

# Dudley Group of Hospitals: Equality Impact Assessment

## Screening Tool

Please complete the following when screening your policy or service for potential impact on equality groups.

<b>1. Name of lead</b>	Ghislaine Morris
Contact number & email	Ext 2036 ghis.morris@dgo.h.nhs.uk
Directorate or Department and Team	Diagnostics
<b>2. Name of service or policy</b>	Radiation Safety Policy
Is this a new or existing piece of work?	Review of existing policy
<b>3. Target audience</b> e.g. patients and public; NHS staff; professional health organisations; voluntary organisation; internal staff	Internal staff
<b>4. What are the aims of the service/policy?</b>	The policy sets out the measures that the Dudley Group of Hospitals will implement to ensure the health and safety of all of it's employees, contractors and members of the general public on it's premises by reducing to the minimum practicable, the hazards arising from the use of Radiations, both ionising and non-ionising
<b>5. Does any part of this service/policy have a <i>positive impact</i> on our duty to promote good race relations, eliminate discrimination and promote equality based on a person's age, disability, ethnic origin, gender, religion/belief or sexual orientation? If No, please provide brief reasons.</b>	No
<b>6. Could any part of this service/policy have an adverse impact on our duty to promote good race relations eliminate discrimination and promote</b>	No

<p><b>equality based on a person's age, disability, ethnic origin, gender, religion/belief or sexual orientation?</b>  <b>If No, please provide brief reasons.</b></p>	
<p><b>7. Are there any factors that could lead to differential take-up, outcomes or satisfaction levels based on people's age, disability, ethnic origin, gender, religion/belief or sexual orientation?</b>  <b>If No, please provide brief reasons.</b></p>	<p>No. The policy reflects the regulations regarding ionising radiations laid out in the Ionising Radiation ( Medical Exposure ) Regulations 2000</p>

If you have answered yes to any of questions 5-7, you must now complete a full Equality Impact Assessment using the proforma provided by the Trust.

If you have answered No to all of the above questions, a full assessment is not required. Please complete the following sign-off section and send a copy of this screening to your Head of Service, Matron or Head of Department as appropriate **and** to Liz Abbiss, Head of Communications at Trust HQ.

**Name of person completing this screening: Ghislaine Morris**

**Job Title: Radiology Manager**

**Date sent to Head of Service, Matron or Head of department: 01.03.10**

**Date sent to Head of Communications, Trust HQ: 08.03.10**