

Decontamination of Reusable Medical Device Policy Equality Impact Assessment

Section A: Assessment

Decontamination of Reusable Medical Devices Policy

Deputy Director of Therapies and Health Science

Date: 9th December, 2015.

1. The Policy

Is this a new or existing policy?

Existing

What is the purpose of the policy?

To ensure the safe and effective decontamination of all reusable medical devices deployed by the UHB to care for its patients and service users.

How do the aims of the policy fit in with corporate priorities?

The aim of the Decontamination of Reusable Medical Devices Policy and associated Procedure is to ensure that Cardiff and Vale UHB provides the most effective decontamination processes to support the delivery of high quality patient care and deliver the best possible health and financial outcomes. The Decontamination of Reusable Medical Devices Policy sets minimum standards which are applicable across all sectors of the UHB's healthcare services and includes reusable Medical Devices which are deployed by partner organisations and contractors to care for UHB patients and service users. It supports the ethos of delivering outcomes that matter to peoples and it also embeds a strong alignment to the UHB's commitment to principles of prudent healthcare by reducing wastage, variation and avoidable harm.

2. Data Collection

Decontamination is a system level requirement for the safe and effective provision of healthcare no matter what the healthcare setting. The standards established in the policy mirror national best practice guidance and are equally applicable to all patient groups including those patients, carers or service users with a protected characteristic. It is believed that the impact of the implementation of these standards will be overwhelmingly positive. It improves standards and overall quality of service provision for all patients, carers and services users and will not be discriminatory in anyway.

3. Impact

Do you think that the policy impacts on people because of their age?

No impact

Do you think that the policy impacts on people because of their caring responsibilities?

Yes positively as it establishes the requirement to effectively decontaminate all reusable medical devices irrespective of their use in primary, community, secondary and tertiary settings. It also establishes this requirement for collaborative services delivered by multi-sector organisations.

Do you think that the policy impacts on people because of their disability?

Yes positively as it establishes the requirement to effectively decontaminate all reusable medical devices irrespective of their use in primary, community, secondary and tertiary settings. It also establishes this requirement for collaborative services delivered by multi-sector organisations.

Do you think that the policy impacts on people because of Gender reassignment?

No impact

Do you think that the policy impacts on people because of their being married or in a civil partnership?

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No impact

Do you think that the policy impacts on people because of their being pregnant or just having had a baby?

No impact

Do you think that the policy impacts on people because of their race?

No impact

Do you think that the policy impacts on people because of their religion, belief or non-belief?

No impact

Do you think that the policy impacts on men and woman in different ways?

No

Do you think that the policy impacts on people because of their sexual orientation?

No

Do you think that the policy impacts on people because of their Welsh language?

No

4. Summary.

It is believed that the impact of this policy will be overwhelmingly positive for all patients, carers or service users who access services which deploy reusable medical devices to care for people or to keep people well.

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The revised policy is more inclusive of all care setting and sectors and establishes common standards of care which are seamless for patients across every care pathway where reusable medical devices are used.

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**Cardiff and Vale University Health Board
Action Plan**

Section B: Action

5. Please complete your action plan below. Issues you are likely to need to address include

- What **consultation** needs to take place with equality groups (bearing in mind any relevant consultation already done and any planned corporate consultation activities?)
- What **monitoring/evaluation** will be required to further assess the impact of any changes on equality target groups?

Equalities Impact Assessment Implementation Mitigation/Action Plan

None identified.

Issue to be addressed	Responsible Officer	Action Required	Timescale for completion	Action Taken	Comments

6. Report, publication and Review

Please record details of the report or file note which records the outcome of the EQIA together with any actions / recommendations being pursued (date, type of report etc)

None identified.

Please record details of where and when EQIA results will be published

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Please record below when the EQIA will be subject to review.

The EQIA will be reviewed in parallel with the Medical Equipment Management Policy.

