

# Equality Impact Assessment (EIA) template (refer to guidance)

**What piece of work does this relate to:** Infection Prevention Ready Procedure

**Role:** Head of Infection Prevention and Control

## 1. Is this a:

- Change to an existing strategy (long term plan of action), policy or procedure
- Change to a service or function (actions or activities)
- A new strategy or policy/procedure/business case/ ops bulletin etc.
- A new service or function
- Project which requires approval at Board or Working group

## 2. Who will be impacted by this work? Tick all that apply.

Patients	x	Student/learners	x	Volunteers	x	External Partners (please specify below) <input type="checkbox"/>
Carers	x	Trade unions	<input type="checkbox"/>			Click or tap here to enter text.
Staff	x	Suppliers	<input type="checkbox"/>			Other (including a particular geographical area, describe below) <input type="checkbox"/>
						Click or tap here to enter text.

## 3. Summarise the work being assessed. Describe current status followed by any changes that stakeholders would experience.

This is the a normal review of the procedure, but includes a change of wording to the Clinically Ready (Bare Below the Elbows) section to ensure compliance can be better managed at a local level with HR input.
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## 4. Checklist

All the Trust's policies, programmes, strategies, services and major developments affect patients, carers, service users, employees and the wider community. These will have a greater or lesser relevance to equality, diversity and inclusion.

The following questions will help you to identify how relevant your proposals are.

When considering these questions think about age, carers, disability, gender reassignment, race, religion or belief, sex, sexual orientation, pregnancy and maternity and any other relevant characteristics (for example socio-economic status, social class, income, unemployment, residential location or family background and education or skills levels).

Make notes to assist with the completion of the EIA.

Questions	Yes	No
Is there potential for/ indication of or evidence that the proposed change will affect different population groups differently (including possibly discriminating against certain groups)?	<input type="checkbox"/>	<input checked="" type="checkbox"/>
<i>If yes, please add information:</i>		
Have there been or are there likely to be any public concerns (including media, academic, voluntary or sector specific interest) about the change?	<input type="checkbox"/>	<input checked="" type="checkbox"/>
<i>If yes, please add information:</i>		
Could the proposal affect how our services, commissioning or procurement activities are organised, provided, located and by whom?	<input type="checkbox"/>	<input checked="" type="checkbox"/>
<i>If yes, please add information:</i>		
Could the proposal affect our workforce or employment practices?	<input type="checkbox"/>	<input checked="" type="checkbox"/>
<i>If yes, please add information:</i>		
Is there potential for or evidence that the proposed change will not promote equality of opportunity or promote good relations between different groups?	<input type="checkbox"/>	<input checked="" type="checkbox"/>
<i>If yes, please add information:</i>		

## 5. Equality Impact Assessment

### 5.1. Key stakeholders

A key principle for completing Equality impact assessment is that they should not be done in isolation. Consultation with affected groups and stakeholders needs to be built in from the start, to enrich the assessment and develop relevant mitigation. Detail here who you have involved with completing this EIA.

Name / Group <b>(remove this before publishing)</b>	Organisation	Role on assessment team e.g., service user, manager of service, specialist (which area)
Human Resources Team	SECAMB	
Senior Operations Team	SECAMB	
Uniform Policy Group	SECAMB	
IPC Sub Group	SECAMB	
JPF	SECAMB	

### 5.2. Who may be positively or negatively affected by this activity?

#### Protected characteristics (Equality Act 2010)

- Age
- Disability
- Race
- Gender reassignment
- Marriage & civil partnership
- Pregnancy & maternity
- Religion & beliefs (including no belief)
- Sex (male or female)
- Sexual orientation

#### In addition, consider the following vulnerable groups:

- Armed forces
- Carers
- Digital exclusion
- Domestic abuse
- Education (literacy) areas
- Homeless
- Looked after children
- Rural areas
- Urban areas
- Socioeconomic disadvantage
- People with addiction or substance misuse problems
- People on probation
- Prison population
- Undocumented migrant, refugees, asylum seekers
- Sex workers
- Other (please specify below)

5.3. **Assessment outcomes** – discussion undertaken between [Click or tap to enter a date.](#) and [Click or tap to enter a date.](#)

Protected equality characteristic	Describe here the considerations and concerns in relation to the programme/policy for the selected groups. These may be positive, negative or neutral if there is no impact.	If you have identified any negative impacts, describe here suggested mitigations to inform the actions needed to reduce inequalities.
Age	None identified	None identified
Disability	None identified	None identified
Race <sup>1</sup>	None identified	None identified
Gender reassignment	None identified	None identified
Marriage & civil partnership	None identified	None identified
Pregnancy & maternity	None identified	None identified
Religion & beliefs	None identified	None identified
Sex	None identified	None identified
Sexual orientation	None identified	None identified

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<sup>1</sup> An ethnic group or ethnicity is a named social category of people who identify with each other on the basis of shared attributes that distinguish them from other groups such as a common set of traditions, ancestry, language, history, society, culture, nation, religion, or social treatment within their residing area. A useful guide to terminology can be found here: <https://www.lawsociety.org.uk/topics/ethnic-minority-lawyers/a-guide-to-race-and-ethnicity-terminology-and-language>

