

Equality Impact Assessment (EIA)

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

Step One – Policy Definition

Function/policy name and number:	Aspergillosis and Infections from Other Fungi Prevention During Maintenance and Building Work Policy
Main aims and intended outcomes of the function/policy:	To identify and define the risks of fungal spore exposure to patients during any maintenance and building work that is occurring on Trust premises and give measures to prevent infection occurring.
How will the function/policy be put into practice?	The purpose of this policy is to give clear guidance to Trust staff and PFI Partners on how to define risks of fungal spore exposures to patients when maintenance takes place on Trust premises. The policy will help create an understanding of how these incidents can be reported as well as outlining each stakeholder's responsibility.
Who will be affected/benefit from the policy?	All Trust staff and PFI Staff
State the type of document:	Policy
Is an EA required? NB: Most policies/functions will require an EA with a few exceptions, such as routine procedures-see guidance attached	Yes
Accountable Director: (Job Title)	Director of Estates and Facilities
Assessment Carried out by:	Director of Estates and Facilities
Date Completed:	5th March 2026

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

<p>Research/Publications <i>(List any publications or research you have looked at here)</i></p>
<ul style="list-style-type: none"> • Department of Health (2013), Health Building Note (HBN) 00-09 Infection Control in the Built Environment. • Prevention and control of Aspergillus - Healthcare Infection Society Scoping consultation, 2024. • Spagnolo, AM (2025) Aspergillus Contamination in Healthcare Facilities: An Ever-Present Issue—Prevention and Control Measures Hygiene, V.5(1) • Bamber, S et al (2025) Survey of current national and international guidance to reduce risk of aspergillosis in hospitals Journal of Hospital Infection, V.159 (May): pp124-139.
<p>Working Groups <i>(Have you consulted with any groups?)</i></p>
<p>Clinical or Subject Experts <i>(Have you consulted any experts? List them here)</i></p>
<p>Decontamination Lead Trust Infection Control Lead Consultant Microbiologist</p>
<p>Engagement Activity Focused on Protected Groups <i>(Age, disability, race, sex, gender reassignment, marriage & civil partnership, pregnancy & maternity, religion or belief, sexual orientation, Other marginalised groups e.g. Homeless people or anything privacy or dignity related)</i></p>
<p>Directors of Estates Decontamination Lead Trust Infection Control Lead Consultant Microbiologist SPV Manager – Summit</p>

Summary of the feedback received from the engagement activity focused on protected groups:

There were no comments received.

Step Three – Assessment of Impact

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

Consider information and evidence from the previous section covering:

- Engagement activities
- Equalities monitoring data
- Wider research

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

What detail is required below:

A negative impact requires every box to be completed

Positive impacts need the first three boxes completed

Neutral impacts need to be marked neutral with no other details.

Age: Describe age-related impact and evidence. This can include safeguarding, consent and welfare issues: <i>Example completed here, delete red writing to complete form:</i>	
Positive, negative or neutral impact:	Negative, as in infection risk to this group, however policy is positive in protecting this group.
If the impact is positive or negative, is it low, medium, or high risk for this group?	High
Concern or Benefit	Whilst older people and children are at greater risk from Aspergillosis and Infections from Other Fungi during maintenance and building work this policy / procedure is there to protect them.
If a negative impact, how will it be mitigated?	n/a – this is preventative and reduces the likelihood of infection
Who will lead on this	This is an E&F led policy but the implementation of this is collaboratively with IPCT
When will it be mitigated?	Policy to be implemented whenever there is maintenance, construction and refurbishment works.
How will you monitor/review or report this?	H & S and IPC will monitor the effectiveness of the policy.

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	
Positive, negative or neutral impact:	Negative, as in infection risk to this group, however policy is positive in protecting this group.
If the impact is positive or negative, is it low, medium, or high risk for this group?	High
Concern or Benefit	Whilst disabled people are at greater risk from Aspergillosis and Infections from Other Fungi during maintenance and building work this policy / procedure is there to protect them.
If a negative impact, how will it be mitigated?	n/a – this is preventative and reduces the likelihood of infection
Who will lead on this	This is an E&F led policy but the implementation of this is collaboratively with IPCT
When will it be mitigated?	Policy to be implemented whenever there is maintenance, construction and refurbishment works.
How will you monitor/review or report this?	H & S and IPC will monitor the effectiveness of the policy.

Gender re-assignment: Describe any impact and evidence on transgender people. This can include issues such as privacy of data and harassment:	
Positive, negative or neutral impact:	Neutral impact

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:	
Positive, negative or neutral impact:	Neutral impact

Pregnancy & Maternity: Describe any impact and evidence on pregnancy and maternity. This can include working arrangements, part-time working, and caring responsibilities:	
Positive, negative or neutral impact:	Negative, as in infection risk to this group, however policy is positive in protecting this group.
If the impact is positive or negative, is it low, medium, or high risk for this group?	High
Concern or Benefit	Whilst people in this category are at greater risk from Aspergillosis and Infections from Other Fungi during maintenance and building work this policy / procedure is there to protect them.
If a negative impact , how will it be mitigated?	n/a – this is preventative and reduces the likelihood of infection.
Who will lead on this	This is an E&F led policy but the implementation of this is collaboratively with IPCT
When will it be mitigated?	Policy to be implemented whenever there is maintenance, construction and refurbishment works.
How will you monitor/review or report this?	H & S and IPC will monitor the effectiveness of the policy.

Race: Describe race-related impact and evidence. This can include information on different ethnic groups, Roma gypsies, Irish travellers, nationalities, cultures, and language barriers:	
Positive, negative or neutral impact:	Neutral impact

Religion or Belief: Describe any religion, belief or no belief impact and evidence. This can include dietary needs, consent and end-of-life issues:	
Positive, negative or neutral impact:	Neutral impact

Sex: Describe any impact and evidence on men and women. This could include access to services and employment:	
Positive, negative or neutral impact:	Neutral impact

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:	
Positive, negative or neutral impact:	Neutral impact

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)	
Positive, negative or neutral impact:	Neutral impact

Privacy, dignity, respect, fairness etc:	
Positive, negative or neutral impact:	Neutral impact

Step Four – Assurance

This section must be approved by a senior member of staff, such as a head of department or higher.

Title	Director of Estates and Facilities
Date	5 th March 2026

