



Equality Analysis

Legislation requires that our policy documents consider the potential to affect groups differently and eliminate or minimise this where possible. This process helps to address inequalities by identifying steps that can be taken to ensure equal access, experience and outcomes for all groups of people.

Step One – Policy Definition

Function/policy name and number:	MANAGEMENT OF AN OUTBREAK, PERIOD OF INCREASED INCIDENCE (PII) OR SERIOUS BREACH IN INFECTION PREVENTION AND CONTROL POLICY
Main aims and intended outcomes of the function/policy:	<p>The Health and Social Care Act 2008: Code of Practice for the Prevention of Healthcare Associated Infection (updated 2022) requires NHS bodies to have a policy for the control and management of outbreaks of infection. This policy will be implemented when an outbreak, period of increased incidence (PII) or serious breach in infection prevention practice is confirmed or suspected.</p> <p>Outbreaks of infections or communicable disease can occur at any time and cause much discomfort and inconvenience for patients and staff. They can vary in extent and severity ranging from a few cases to larger outbreaks involving a vast number of people. The control measures required to manage and contain outbreaks will vary and the level of response will depend on the causative agent involved, as well as the number of people affected. They may threaten the operational function of the Hospital environment.</p>
How will the function/policy be put into practice?	<p>The purpose of this policy is to support good practice in the investigation, management and control of an outbreak of infectious/communicable disease.</p> <p>It is essential that all staff are vigilant and if an outbreak/PII is suspected that it is reported immediately to the IPCT.</p>
Who will be affected/benefit from the policy?	All trust staff All patients
State type of document	Policy
Is an EA required? NB: Most policies/functions will require an EA with few exceptions such as routine procedures-see guidance attached	Yes
Accountable Director: (Job Title)	Chief Nurse and Director of Infection Prevention and Control
Assessment Carried out by:	Infection Prevention and Control Clinical Nurse Specialist

Date Completed:	22/10/2024
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To help you to determine the impact of the policy think about how it relates to the Public Sector Equality Duty, the key questions as listed below the and prompts for each protected characteristic included Step 3:

-Eliminate unlawful discrimination, victimisation, and harassment

-Advancing equality of opportunity

-Fostering good community relations

KEY QUESTIONS

- Are people with protected characteristics likely to be affected differently even though the policy is the same for everyone?
- Could there be issues around access, differences in how a policy is experienced and whether outcomes vary across groups?
- What information /data or experience can you draw on to indicate either positive or negative impact on different groups of people in relation to implementing this function policy?

Step Two – Evidence & Engagement

What evidence have you identified and considered? This can include research ((national, regional ,local) surveys, reports, NICE guidelines, focus groups, pilot activity evaluations, clinical experts or working groups, information about Dudley’s demographics, The Dudley Group equality and diversity reports, Joint Strategic Needs Assessment (JSNA) or other equality analyses, Workforce Race and Disability Equality data, anecdotal evidence.

<u>Research/Publications</u>	<u>Working Groups</u>	<u>Clinical Experts</u>
The Health and Social Care Act 2008: Code of Practice for the Prevention of Healthcare Associated Infection (updated 2022) The Health and Social Care Act 2008: (updated 2022) Code of Practice for the Prevention of Healthcare Associated Infection	Infection Prevention and Control Committee	Consultant Microbiologist
World Health Organisation (2021). Coronavirus https://www.who.int/health-topics/coronavirus#tab=tab_1 Accessed 01.05.2021		
Public Health England (2012) Norovirus Toolkit: https://assets.publishing.service.gov.uk/government/norovirus		

Engagement, Involvement and Consultation:

If relevant, please state what engagement activity has been undertaken and the date and with which protected groups:

<u>Engagement Activity</u>	<u>Protected Characteristic/ Group/ Community</u>	<u>Date</u>
Health Protection Practitioner Dudley Place	Community staff	02/10/24
Health Protection Nurse DMBC	Community staff	02/10/24
Senior Healthcare Practitioner at UKHSA	Community staff	02/10/24
Divisional leads – all divisions	All staff	02/10/24
Director of Infection Prevention and Control	All staff and patients	02/10/24
Equalities business Partner	All characteristics	21/10/24
Trust Facilities Manager	Mitie staff	17/10/24
For each engagement activity, please state the key feedback you have received and then use this in step 3. List a summary of the Feedback in the 'list of feedback received' column, then add your mitigation and then your action to address.		

Summary of the feedback:

- Include internal meeting to discuss suspected Period of Increased Incidence / Outbreak as a step within policy on a page
- Reword 'discarded linen' to 'used linen'
- Simplify document removing acronyms so anyone who is neurodivergent i.e dyslexic can easily read the policy.
- Data tells us that there is a higher proportion of outbreaks on elderly care and frailty wards. Patients in these areas can often be diagnosed with dementia or suffer confusion which makes understanding isolation and IPC practices difficult – This will need to be referenced in the policy with a course of action recorded.

Step Three – Assessment of Impact

Complete **relevant** boxes below to help you record your assessment

Consider information and evidence from previous section covering:

- Engagement activities
- Equalities monitoring data
- Wider research

Also think about due regard under the general equality duty, NHS Constitution and Human Rights.