Vulnerable groups/existing inequity	Describe here the considerations and concerns in relation to the programme/policy for the selected groups. These may be positive, negative or neutral if there is no impact.	If you have identified any negative impacts, describe here suggested mitigations to inform the actions needed to reduce inequalities.
Armed forces	None identified	None identified
Carers	None identified	None identified
Digital exclusion <sup>2</sup>	None identified	None identified
Domestic abuse	None identified	None identified
Education (literacy)	None identified	None identified
Homeless	None identified	None identified
Looked after children	None identified	None identified
Rural/urban geographies	None identified	None identified
Socioeconomic disadvantage	None identified	None identified

<sup>2</sup> **Digital Exclusion can be linked to the following key root causes:**

- Connectivity access to the internet – can include financial barriers as well as suitable broadband speeds/connectivity
- Digital Skills the ability to use digital tools such as email, online shopping, digital healthcare - also includes having confidence in online safety, and how to utilise particular services or apps
- Technology and Accessibility access to appropriate devices to suit their individual needs – includes access to devices suitable for use with a certain disability as well as financial and location barriers
- Not wanting to use digital platforms simply not wishing to utilise digital services – this could be due to distrust of providers, online security, privacy etc.

Vulnerable groups/existing inequity	Describe here the considerations and concerns in relation to the programme/policy for the selected groups. These may be positive, negative or neutral if there is no impact.	If you have identified any negative impacts, describe here suggested mitigations to inform the actions needed to reduce inequalities.
People with addiction or substance misuse problems	None identified	None identified
People on probation	None identified	None identified
Prison population	None identified	None identified
Undocumented migrants, refugees, asylum seekers	None identified	None identified
Sex workers	None identified	None identified
Other	None identified	None identified

#### 5.4 Impact on Human Rights

If a provision or feature of your policy or service potentially unlawfully interferes with a human right then it is negative . If something protects or promote a human right, then it is positive. Human rights and freedoms belong to everyone. They give the legal basis to basic values of fairness, respect, equality, dignity and autonomy. They provide a set of minimum legal standards for all public bodies, including the NHS. They protect an individual's rights whilst considering the rights of other people and wider society.

Human Rights	Describe here the considerations and concerns in relation to the programme/policy for the selected groups. These may be positive, negative or neutral if there is no impact.	If you have identified any negative impacts, describe here suggested mitigations to inform the actions needed to reduce inequalities.
A2. Right to life (e.g. Pain relief, DNAR, competency, suicide prevention)	None identified	None identified

Human Rights	Describe here the considerations and concerns in relation to the programme/policy for the selected groups. These may be positive, negative or neutral if there is no impact.	If you have identified any negative impacts, describe here suggested mitigations to inform the actions needed to reduce inequalities.
A3. Prohibition of torture, inhuman or degrading treatment (e.g., Service Users unable to consent)	None identified	None identified
A4. Prohibition of slavery and forced labour (e.g., Safeguarding vulnerable patients' policies)	None identified	None identified
A5. Right to liberty and security (e.g., Deprivation of liberty protocols, security policy)	None identified	None identified
A6&7. Rights to a fair trial; and no punishment without law (e.g., MHA Tribunals)	None identified	None identified
A8. Right to respect for private and family life, home and correspondence (e.g., Confidentiality, access to family etc)	None identified	None identified
A9. Freedom of thought, conscience and religion (e.g., Animal-derived medicines/sacred space)	None identified	None identified
A10. Freedom of expression (e.g., Patient information or whistle-blowing policies)	None identified	None identified
A11. Freedom of assembly and association (e.g., Trade union recognition)	None identified	None identified
A12. Right to marry and found a family (e.g., fertility, pregnancy)	None identified	None identified
P1.A1. Protection of property (e.g., Service User property and belongings)	None identified	None identified

Human Rights	Describe here the considerations and concerns in relation to the programme/policy for the selected groups. These may be positive, negative or neutral if there is no impact.	If you have identified any negative impacts, describe here suggested mitigations to inform the actions needed to reduce inequalities.
P1.A2. Right to education (e.g., accessible information)	None identified	None identified
P1.A3. Right to free elections (e.g., Foundation Trust governors)	None identified	None identified

## 6. Action plan and monitoring arrangements

Insert your action plan here (example layout provided). This should be based on mitigations recommended in 6.2. Involve your key stakeholders in monitoring progress against the actions above, and add more rows as required.

ACTIONS & DECISIONS TRACKER					
What is being assessed: N/A					
What management group will have oversight of these actions (this should be the group which has oversight of the change):					
Item	Initiation Date	Action/Item	Person Actioning	Target Completion Date	Update/Notes
1					
2					
3					
4					

The above actions should be added to the action log for the named management group.

## 7. Version Control

Version Number	Purpose/Change	Author	Date

The above provides historical data about each update made to the EIA.

Please include the name of the author, date and notes about changes made – so that you are able to refer back to what changes have been made throughout this iterative process.

Please submit a completed version on the EIA section of Marval. The approval note from Marval can be used as evidence as approval. Once approved please send to [polsandprocs@secamb.nhs.uk](mailto:polsandprocs@secamb.nhs.uk)