

Section A: Assessment	
Name of Policy	THE LASER RISK MANAGEMENT PROCEDURE
Person/persons conducting this assessment with Contact Details	Kate Bryant Head of Non-Ionising Radiation Kate.bryant@wales.nhs.uk
Date	30/04/2020

1. The Policy
<i>Is this a new or existing policy?</i> <i>Existing</i>
<i>What is the purpose of the policy?</i> To ensure that the Cardiff and Vale UHB delivers its aims, objectives, responsibilities and legal requirements transparently and consistently to manage the use of medical treatment lasers in a safe manner in order to protect the health and well being of staff working with this equipment and people who may be affected by the work. To ensure that risks to patients, staff and the UHB arising from the use of medical treatment laser equipment are minimised, and that UHB consistently delivers the best health and financial outcomes from the use of medical laser equipment.

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

This policy fits with the priorities of the integrated medium term plan by 1) managing risks across the UHB (section 11.1) and providing a framework for patient clinical safety and service quality (section 7). It also manages the health and safety of patients, visitors and staff and also ensures regulatory compliance and conformance to health and care standards.

Who will benefit from the policy?

Patients, carers, visitors and staff.

What outcomes are wanted from this policy?

The desired outcome from the implementation of this policy are:

- A robust framework for the management of medical treatment lasers to ensure that services are safe, and compliant with current legislation, standards and guidelines, in order to protect the UHB, patients, staff and members of the public.
- Ensuring that managers and staff recognise their responsibility to safeguard of all persons involved with, or who may be affected by, the use of medical treatment lasers.
- Ensuring that measures for the protection of all persons who may be affected by the use of medical treatment lasers on UHB premises are implemented and maintained.
- Demonstrating compliance through record keeping and audit.

Are there any factors that might prevent outcomes being achieved? (e.g. Training/practice/culture/human or financial resources)

Standardisation of practices may be difficult to achieve as user preference and clinical autonomy are frequently barriers to change. This risk management strategy will be overseen by the Radiation Protection Group. Further spread of managed service contracts will also be encouraged for laser equipment.

The appointment of local laser protection Supervisor (LPS) may impact upon their existing role within respective departments if they are to discharge their duties effectively and therefore arrangements must be put in place.

Financial resources may be needed to ensure regular maintenance and servicing arrangements are in place for laser equipment and that local training and competence frameworks are robust and fit for purpose.

Financial resources may also be needed to ensure sufficient personal protective equipment (PPE) is available to users, and to ensure Regular Maintenance and servicing arrangements are in place for Laser equipment.

Additional training may be needed for laser users or assistants who are not up to date with the Core of knowledge, safety or equipment training requirements.

2. Data Collection

What qualitative data do you have about the policy relating to equalities groups (e.g. monitoring data on proportions of service users compared to proportions in the population)?

What quantitative data do you have on the different groups (e.g. findings from discussion groups, information from comparator authorities)?

Please indicate the source of the data gathered? (e.g. Concerns/Service/Department/Team/Other)

What gaps in data have you identified? (Please put actions to address this in your action plan?)

Please be advised that all the below lists and links are not an exhaustive list of the available evidence and information but provides an indicative summary of the evidence and information applicable to this policy.

Laser safety is a 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 this policy will be overwhelmingly positive. It improves standards and overall quality of service provision for all patients, carers, services users and staff and will not be discriminatory in anyway. It requires that all adult and paediatric diagnostic services are delivered to the same high standard, and to include consistent practice for services assuring parity of service provision regardless of gender.

3. Impact

Please answer the following

Consider the information gathered in section 2 above of this assessment form, comparing monitoring information with census data as appropriate (see www.ons.gov.uk Office National Statistics website) and considering any other earlier research or consultation. You should also look at the guidance in Appendix 1 with regard to the protected characteristics **stating the impact and giving the key reasons for your decision.**

Do you think that the policy impacts on people because of their age? (This includes children and young people up to 18 and older people)

No

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

No

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).

No

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

No

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

No

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

Positively impacts as it assures consistent high quality services compliant with contemporary guidance across all UHB services including Obstetrics and Gynaecology services.

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.)

No

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)

No

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

No all services will be covered by the same standards.

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

No

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

No

4. Summary.

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

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

If the policy is indirectly discriminatory can it be justified under the relevant legislation?

It is believed that the impact of this policy will be overwhelmingly positive for all patients, carers, service users, visitors or staff who provide or receive treatment from services which use laser technologies to care for people or to keep people well.

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 laser technologies are deployed.

No negative impact identified.

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

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)

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

The EQIA will be published on the Cardiff and Vale UHB's intranet site alongside the Laser Risk Management Policy and Procedure.

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

The EQIA will be reviewed in parallel with the Laser Risk Management Policy and Procedure.

Name of person completing	Kate Bryant Non-Ionising Lead
Signed	
Date	30/11/20

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

Executive Summary

The purpose of the Laser Risk Management Procedure is to ensure that Cardiff and Vale UHB provides uniform, laser services which consistently meet as a minimum all national evidence based standards. The Laser Risk Management Procedure will provide a set of minimum service standards to which all Clinical Services which use medical lasers will comply. This will ensure that risks to patients, staff and the UHB arising from the use of laser equipment are minimised and that UHB consistently delivers the best health and financial outcomes from the use of laser equipment.

Background

The procedure was commissioned by the Radiation protection Group to as part of an overarching governance framework to provide consistent standards against which an assessment of service quality and safety could be made in order to provide assurance to the Executive Board.

The scope of the EQIA

The procedure covers the use of laser technologies in all care settings and for all patients, service users, carers, visitors and staff who may be affected by the use of laser devices.

Key findings

It is believed that the impact of this policy will be overwhelmingly positive for all patients, carers, service users, visitors or staff who provide or receive treatment from services which use laser technologies to care for people or to keep people well.

Recommendations

That the procedures have no adverse impact on patients, carers, service users, visitors or staff who have a protected characteristic and the procedure should therefore be adopted immediately.