

Equality Impact Assessment (EIA) Stage 1

Policy or Service being Assessed: <ul style="list-style-type: none"> • Infection Prevention & Control – Notifiable Diseases Policy (IPC section 6) 		
Lead Person: <ul style="list-style-type: none"> • Infection Prevention & Control Nurse (IPCN) • Director of Infection Prevention and Control (DIPC) 		
Person(s) responsible for carrying out the assessment (if not the Lead Person). <ul style="list-style-type: none"> • Head of PPI/Equality • CNS Infection Prevention & Control 		
1. Is this a new or existing policy / service?	New ✓	Existing:
2. What is the expected outcome of the service / policy? (E.g. aims, objectives and purposes of the service / policy, standards for practice). <p>The aim of this policy is to support the principle that wherever possible infections will be prevented and where this is not possible the risk will be minimised to an irreducible level through the implementation of effective systems and procedures.</p> <p>The Trust aims to minimise risks through a culture of safety embedded into everyday practice.</p> <p>assist staff working within and supporting clinical teams in ensuring that equipment and the environment is cleaned and disinfected in accordance with evidence based practice and current guidance.</p> <p>The policy supports the principle what wherever possible infections will be prevented, where this is not possible the risk will be minimised to an irreducible level through the implementation of effective systems and procedures.</p> <p>The Trust aims to minimise risks through a culture of safety embedded into everyday practice.</p> <p>The policy provides very detailed and descriptive factual information around best practice relating to cleaning and disinfection schedules for various purposes / equipment.</p>		
3. Does this policy / service link to others? If yes please state link below: <p>The document should be read in conjunction with the following policies located in the infection control policy manual -</p> <ul style="list-style-type: none"> • Hand Hygiene Section 4a Hand Hygiene • Personal Protective Equipment Section 4b PPE 		

- Standard Precautions [Section 3 Standard Precautions](#)
- The management of transmissible spongiform encephalopathies and related prion diseases including Creutzfeldt Jacob Disease (CJD) and variant Creutzfeldt Jacob Disease (vCJD) [Section 12 Outbreak Control](#)
- The Safe Use of Medical Devices and Equipment [5.35 Policy and Guidance for the Safe Use of Medical Devices and Equipment \(April 2011\)](#)

The policy should also be read alongside the legislative Framework:

- Public Health (Control of Disease) Act 1984
- The Health & Social care Act 2008
- Health Protection (Notification) Regulations 2010
- Health Protection (Part 2A Orders) regulations 2010
- Health Protection (Local Authority Powers) Regulations 2010

4. Who is intended to benefit from the policy / service? In what way?

All staff, patients, visitors will benefit - policy and procedure to prevent or minimise the risk of infection. The policy applies to all trust employees and staff working for and behalf of the Trust including contractors, voluntary workers, students, locum and agency staff.

5. How is the policy / service to be put into practice? Who is responsible?

The policy has a very clear section on responsibilities defined by role (see pages 3 & 4 for full detail) including; Director of Infection Prevention and Control (DIPC) Infection Prevention Control Nurse (IPCN) and Registered Medical Practitioner (RMPs)

The policy also includes the Trust responsibilities to:

- Provide a Notifiable Diseases Policy,
- Work in Partnership with the Health Protection Agency and the Consultant in Communicable Disease Control (CCDC) as the Proper Officer.
- Ensure the prompt identification, reporting and management of a patient with a notifiable disease.

6. How and where is information about the policy / service publicised? Example on the Trust intra net, and the internet/portal.

The Policy has been published on the Trust intra net for comment and feedback from staff and will ultimately be published on the Trust portal for public access. Copies of the policy will be made available to patients and carers on request.

7. What regular consultation do you carry out with difference communities and groups re the policy / service?

Period of 12 week consultation via the Trust intra net.

Review at the Quality and Information Governance Review Committee (QIGC)

8. Are there concerns that the policy / service could have an adverse impact because of:	Yes:	No:
Age		✓
Disability	Yes	No
If YES to the above please state evidence (either presumed or otherwise)		✓
Gender	Yes	No
If YES to the above please state evidence (either presumed or otherwise)		✓
Ethnicity	Yes	
If YES to the above please state evidence (either presumed or otherwise)		✓
Sexual Orientation		
If YES to the above please state evidence (either presumed or otherwise)		✓
Religion / Belief		
If YES to one or more of the above please state evidence (either presumed or otherwise) do you have for this?		✓
9. Do the differences amount to discrimination and the potential for adverse impact in this policy?	Yes:	No: ✓
10. If YES could it still be justifiable e.g. on grounds of promoting equality of opportunity for one group? Or any other reason i.e. Indirect discrimination can be justifiable sometimes when a service is being provided for a particular target group e.g. Asian women's breast screening, Gay men's sexual health clinic, gender specific services /environments	Yes:	No:
If YES, please give reasons:		No
11. Do you think this policy / service specifically contributes to promoting equality and diversity in North Staffordshire? If so, in what way? Please note any examples of good practice		
No, the document is a very factual and detailed policy providing clear and specific		

instructions around procedures to be followed relating to Notifiable Diseases.	
12. Should there now be a Full Impact Assessment and if so, what are the reasons for this?	Not required.
13. Date on which full assessment to be completed by.	N/A

Signed (Lead Assessor) ...Val Stronach, Head of Equality

Date: 30 March 2010

Review Date: There will be a change on national guidance relating to this policy in May 2010 so the policy may require updating accordingly – as will the EqIA. Once this has been done a longer term review date will be agreed.