Positive Impact HIGH MEDIUM LOW	Negative Impact HIGH MEDIUM LOW	Neutral Impact (Tick)	<ul style="list-style-type: none"> • List concerns raised for possible negative impact OR • List beneficial impact (utilise information gathered during assessment)	Mitigation List actions to redress concerns raised if a negative impact has been identified in previous column	Lead [title]	Time-scale	How are actions going to be monitored/reviewed/reported? (incl. after implementation)
Positive OR Negative Impact (not both)							
1) Age Describe age related impact and evidence. This can include safeguarding, consent and welfare issues:							
	High		Higher proportion of outbreaks on elderly care and frailty wards. Patients in these areas can often be diagnosed with dementia or suffer confusion. Supporting patients in the understanding of isolation and infection prevention control practices is critical.	Case by case review Co-horting of patient Clinical teams to consult with IPCT for advice and guidance to mitigate risk	IPCT	October 2024	All outbreaks are monitored and reviewed by IPCT
2) Disability Describe disability related impact and evidence. This can include attitudinal, physical, communication and social barriers as well as mental health/ learning disabilities, cognitive impairments:							

Commented [CT1]: I've reworded and recategorised the risk for both age and disability. I'm thinking it's a high risk if these groups of patients spread infection through lack of understanding. You need to think more about the mitigation, could it be the clinical teams seek advice from the infection prevention team on a case by case basis? If this is the mitigation you will need to highlight and refer to this in the policy for any patient groups who may need more support in adhering to infection prevention control practices?

	High		Outbreaks could happen in multiple settings affecting patients with learning disabilities and/or experiencing mental health disabilities – supporting patients in the understanding of isolation and infection prevention control practices is critical.	Case by case review Co-horting of patient Family / carers involvement	IPCT	October 2024	All outbreaks are monitored and reviewed by IPCT
3) Gender re-assignment Describe any impact and evidence on transgender people. This can include issues such as privacy of data and harassment:							
		x					
4) Marriage and civil partnership Describe any impact and evidence in relation to marriage and civil partnership. This can include working arrangements, part-time working, and caring responsibilities:							
		x					
5) Pregnancy & Maternity Describe any impact and evidence on pregnancy and maternity. This can include working arrangements, part-time working, and caring responsibilities:							
		x					
6) Race Describe race related impact and evidence. This can include information on different ethnic groups, Roma gypsies, Irish travellers, nationalities, cultures, and language barriers:							
		x					
7) Religion or Belief Describe any religion, belief or no belief impact and evidence. This can include dietary needs, consent and end of life issues:							
		x					

8) Sex						
Describe any impact and evidence on men and women. This could include access to services and employment:						
		x				
9) Sexual Orientation						
Describe any impact and evidence on heterosexual people as well as lesbian, gay and bisexual people. This could include access to services and employment, attitudinal and social barriers:						
		x				
10) Other marginalised groups e.g. Homeless people						
Describe any impact and evidence on groups experiencing disadvantage and barriers to access and outcomes. This can include lower socio-economic status, resident status (migrants, asylum seekers), homeless, looked after children, single parent households, victims of domestic abuse, victims of drugs / alcohol abuse: (This list is not exhaustive)						
		x				
11) Privacy, dignity, respect, fairness etc.						
		x				

EQUALITY ANALYSIS - GUIDANCE NOTES

Equality Analysis is a tool for ensuring that issues for equality, diversity and inclusion are considered when drawing up or revising policies or proposals which affect the delivery of services and the employment practice of the Trust.

Why do carry out Equality Analysis?

We are required to carry out equality impact assessments because:

- There is a legal requirement to do so in relation to the protected characteristics
- They are helpful in identifying gaps and make improvements to services
- They help avoid continuing or adopting harmful policies or procedures
- They help you to make better decisions
- They will help you to identify how you can make your services more accessible and appropriate
- They enable the Trust to become a better employer

Equality Impact Assessments help us to:

- Determine how Trust policies and practice, or new proposals, will impact or affect different communities groups, especially those groups or communities who experience inequality, discrimination, social exclusion or disadvantage.
- Measure whether policies or proposals will have a negative, neutral, or positive effect on different communities.
- Make decisions about current and future services and practice in fuller knowledge and understanding of the possible outcomes for different communities or customer groups.

What do we need to assess?

Trust policies are subject to a 3-year review. Alongside the reviews new policies will emerge. Most policies, strategies, and business plan will need an EA.

However, EAs are not required in relation changes in routine procedures, administrative processes or initiative that will not have a material impact on staff, patients, carers and the wider community. Examples include things such as checking the temperature of fridges, highly technical clinical procedures, office moves etc.

DGFT Process for EIAs

The revised EIA process is a single stage process carried out in three steps

Step One: Policy Definition

This involves a description of the policy details. This also decides whether the policy under consideration needs an assessment

Step Two: Evidence and Engagement

EAs should be underpinned by sound data and information. This should be sought from a variety of sources including information on Trust record systems, consultation and engagement activities, demographic information sources etc

Step Three: Assessment of Impact

This is the main and the most important part of the EIA.

To help you to determine the impact of the policy think about how it relates to the Public Sector Equality Duty, the key questions as listed below and prompts for each protected characteristic.

- Eliminate unlawful discrimination, victimisation, and harassment
- Advancing equality of opportunity
- Fostering good community relations

KEY QUESTIONS

- What information /data or experience can you draw on to indicate either positive or negative impact on different groups of people in relation to implementing this function policy
- Are people with protected characteristics likely to be affected differently even though the policy is the same for everyone?
- Could there be issues around access, differences in how a service or policy is experienced and produces outcomes that vary across different groups
- Does the policy relate to the Trust's equality objectives?

NB It is important that, where adverse impact is known or is likely, mitigation measures must identified and acted upon to reduce or minimise the impact.

Step Four: Assurance

This section enables the EA to be signed off