

**Equality & Health Impact Assessment for
Parenteral Nutrition Procedures for Adult Patients**

1.	For service change, provide the title of the Project Outline Document or Business Case and Reference Number	Parenteral Nutrition Procedures for Adult Patients
2.	Name of Clinical Board / Corporate Directorate and title of lead member of staff, including contact details	Clinical Diagnostics and Therapeutic
3.	Objectives of strategy/ policy/ plan/ procedure/ service	To standardise the procedure of the administration of Parenteral Nutrition and ongoing care of a peripheral and central venous catheter in patients requiring Parenteral Nutrition. To ensure adherence to the national Aseptic Non-Touch Technique.
4.	Evidence and background information considered. For example <ul style="list-style-type: none"> • population data • staff and service users data, as applicable • needs assessment • engagement and involvement findings • research • good practice guidelines 	The following background information was considered: <ul style="list-style-type: none"> • research • good practice guidelines • feedback from patients Implementation of this Procedure will involve the following stakeholders: Nutrition Team Health & Safety Department All staff who administer Parenteral Nutrition

	<ul style="list-style-type: none"> • participant knowledge • list of stakeholders and how stakeholders have engaged in the development stages • comments from those involved in the designing and development stages <p>Population pyramids are available from Public Health Wales Observatory¹ and the UHB's 'Shaping Our Future Wellbeing' Strategy provides an overview of health need².</p>	<p>Patients receiving Parenteral Nutrition</p>
<p>5.</p>	<p>Who will be affected by the strategy/ policy/ plan/ procedure/ service</p>	<p>This procedure applies to all staff who are deemed competent in the care and management of an adult patient receiving Parenteral Nutrition.</p>

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

Questions in this section relate to the impact on people on the basis of 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. Make reference to where the mitigation is included in the document, as appropriate
6.1 Age For most purposes, the main categories are: <ul style="list-style-type: none"> • under 18; • between 18 and 65; and • over 65 	This procedure only applies to adult patients. For paediatric patients, staff should refer to the separate Paediatric procedure directed at under 16's.		
6.2 Persons with a disability as defined in the Equality Act 2010 Those with physical impairments, learning disability, sensory loss or impairment, mental health conditions, long-term medical conditions such as diabetes	The procedure does not discriminate against staff, patients or carers with a disability. There would an impact if a patient was using British Sign Language as their first language. The interpretation service can be accessed as required to assist.		

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<p>6.3 People of different genders: Consider men, women, people undergoing gender reassignment</p> <p>NB Gender-reassignment is anyone who proposes to, starts, is going through or who has completed a process to change his or her gender with or without going through any medical procedures. Sometimes referred to as Trans or Transgender</p>	<p>There appears to be no impact on staff regarding gender. Staff can access 'It's just good care – a guide for health staff caring for people who are trans'.</p>		
<p>6.4 People who are married or who have a civil partner.</p>	<p>There appears to be no impact.</p>		
<p>6.5 Women who are expecting a baby, who are</p>	<p>There appears to be no</p>	<p>N/A</p>	<p>N/A</p>

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on a break from work after having a baby, or who are breastfeeding. They are protected for 26 weeks after having a baby whether or not they are on maternity leave.	impact. However, the Nutrition Team would review the patient during this time, to ensure their nutritional requirements are met.		
6.6 People of a different race, nationality, colour, culture or ethnic origin including non-English speakers, gypsies/travellers, migrant workers	There appears to be no impact regarding race, nationality, colour, culture or ethnic origin.	Whilst there doesn't appear to be any impact, if a member of staff was known to have difficulties with the written word, good management would dictate that alternative arrangements be made, such as individual meetings. Members of the public would be supported by staff or family members as appropriate Interpretation service can	

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		be accessed to assist.	
<p>6.7 People with a religion or belief or with no religion or belief. The term 'religion' includes a religious or philosophical belief</p>	There appears to be no impact. However, some patients may refuse artificial nutrition on religious grounds.	Staff are able to raise any issues with their line manager/Human Resources. Patients refusing can be discussed with the Parenteral Nutrition Team.	
<p>6.8 People who are attracted to other people of:</p> <ul style="list-style-type: none"> • the opposite sex (heterosexual); • the same sex (lesbian or gay); • both sexes (bisexual) 	There appears to be no impact.		
<p>6.9 People who communicate using the Welsh language in terms of correspondence, information leaflets, or</p>	The procedure document is no available in Welsh.	If a Welsh language version is required, staff/patients can access interpretation services.	