Name of person completing Clive Morgan, Deputy Director of Therapies and Health Science

Signed _____

Date: _____

Name of Responsible Executive/Clinical Board Director Authorising Assessment and Action Plan for publication
Fiona Jenkins, Director of Therapies and Health Science

Signed: _____

Date: _____

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Appendix 4

Format for publication of EQIA results

Executive Summary

This should provide a summary of the results of the EQIA, in particular focusing on how any decisions have been made.

Background

- A description of the aims of the policy
- The context in which the policy operates
- Who was involved in the EQIA?

The scope of the EQIA

- A brief account of how you assessed the likely effects of the policy
- The data sources and information used
- The consultation that was carried out (who with, how and a summary of the responses).

Key findings

- Describe the results of the assessment (based on the information that is included in the EQIA template).
- Identify any positive, negative or neutral impact for any equalities groups.

Recommendations

- Provide a summary of the overall conclusions
- State any recommended changes to the proposed policy as a result of the EQIA and plans for implementation/monitoring/review.

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Appendix 5

Glossary of terms

For specific legislative guidance (relating to age, disability, gender, race, religion and belief, sexual orientation) refer to the Equality pages on the intranet

Adverse Impact

This is a significant difference in patterns of representation or outcomes between equalities groups, with the difference amounting to a detriment for one or more equalities groups.

Differential Impact

Suggests that a particular group has been affected differently by a policy, in either a positive, or negative way

Definition of Disability

The Equality Act 2010 defines Disability as being:

“An impairment, which has a substantial, long term adverse effect on a person’s ability to carry out normal day-to-day activities”.

Discrimination

Direct Discrimination

Treating people less favourably than others e.g. on the grounds of age, disability, gender, race, religion and belief, sexual orientation.

Indirect Discrimination

Applying a provision, criterion or practice that disadvantages people e.g. on the grounds of age, disability, gender, race, religion and belief, sexual orientation, and that can't be justified as a proportionate means of achieving a legitimate aim. The concept of 'provision, criterion or practice' covers the way in which an intention or policy is actually carried out, and includes attitudes and behaviour that could amount to discrimination through unwitting prejudice, ignorance, thoughtlessness and stereotyping. To find discrimination it will be sufficient to show that a practice is likely to affect the group in question adversely.

Diversity

This is defined as how differences between people are harnessed to drive forward creativity and excellence in performance. In the workplace this means recognising individual and group differences, which means more creativity and continuous improvement.

Ethnic monitoring

A process for collecting, storing and analysing data about individuals' ethnic or racial background and linking this data and analysis with planning and implementing policies.

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Functions

The term function is intended to encompass the full range of the UHB's duties and powers, which includes clinical and corporate services and departments.

Harassment

This is unwanted conduct that has the purpose or effect of creating a negative or offensive environment for a complainant, or violating the complainant's dignity or treating a person less favourably than another person because they have either submitted to, or did not submit to, sexual harassment or harassment related to sex or gender reassignment

Policies

The term policy means the full range of formal and informal decisions made in carrying out a function or delivering a particular service. Policies may take the form of a clear written statement, or may be implicit in management decisions or "custom" and "practice". Policies may also take the form of a strategy, scheme and other functions as described on page of this document.

Qualitative data

Information gathered from individuals about their experiences. Qualitative data usually gives less emphasis to statistics.

Quantitative data

Statistical information in the form of numbers normally derived from a population in general or samples of that population. This information is often analysed using descriptive statistics, which consider general profile distributions and trends in the data, or using inferential statistics, which are used to determine significance within relationships of differences in the data.

Race

Under the Equality Act it is unlawful to discriminate against anyone on grounds of race, colour, nationality, including citizenship or ethnic or national origin and Gypsy and Traveller Communities.

Reasonableness, Proportionality and Relevance

These require a professional analysis and judgement that takes account of statutory requirements alongside legal guidance plus the factors listed in section one. In terms of the legislation, **relevant** means 'having implications for, or affecting, the promotion of equality'. The UHB has broadened this to include all areas of antidiscrimination law, such that relevance refers to 'having negative implications for or affecting people from any equality target group mentioned throughout the EQIA.

