Equality & Health Impact Assessment for

Venepuncture for Non Clinically Qualified Research Staff Policy

1.	For service change, provide the title of the Project Outline Document or Business Case and Reference Number	N/A
2.	Name of Clinical Board / Corporate Directorate and title of lead member of staff, including contact details	Medical Directors Office Zoe Boult 46124
3.	Objectives of strategy/ policy/ plan/ procedure/ service	Extend access to non clinically qualified staff to undertake venepuncture within research studies in the UHB
4.	Evidence and background information considered. For example • population data • staff and service users data, as applicable • needs assessment • engagement and involvement findings • research • good practice guidelines • participant knowledge • list of stakeholders and how stakeholders have engaged in the development stages	 Similar policies from other organisations within the UK were reviewed and advice was sought from similar research active Trusts within England via the UK wide Lead Nurse for Research Forum Stakeholders were not engaged in the EHIA and/or policy development but were consulted in order to share views. The draft procedure was reviewed by the Research Governance Group prior to consultation. The UHB's usual arrangement with regard to consultation was followed (ie. 28 days on the intranet)

	comments from those involved in the designing and development stages	
	Population pyramids are available from Public Health Wales Observatory ¹ and the UHB's 'Shaping Our Future Wellbeing' Strategy provides an overview of health need ² .	
5.	Who will be affected by the strategy/ policy/ plan/ procedure/ service	UHB Staff without a professional qualification working within research delivery will be affected by the Policy.

¹ http://nww2.nphs.wales.nhs.uk:8080/PubHObservatoryProjDocs.nsf ² http://www.cardiffandvaleuhb.wales.nhs.uk/the-challenges-we-face

6. 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: under 18; between 18 and 65; and over 65	There does not appear to be any impact.	n/a	n/a
6.2 Persons with a	The UHB is aware from its		
disability as defined in the	demographic information that		
Equality Act 2010	it employs staff who have		
Those with physical	disabilities as defined within		
impairments, learning	the Act. As such, the Policy		
disability, sensory loss or	would be made accessible to		
impairment, mental health conditions, long-term medical	staff in alternative formats on		
conditions such as diabetes	request or via usual good		

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
	management practice.		
6.3 People of different genders: Consider men, women, people undergoing gender reassignment 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	There appears not to be any impact on staff		
6.4 People who are married	There appears not to be any		
or who have a civil partner.	impact on staff		

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
6.5 Women who are expecting a baby, who are 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.	There appears not to be any impact on staff		
6.6 People of a different race, nationality, colour, culture or ethnic origin including non-English speakers, gypsies/travellers, migrant workers	There appears not to be any impact on staff		

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
6.7 People with a religion or belief or with no religion or belief. The term 'religion' includes a religious or philosophical belief	There appears not to be any impact on staff		
 6.8 People who are attracted to other people of: the opposite sex (heterosexual); the same sex (lesbian or gay); both sexes (bisexual) 	There appears not to be any impact on staff		
6.9 People who communicate using the Welsh language in terms of correspondence, information leaflets, or service plans and design	There appears not to be any impact on staff	Policy and procedure documents can be made available in Welsh medium if required	

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
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 not to be any impact on staff.		
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 not to be any impact on staff.		

How will the strategy, policy, plan, procedure	Potential positive and/or negative impacts	Recommendations for improvement/ mitigation	Action taken by Clinical Board / Corporate Directorate.
and/or service impact on:-			Make reference to where the mitigation is included in the document, as appropriate
6.12 Consider any other groups and risk factors relevant to this strategy, policy, plan, procedure and/or service	There are no other groups including Carers or risk factors to take into account with regard to this Policy.		

7. 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: Consider access for those living in areas of deprivation	Not applicable		

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
and/or those experiencing health inequalities			
Well-being Goal - A more equal Wales			
7.2 People being able to	Not applicable		
improve /maintain healthy			
lifestyles:			
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			
including smoking cessation			
services, weight			

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
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	Not applicable		
7.4 People in terms of their use of the physical environment: Consider the impact on the availability and accessibility of transport, healthy food,	Not applicable		

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
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 Well-being Goal – A resilient Wales			
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 and sense of belonging;	Not applicable		

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
social isolation; peer			
pressure; community identity;			
cultural and spiritual ethos			
Well being Goal A Wales of			
Well-being Goal – A Wales of cohesive communities			
coriesive communities			
7.6 People in terms of	Not applicable		
macro-economic,			
environmental and			
sustainability factors:			
Consider the impact of			
government policies; gross			
domestic product; economic			
development; biological			
diversity; climate			
Well-being Goal – A globally responsible Wales			

8.1 Please summarise the potential positive	Overall, there appears to be very limited impact on the protected
and/or negative impacts of the strategy,	characteristics and health inequalities as a result of administrative type
policy, plan or service	policies.

Action Plan for Mitigation / Improvement and Implementation

	Action	Lead	Timesc ale	Action taken by Clinical Board / Corporate Directorate
8.2 What are the key actions identified as a result of completing the EHIA?	None identified	N/A	N/A	N/A
8.3 Is a more comprehensive Equalities Impact Assessment or Health Impact Assessment required?	As there has been potentially no impact identified, it it is unnecessary to undertake a more detailed assessment and formal consultation is not require			

	Action	Lead	Timesc ale	Action taken by Clinical Board / Corporate Directorate
8.4 What are the next steps?	This EHIA will be reviewed three years after approval unless changes to terms and conditions, legislation or best practice determine that an earlier review is required. The UHB standard is that all policies are reviewed within 3 years (1 year if a statutory requirement).			