Form 1: Preparation

Part A must be completed at the beginning of a Policy/function/strategy development or review, and for every such occurrence. (Refer to the Step-by-Step Guide for additional information).

Step	tep 1 – Preparation						
1.	Title of Policy - what are you equality impact assessing?	Laboratory Medicine Quality Policy					
2.	Policy Aims and Brief Description - what are its aims? Give a brief description of the Policy (The What, Why and How?)	A Quality Policy is a mandatory requirement of the quality management system required by the various accrediting bodies and regulatory agencies that accredit, certify or license the activities of the Directorate of Laboratory Medicine. The policy states the Directorate's commitment to providing a quality service which meets the needs and requirements of users and complies with the standards of regulatory and accrediting/licensing bodies.					
3.	Who Owns/Defines the Policy? - who is responsible for the Policy/work?	Dr Ian McDowell Clinical Director, Laboratory Medicine					
4.	Who is Involved in undertaking this EqIA? - who are the key contributors to the EqIA and what are their roles in the process?	Laboratory Medicine Directorate Quality Manager & the Directorate Quality & Safety Group: Michael Creasy Ann Hurley Alison Borwick Gaynor Chase Ann Grant Lisa Griffiths Rob Haddon Barbara Jenkins Sally Jones Sarah Phillips					

Step 1	l – Preparation	
5.	Other Policies - Describe where this Policy/work fits in a wider context. Is it related to any other policies/activities that could be included in this EqIA?	The policy underpins the quality management system of the Directorate. It states the commitment to meeting the needs and requirements of users, maintaining accreditation and licensing and a programme of continuous improvement. All operational procedures flow from this policy.
6.	Stakeholders - Who is involved with or affected by this Policy?	All staff who work in Laboratory Medicine, including managers, medical staff, healthcare scientists, technical support staff, phlebotomists, mortuary technicians, IT and clerical staff. All users of the laboratory, transfusion, stem cell transplant, phlebotomy and mortuary services. User surveys are regularly undertaken.
7.	What factors may contribute to the outcomes of the Policy? What factors may detract from the outcomes? These could be internal or external factors.	Maintenance of the quality management system, including observing professional standards, regulatory requirements and codes of practice following standard operating procedures maintaining training and competence reporting, investigating, correcting and learning from all untoward events committing to a culture of continuing quality improvement Assessing user needs and satisfaction Detractors: pressures from increasing workload or decreased workforce to concentrate resources on routine operational matters to the detriment of quality and safety.

Form 2: Evidence Gathering

Equality	Evidence Gathered Does the evidence apply to the following with regard										
Strand		Policy/work? Tick as appropriate.						ite.			
Race	An internet search performed on 22 nd May 2012 did not reveal any evidence or issues relating to this equality strand	ш	1		٧	Pron	1		1	Ta tr	
Disability	An internet search performed on 22 nd May 2012 did not reveal any evidence or issues relating to this equality strand	liminati	1	Prom	1	Promoting G	1	Encouraging	1	Take account o treating some	V
Gender	An internet search performed on 22 nd May 2012 did not reveal any evidence or issues relating to this equality strand	ng Discr H	1	Promoting E	1	Good Rel	1		1	unt of d	
Sexual Orientation	An internet search performed on 22 nd May 2012 did not reveal any evidence or issues relating to this equality strand	Eliminating Discrimination and Harassment	1	Equality of	٧	Relations a	1	participation in	1	Take account of difference even treating some individuals more	
Age	An internet search performed on 22 nd May 2012 did not reveal any evidence or issues relating to this equality strand		1	of Opportunity	٧	and Positive Attitudes	1		1	even more	
Religion or Belief	An internet search performed on 22 nd May 2012 did not reveal any evidence or issues relating to this equality strand	Eliminating	٧	tunity	٧	tive Atti	1	Public Life	٧	if it involves favourably*	
Welsh Language	An internet search performed on 22 nd May 2012 did not reveal any evidence or issues relating to this equality strand	Θι	1		1	tudes	1		1	y*	
People have a human right to: life; not to be tortured or treated in a degrading way; to be free from slavery or forced labour; to liberty; to a fair trial; not to be punished without legal authority; to respect for private and family life, home and correspondence; to freedom of thought, conscience and religion; to freedom of expression and of assembly; to marry and found a family and to not be discriminated against in relation to any of the rights contained in the European Convention.											
Human Rights	Human This policy aims to adhere to the articles within the human rights act with a particular focus on right to life, not to be										

• This column relates only to Disability due to the specific requirement in the Equality Act 2010 to treat disabled people more favourably to achieve equal outcomes. This is not applicable to the other equality strands.