Religion, belief & non belief Religion,

Religious groups cover a wide range of groupings the most of which are Buddhist, Christians, Hindus, Jews, Muslims, and Sikhs. Consider these categories individually and collectively when considering impacts.

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Trans communities

Transgender/transsexual person: a person whose perception of their own gender (gender identity) differs from the sex they were assigned at birth. A Transvestite will dress as a member of the opposite sex but doesn't have feelings of belonging to the opposite sex or alienation from their own bodies.

Source:

www.herts.ac.uk/services/counselling/understanding_gender_dysphoria.pdf

Gender reassignment: the process of transitioning from the gender assigned at birth to the gender the person identifies with. This may involve medical and surgical.

Victimisation

This takes place where one person treats another less favourably because he or she has asserted their legal rights in line with the Act or helped someone else to do so.

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A QUICK GUIDE TO EQUALITY IMPACT ASSESSMENT

Undertaking an Equality Impact Assessment (EQIA) is not optional. The organisation has a statutory duty to demonstrate it is meeting the requirements of the Human Rights Act 1998 and the 2010 Equality Act by demonstrating 'due regard' to eliminating discrimination, promoting equality and fostering good relations.

What are equality impact assessments?

EQIA is a process which enables an organisation to consider the evidence and effects of its decisions, policies, practices and services on different communities, individuals or groups. All public sector bodies currently have a legal duty to undertake equality impact assessment (EQIA) in regard to the 'protected characteristics' of race, sex, gender-re-assignment, disability, religion/belief, sexual orientation, pregnancy & maternity, marriage & civil partnership and age. We have also included Welsh Language and human rights issues as part of our EQIA process.

EQIAs provide a systematic method of ensuring that legal, social and moral obligations are met and a practical means of examining new and existing policies, services and practices to determine what impact they may have on inequality for those affected by the outcomes. The need for collection of evidence to support decisions and for engagement and involvement mean that EQIA is most effectively conducted as an integral part of policy development (ref. Policy for the Management of Policies, Procedures and other Written Control Documents).

The process of EQIA involves using a toolkit approach:-

- anticipating or identifying the evidence of the consequences of our work with individuals or groups of patients/carers/families/employees; and other stakeholders
- making sure that any negative effects are eliminated or minimised;
- maximising opportunities for promoting positive effects.

It is a crucial tool in helping us to improve the quality of local health services and to meeting the needs of those who use them as well as our employees. By using equality impact assessment and an evidence based approach we will be ensuring that key strategic and operational decisions around finance, service planning and delivery effectively take account of the diverse needs of our communities and staff.

Training sessions on undertaking EQIA's and on equality, diversity and human rights also available on the [Equality Intranet pages](#)

When do we undertake EQIA?

