

Equality Impact Assessment

Section A: Assessment

Name of Policy: **Ectoparasitic Infestations /Infections: Fleas, Lice and Mites (Scabies) Procedure**

EQIA completed by:

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27/10/2015

1. The Policy

Is this a new or existing policy?

It is an update to the Ectoparasitic Infestations /Infections: Fleas, Lice and Mites (Scabies) Procedure

What is the purpose of the policy?

This procedure aims to provide a structure and appropriate advice to staff on the management of Ectoparasitic infestation/infection at all University Health Board locations.

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

Corporate Plan

Cardiff and Vale University Health Board (UHB) accepts its responsibility under the Health and Safety at Work Act etc. 1974 and the Control of Substances Hazardous to Health Regulations 2002, to take all reasonable precautions to reduce the risk of acquiring infection for patients, staff and other persons working at or using its premises.

In order to prevent the possible spread of infection amongst patients and staff it is recognised that the UHB requires a procedural documents to ensure effective management of infection.

The procedure is supported by the UHB's 'Framework for the Management and Reduction of Healthcare Associated Infections and Antimicrobial Resistance' (September 2015)

Who will benefit from the policy?

Patients, their visitors and UHB staff will benefit from adherence to the policy in that the risk of transmission of infection will be reduced. The UHB will benefit organisationally and financially from reducing the impact and cost of the transmission of infection.

What outcomes are wanted from this policy?

Objectives of the procedure are:

- To provide advice on the action required on the admission of a patient with known or suspected Ectoparasitic infestation/infection.
- To provide advice on the action required during an infectious incident or outbreak situation caused by Ectoparasite.
- To provide advice on the communications necessary whenever a cluster of cases of Ectoparasitic infestation/infection develop amongst patients and/or staff.

Achievement of the procedure's objectives is dependent on staff awareness of the procedure, therefore, staff knowledge and understanding of the procedure will influence the success of its implementation.

There will be no additional cost implication due to the introduction of this procedure. No human resource issues have been identified.

2. Data Collection

Google search dated the 27/10/15 showed the following EQIA's undertaken relating to Ectoparasitic policies / procedures .

Stockport NHS Foundation Trust (2012):

<http://www.stockport.nhs.uk/websitedocs/Initial%20EIA%20-%20Ectoparasitic%20Policy.pdf>

NHS North Durham, NHS Darlington, NHS Durham Dales, Easington and Sedgfield (DDES) Clinical Commissioning Groups (CCGs): Policy for the Control of Infection Caused by Ectoparasites (Scabies, Body and Head Lice) and Threadworms v5

Harrogate and District NHS Foundation Trust: Section 011 Scabies and other Ectoparasites

Northamptonshire Healthcare NHS Foundation Trust: Management of Patients with Ectoparasitic Infestations (Scabies, Body Lice and Head Lice).

Hertfordshire Partnership NHS Foundation Trust: Infection Control of Human Infestations

3. Impact

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

There was no evidence of any impact found from the above evidence search. However, patients, their visitors UHB staff of all age groups will benefit from adherence to the procedure in that the risk of transmission will be reduced.

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

There was no evidence of any impact found from the above evidence search. However, all patients, their visitors and carers, and UHB staff will benefit from adherence to the procedure in that the risk of transmission will be reduced.

Do you think that the policy impacts on people because of their disability? (This includes Visual impairment, hearing impairment, physically disabled, Learning disability, some mental health issues, HIV positive, multiple sclerosis, cancer, diabetes and epilepsy.)]

There was no evidence of any impact found from the above evidence search. However, all patients, their visitors and UHB staff will benefit from adherence to the procedure in that the risk of transmission will be reduced.

Do you think that the policy impacts on people because of Gender reassignment? (This includes Trans transgender and transvestites)

There was no evidence of any impact found from the above evidence search. However, all patients, their visitors, and UHB staff will benefit from adherence to the procedure in that the risk of transmission will be reduced.

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

There was no evidence of any impact found from the above evidence search. However, all patients, their visitors, and UHB staff will benefit from adherence to the procedure in that the risk of transmission will be reduced.

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

There was no evidence of any impact found from the above evidence search. However, all patients, their visitors, and UHB staff will benefit from adherence to the procedure in that the risk of transmission will be reduced.

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

(This includes colour, nationality and citizenship or ethnic or national origin such as Gypsy and Traveller Communities.)

There was no evidence of any impact found from the above evidence search. However, all patients, their visitors, and UHB staff will benefit from adherence to the procedure in that the risk of transmission will be reduced.

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

There was no evidence of any impact found from the above evidence search. However, all patients, their visitors, and UHB staff will benefit from adherence to the procedure in that the risk of transmission will be reduced.

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

There was no evidence of any impact found from the above evidence search. However, all patients, their visitors, and UHB staff will benefit from adherence to the procedure in that the risk of transmission will be reduced.

Do you think that the policy impacts on people because of their sexual orientation? (This includes Gay men, heterosexuals, lesbians and bisexuals)

There was no evidence of any impact found from the above evidence search. However, all patients, their visitors, and UHB staff will benefit from adherence to the procedure in that the risk of transmission will be reduced.

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

The Procedure is in English and therefore has a low impact on the Welsh Language.

4. Summary.

Which equality groups have positive or negative impacts been identified for (i.e. differential impact).

We consider there to be no differential impact on any of the equality groups.

Is the policy directly or indirectly discriminatory under the equalities legislation?

The evidence reviewed did not find any issues that suggested the procedure would lead to direct or indirect discrimination.

Appendix 3

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?)

No further consultation required.

• What monitoring/evaluation will be required to further assess the impact of any changes on equality target groups?

No further monitoring required. Any issues arising from the implementation of the procedure will be managed on a case by case basis.

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)

The Infection Prevention and Control Group is responsible for the approval of the procedure and EQIA.

Please record details of where and when EQIA results will be published
Cardiff and Vale UHB intranet and internet sites.

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

October 2018

Name of person completing:

Helen Ronchetti Clinical Nurse Specialist IP&C

Date: 27/10/2015

Name of Responsible Executive/Clinical Board Director Authorising Assessment and Action Plan for publication

Ruth Walker, Director of Nursing, Cardiff & Vale UHB

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