Form 3: Assessment of Relevance and Priority

Equality Strand	Evidence: Existing evidence to suggest some groups affected. Gathered from Step 2. (See Scoring Chart A)	Potential Impact: Nature, profile, scale, cost, numbers affected, significance. Insert one overall score (See Scoring Chart B)	Decision: Multiply 'evidence' score by 'potential impact' score. (See Scoring Chart C)
Race	1	0	0 No impact
Disability	1	0	0 No impact
Gender	1	0	0 No impact
Sexual Orientation	1	0	0 No impact
Age	1	0	0 No impact
Religion or Belief	1	0	0 No impact
Welsh Language	1	0	0 No impact
Human Rights	1	0	0 No impact

Scoring Chart A: Evidence Available

3	Existing data/research
2	Anecdotal/awareness data only
1	No evidence or suggestion

Scoring Chart B: Potential Impact

-3	High negative
-2	Medium negative
-1	Low negative
0	No impact
+1	Low positive
+2	Medium positive
+3	High positive

Scoring Chart C: Impact Decision

-6 to -9	High Impact (H)
-3 to -5	Medium Impact (M)
-1 to -2	Low Impact (L)
0	No Impact (N)
1 to 9	Positive Impact (P)

FORM 4: (Part A) Outcome Report

Policy Title:	Laboratory Medicine Quality Policy
Organisation:	Cardiff and Vale UHB
Name:	Dr Michael Creasy
Title:	Directorate Quality Manager
Department:	Directorate of Laboratory Medicine
Summary of	The assessment found that there was no impact on the
Assessment:	equality groups stated. If, and where appropriate, we will make
	plans for the necessary actions required to minimise any
	stated impact to ensure that we meet our responsibilities
	under the equalities legislation and the Human Rights Act.
Decision to Proceed	Yes /No
Decision to Proceed to Part B Equality Impact Assessment:	¥es/No Please record reason(s) for decision
to Part B Equality	1 00/110
to Part B Equality	Please record reason(s) for decision
to Part B Equality	Please record reason(s) for decision The Policy commits the organisation to ascertaining the needs
to Part B Equality	Please record reason(s) for decision The Policy commits the organisation to ascertaining the needs and requirements of all users and to improve services to
to Part B Equality	Please record reason(s) for decision The Policy commits the organisation to ascertaining the needs and requirements of all users and to improve services to ensure that those needs are met. It commits to meeting the
to Part B Equality	Please record reason(s) for decision The Policy commits the organisation to ascertaining the needs and requirements of all users and to improve services to ensure that those needs are met. It commits to meeting the requirements of all appropriate standards, regulations and
to Part B Equality	Please record reason(s) for decision The Policy commits the organisation to ascertaining the needs and requirements of all users and to improve services to ensure that those needs are met. It commits to meeting the requirements of all appropriate standards, regulations and codes of practice. It aspires to be a quality service and to
to Part B Equality	Please record reason(s) for decision The Policy commits the organisation to ascertaining the needs and requirements of all users and to improve services to ensure that those needs are met. It commits to meeting the requirements of all appropriate standards, regulations and codes of practice. It aspires to be a quality service and to demonstrate that quality by being accredited, certified or

Action Plan

You are advised to use the template below to detail any actions that are planned following the completion of Part A or Part B of the EqIA Toolkit. You should include any remedial changes that have been made to reduce or eliminate the effects of potential or actual adverse impact, as well as any arrangements to collect data or undertake further research.

	Action(s) proposed or taken	Reasons for action(s)	Who will benefit?	Who is responsible for this action(s)?	Timescale
What changes have been made as a result of the EqIA?	None	N/A	N/A	N/A	N/A
2. Where a Policy may have differential impact on certain groups, state what arrangements are in place or are proposed to mitigate these impacts?	N/A	N/A	N/A	N/A	N/A

3.	For when a policy may have adverse impact on certain groups, but there is good reason not to mitigate.	N/A	N/A	N/A	N/A	N/A
4.	Describe any mitigating actions taken?	None	N/A	N/A	N/A	N/A
5.	Provide details of	Copies would be	The UHB want to	Primary benefit	Appropriate	Already
	any actions planned or taken	provided in	be explicit about	will be to staff	Managers or staff	completed within
	to promote equality.	alternative	its commitment to	which will have a		the document
		formats, including	the equality	positive impact on		There is no
		Welsh language,	agenda/legislation.	their families		timescale as this
		if required		and/or patients as		will be responsive
			This would be to	applicable.		to individual need.
			ensure that all	Any individual		
			policies are	making the		
			accessible to all	request as well as		
				the organisations		
				reputation.		

Date:	24/05/2012			
Monitoring Arrangements:	All specimens arriving in the laboratories compliance before processing.	are checked for		
	The Directorate of Laboratory Medicine carries out periodic audits of the quality of information on request forms, to comply with the standards for laboratory accreditation, which is externally assessed every 2 years.			
D : D :	User surveys are regularly undertaken.			
Review Date:	25/05/2013			
Signature of all Parties:		Michael Creasy		
rarties.		Ann Hurley		
		Alison Borwick		
		Gaynor Chase		
		Ann Grant		
		Lisa Griffiths		
		Rob Haddon		
		Barbara Jenkins		
		Sally Jones		
		Sarah Phillips		