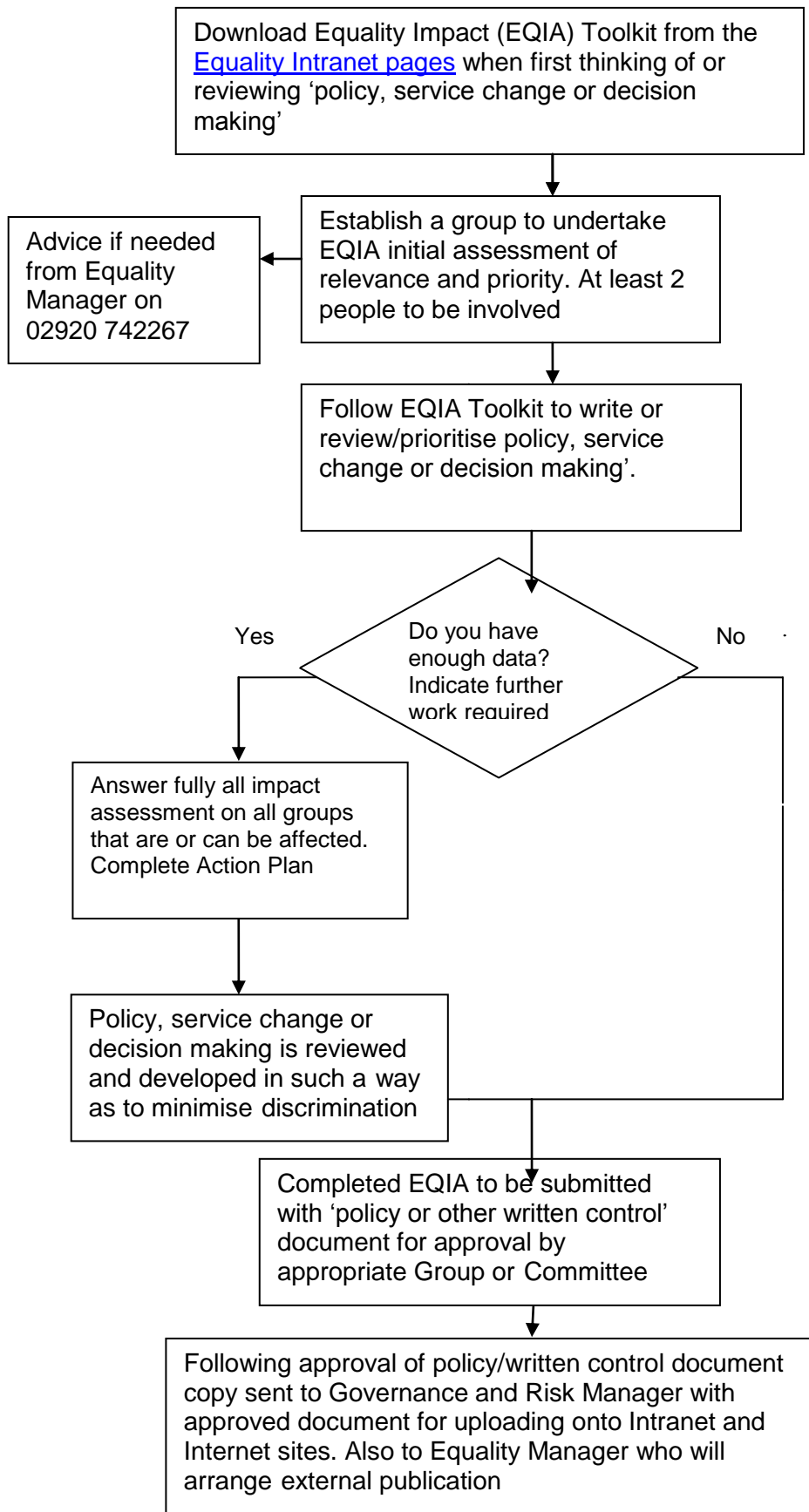
The purpose of EQIA is to ensure equality considerations are taken into account as part of the decision making and policy development process. It is therefore important that the assessment takes place as **early as possible**

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during these processes and is not considered as an additional task to be undertaken after the policy has been developed or as a means of justifying decisions that have already been made. EQIA means **evidence based policy development**, not policy-based evidence gathering.

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Steps to be followed when undertaking an EQIA - Flowchart



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References

http://www.equalityhumanrights.com/uploaded_files/PSD/equality_impact_assessment_guidance_quick-start_guide.pdf

http://www.equalityhumanrights.com/uploaded_files/eiaguidance.pdf

http://www.equalityhumanrights.com/uploaded_files/Wales/PSED_Wales_docs/5_psed_wales_equality_information.pdf

[EHRC - The essential guide to the public sector equality duty: An overview for listed public authorities in Wales.](#)

[EHRC - Engagement: A guide for listed public authorities in Wales.](#)

[EHRC - Assessing Impact: A guide for listed public authorities in Wales.](#)

[EHRC - Equality information: A guide for listed public authorities in Wales.](#)

[EHRC - Making fair financial decisions.](#)

[Central Services Agency - The easy way to EqIA.](#)

[NHS Health Scotland - Five essentials to plan for an effective impact assessment.](#)

National Principles for Public Engagement in Wales:
www.participationcymru.org.uk

[WLGA - The role of Overview and Scrutiny in Assessing Equality Performance.](#)

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