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service plans and design Well-being Goal – A Wales of vibrant culture and thriving Welsh language			
6.10 People according to their income related group: Consider people on low income, economically inactive, unemployed/workless, people who are unable to work due to ill-health	There appears to be no impact.		
6.11 People according to where they live: Consider people living in areas known to exhibit poor economic and/or health indicators, people unable to access services and facilities	There appears to be no impact.		

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6.12 Consider any other groups and risk factors relevant to this strategy, policy, plan, procedure and/or service	Egg allergy – administration of lipid should be avoided unless under strict observation. Vegetarian/vegan patients with certain requirements may refuse, as the lipid may contain eggs.	Lipid free products may be used.	

6. 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 particular groups affected	Recommendations for improvement/ mitigation	Action taken by Clinical Board / Corporate Directorate Make reference to where the mitigation is included in the document, as appropriate
7.1 People being able to access the service offered:	There appears to be no impact.		

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<p>Consider access for those living in areas of deprivation and/or those experiencing health inequalities</p> <p>Well-being Goal - A more equal Wales</p>			
<p>7.2 People being able to improve /maintain healthy lifestyles:</p> <p>Consider the impact on healthy lifestyles, including healthy eating, being active, no smoking /smoking cessation, reducing the harm caused by alcohol and /or non-prescribed drugs plus access to services that support disease prevention (eg immunisation and vaccination, falls prevention). Also consider impact on access to supportive services</p>	<p>Positive impact as patients will receive nutrition and hydration via a dedicated central/peripheral catheter which will optimise clinical outcomes.</p>		

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including smoking cessation services, weight management services etc Well-being Goal – A healthier Wales			
7.3 People in terms of their income and employment status: Consider the impact on the availability and accessibility of work, paid/ unpaid employment, wage levels, job security, working conditions Well-being Goal – A prosperous Wales	There appears to be no impact.		
7.4 People in terms of their use of the physical environment: Consider the impact on the	There appears to be no impact.		

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<p>availability and accessibility of transport, healthy food, leisure activities, green spaces; of the design of the built environment on the physical and mental health of patients, staff and visitors; on air quality, exposure to pollutants; safety of neighbourhoods, exposure to crime; road safety and preventing injuries/accidents; quality and safety of play areas and open spaces</p> <p>Well-being Goal – A resilient Wales</p>			
<p>7.5 People in terms of social and community influences on their health: Consider the impact on family organisation and roles; social support and social networks; neighbourliness</p>	<p>There appears to be no impact.</p>		

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<p>and sense of belonging; social isolation; peer pressure; community identity; cultural and spiritual ethos</p> <p>Well-being Goal – A Wales of cohesive communities</p>			
<p>7.6 People in terms of macro-economic, environmental and sustainability factors: Consider the impact of government policies; gross domestic product; economic development; biological diversity; climate</p> <p>Well-being Goal – A globally responsible Wales</p>	<p>There appears to be no impact.</p>		

<p>8.1 Please summarise the potential positive and/or negative impacts of the strategy, policy, plan or service</p>	<p>Overall, there appears to be very limited impact on the protected characteristics and health inequalities as a result of this procedure.</p>
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Action Plan for Mitigation / Improvement and Implementation

	Action	Lead	Timescale	Action taken by Clinical Board / Corporate Directorate
<p>8.2 What are the key actions identified as a result of completing the EHIA?</p>	<p>Overall, there appears to be very limited impact on the protected characteristics and health inequalities as a result of this procedure.</p>			

	Action	Lead	Timescale	Action taken by Clinical Board / Corporate Directorate
<p>8.3 Is a more comprehensive Equalities Impact Assessment or Health Impact Assessment required?</p> <p>This means thinking about relevance and proportionality to the Equality Act and asking: is the impact significant enough that a more formal and full consultation is required?</p>	<p>As there has been no impact identified, it is unnecessary to undertake a more detailed assessment.</p>			

	Action	Lead	Timescale	Action taken by Clinical Board / Corporate Directorate
<p>8.4 What are the next steps?</p> <p>Some suggestions:-</p> <ul style="list-style-type: none"> • Decide whether the strategy, policy, plan, procedure and/or service proposal: <ul style="list-style-type: none"> ○ continues unchanged as there are no significant negative impacts ○ adjusts to account for the negative impacts ○ continues despite potential for adverse impact or missed opportunities to advance equality (set out the justifications for doing so) ○ stops. • Have your strategy, policy, plan, procedure and/or service proposal approved • Publish your report of this impact assessment • Monitor and review 	<p>The EQHIA will be reviewed in 3 years.</p>			

