be the cost required to ensure that they have Designated Nursing Officers trained by an external company as per the HTM requirement. The policy will be held on SharePoint, and the training will be held on ESR – all staff will have access, and the training is not age related.	Whilst a cost is required, this will improve the standards of CAVUHB compliance with the HTM. The benefit outweighs the cost.	Each Clinical Board will cover the finances for the training requirement

How will the strategy, policy, plan, procedure and/or service impact on? -	Potential positive and/or negative impacts	Recommendations for improvement/ mitigation	Action taken by Clinical Board / Corporate Directorate. Refer to where the mitigation is included in the document, as appropriate
6.2 Persons with a disability as defined in the Equality Act 2010	The training can be accessed at the individual's own pace for learning as it is online. The platform used is ESR and staff are already familiar with this.	Should there be a requirement for face-to-face support, this can be developed	
6.3 People of different genders:	The policy and the training requirement will not impact on gender	NA	NA
6.4 People who are married or who have a civil partner.	No impact	NA	NA
6.5 Women who are expecting a baby, who are on a break from work after having a baby, or who are breastfeeding.	No impact – training can be commenced when they return from maternity leave	NA	NA
6.6 People of a different race, nationality, colour, culture or ethnic origin including non-English speakers, gypsies/travellers, migrant workers	Training on ESR will be in the form of English and should not negatively impact staff undertaking this training	NA	NA
6.7 People with a religion or belief or with no religion or belief.	No Impact	NA	NA

How will the strategy, policy, plan, procedure and/or service impact on? -	Potential positive and/or negative impacts	Recommendations for improvement/ mitigation	Action taken by Clinical Board / Corporate Directorate. Refer to where the mitigation is included in the document, as appropriate
6.8 People who are attracted to other people of:	No impact	NA	NA
6.9 People who communicate using the Welsh language in terms of correspondence, information leaflets, or service plans and design	This is an English package and will not be in the form of Welsh at present	As the training belongs to another Welsh Health Board, they may create this is the medium of Welsh, however BOC will remain in English for the wider UK population	NA
6.10 People according to their income related group:	No impact	NA	NA
6.11 People according to where they live:	No impact	NA	NA
6.12 Consider any other groups and risk factors relevant to this strategy, policy, plan, procedure and/or service	No impact	NA	NA

HIA / How will the strategy, policy, plan, procedure and/or service impact on the health and well-being of our population and help address inequalities in health?

Questions in this section relate to the impact on the overall health of individual people and on the impact on our population. Specific alignment with the 7 goals of the Well-being of Future Generations (Wales) Act 2015 is included against the relevant sections.

How will the strategy, policy, plan, procedure and/or service impact on? -	Potential positive and/or negative impacts and any groups affected	Recommendations for improvement/ mitigation	Action taken by Clinical Board / Corporate Directorate Refer to where the mitigation is included in the document, as appropriate
7.1 People being able to access the service offered:	As an ESR module, staff that would be undertaking this training will already have an online account and should they require the use of a computer this can be done whilst on site	NA	NA
7.2 People being able to improve /maintain healthy lifestyles:	No impact	NA	
7.3 People in terms of their income and employment status:	No impact		
7.4 People in terms of their use of the physical environment:	By having a robust policy and guide in place, this enables staff to safely use the equipment and improve their overall knowledge of medical gases and their potential risks if handled or stored incorrectly	NA	NA

How will the strategy, policy, plan, procedure and/or service impact on? -	Potential positive and/or negative impacts and any groups affected	Recommendations for improvement/ mitigation	Action taken by Clinical Board / Corporate Directorate Refer to where the mitigation is included in the document, as appropriate
7.5 People in terms of social and community influences on their health:	No impact	NA	NA
7.6 People in terms of macro-economic, environmental and sustainability factors:	Improving the use of medical gases with an awareness of environmental impact. Aligns to the WHC request to be compliant with HTM 02-01	NA	NA

Please answer question 8.1 following the completion of the EHIA and complete the action plan

8.1 Please summaries the potential positive and/or negative impacts of the strategy, policy, plan, or service	The implementation of this policy and the training requirements will positively impact the staff handling and administering medical gases as well as improving the standards of care provided to patients and service users. It will improve CAVUHB standards and align with sustainability requirements.
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Action Plan for Mitigation / Improvement and Implementation

	Action	Lead	Timescale	Action taken by Clinical Board / Corporate Directorate
8.2 What are the key actions identified as a result of completing the EHIA?	A medical gases policy within CAVUHB must be embedded into practice. Training and assessment of all appropriate staff to be carried out. Designated Nursing Officers for the UHB are required. Monitor and action on errors.	Gemma Taylor & MGSG members	12 months	
8.3 Is a more comprehensive Equalities Impact Assessment or Health Impact Assessment required?	No			
8.4 What are the next steps?	Following consultation, the policy will need to be approved by the members of Nursing and Midwifery Board, Health and Safety, MIGG The policy will be published and regularly monitored and reviewed.			

