

Template
Equality & Health Impact Assessment for
Duty of Candour Implementation from 1st April 2023

Part 1

Please answer all questions:-

1.	For service change, provide the title of the Project Outline Document or Business Case and Reference Number	Decontamination Policy & Procedure
2.	Name of Clinical Board / Corporate Directorate and title of lead member of staff, including contact details	Public Health Wales (PHW) Angela Cook Assistant Director of Quality, Nursing & Allied Health Professionals
3.	Objectives of strategy/ policy/ plan/ procedure/ service	This policy sets out the necessary requirements by Public Health Wales Staff (PHW) for the correct decontamination of reusable medical devices in clinical practice. The procedure document ensures that PHW: <ul style="list-style-type: none"> • Has a clear process for high level disinfection and decontamination. • Clearly outlines the requirements for PHW staff, line managers and executive directors. • Intent to protect both staff and service user.
4.	Evidence and background information considered. For example <ul style="list-style-type: none"> • population data 	Associated Guidelines <ul style="list-style-type: none"> • Healthcare Associated Infection (HCAI) Code of Practice) code-of-practice-for-the-prevention-and-control-of-healthcare-associated-infections.pdf (gov.wales)

<ul style="list-style-type: none"> • staff and service users data, as applicable • needs assessment • engagement and involvement findings • research • good practice guidelines • participant knowledge • list of stakeholders and how stakeholders have engaged in the development stages • comments from those involved in the designing and development stages <p>Population pyramids are available from Public Health Wales Observatory and the 'Shaping Our Future Wellbeing' Strategy provides an overview of health need.</p>	<ul style="list-style-type: none"> • Decontamination of Medical Devices: a Development Plan for Healthcare Organisations (Development Plan) • National Infection Prevention and Control Manual for Wales • UK 5-Year Action plan for antimicrobial resistance 2024-2029 • Welsh Health Technical Memoranda (WHTM): • 01-01 Decontamination of surgical instruments (medical devices) used in acute care (for laboratory autoclave management & validation): • Part A: Management and Provision • Part C: Steam sterilization and steam for sterilization • 01-06 Decontamination of flexible endoscopes: • Part F: Decontamination of Semi-Critical Ultrasound Probes; Semi-invasive and Non-invasive Ultrasound Probes <p>Engagement In preparing this policy and procedure consultation has taken place through the relevant consultation process of Public Health Wales</p>
<p>5. Who will be affected by the strategy/ policy/ plan/ procedure/ service</p> <p>Consider staff as well as the population that the project/change may affect to different degrees.</p>	<p>Any staff member, those on honorary contracts, secondees, students, those employed through agency or on a contract who use reusable medical devices.</p>

Part 2- Equality and Welsh language

6. EQIA / How will the strategy, policy, plan, procedure and/or service impact on people?

Questions in this section relate to the impact on people on the basis of their 'protected characteristics'.

How will the strategy, policy, plan, procedure and/or service impact on:-	Potential positive and/or negative impacts (unintended consequences) Opportunities or gaps	Action taken by Directorate. Make reference to where the mitigation is included in the document, as appropriate This column is to be updated in future reviews	Recommendations for improvement/ mitigation/ identified gaps or opportunities
6.1 Age For most purposes, the main categories are: <ul style="list-style-type: none"> • under 18; • between 18 and 65; and • over 65 	There is a positive impact on all age groups as a result of these documents	Policy and procedural documents created supported by a training programme	Appoint an organisational lead for decontamination
6.2 Persons with a disability as defined in the Equality Act 2010 Those with physical impairments, learning disability, sensory loss or impairment, mental health conditions, long-term	No identified adverse impact. positive impact as service users will be receiving the same standards as those without a disability.		

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medical conditions such as diabetes			
6.3 People of different genders: Consider men, women, people undergoing gender reassignment NB Gender-reassignment is anyone who proposes to, starts, is going through or who has completed a process to change his or her gender with or without going through any medical procedures. Sometimes referred to as Trans or Transgender	There is a positive impact on all genders as a result as all are treated equally		
6.4 People who are married or who have a civil partner.	No impact treated equally under these documents		

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6.5 Women who are expecting a baby, who are on a break from work after having a baby, or who are breastfeeding.	No positive or negative impact	All Service users are treated fairly. and consistently in the application of the policy and procedures.	
6.6 People of a different race, nationality, colour, culture or ethnic origin including non-English speakers, gypsies/travellers, migrant workers	No positive or negative impact	All Service users are treated fairly. and consistently in the application of the policy and procedures.	
6.7 People with a religion or belief or with no religion or belief.	No positive or negative impact	All Service users are treated fairly. and consistently in the application of the policy and procedures.	

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The term 'religion' includes a religious or philosophical belief			
6.8 People who are attracted to other people of: <ul style="list-style-type: none"> • the opposite sex (heterosexual); • the same sex (lesbian or gay); • both sexes (bisexual) 	No positive or negative impact	All Service users are treated fairly. and consistently in the application of the policy and procedures.	
6.9 People according to their income related group: Consider people on low income, economically inactive, unemployed/workless, people who are unable to work due to ill-health	No positive or negative impact	All Service users are treated fairly. and consistently in the application of the policy and procedures.	
6.10 People according to where they live:	Answer as above, section 6.9		

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Consider people living in areas known to exhibit poor economic and/or health indicators, people unable to access services and facilities			
6.11 Consider any other groups and risk factors relevant to this strategy, policy, plan, procedure and/or service	Strengthens guidance to support vulnerable groups eg clinically vulnerable service users when attending PHW services		
6.12 Welsh Language			
There are 2 key considerations to be made during the development of a policy, project, programme, service to ensure there are no adverse effects and/or a positive or increased positive effect on: (please note these will continue to be reviewed to ensure Public Health Wales fulfils their duties to comply with one or more standards outlined within the Welsh Language Standards (No 7) Regulations 2018)			
Opportunities for persons to use the Welsh language	No positive or negative impact	All Service users are treated fairly. and consistently in the application of the policy and procedures.	

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Treating the Welsh language no less favourably than the English language	No positive or negative impact	All Service users are treated fairly. and consistently in the application of the policy and procedures.	

Part 3 – Health

Questions in this section relate to the impact on the health and wellbeing outcomes of the population **and** specific population groups who could be more impacted than others by a policy/project/proposal.

The part of the assessment identifies.

- which specific groups in the population could be impacted more (inequalities)
- what those potential impacts could be across the wider determinants of health framework?
- Potential gaps, opportunities to maximise positive H&WB outcomes
- Recommendations/mitigation to be considered by the decision makers

7. Identification of specific population groups

Use the WHIASU Population Groups checklist as a reference to identify the population groups who could be more impacted than others by a policy/project/proposal. The check list can be found on the PHW Integrated EqHIA guidance pages (requires link to PHW Intranet pages for additional information and resources)

The groups listed have been identified as more susceptible to poorer health and wellbeing outcomes (health inequalities) and therefore it is important to consider them in a HIA assessment. In a HIA, the groups identified, as more sensitive to potential impacts will depend on the characteristics of the local population, the context, and the nature of the proposal itself.

7.1 Groups identified	Rational/explanation
No Groups identified that will be adversely impacted in terms of poorer health and well-being outcomes	This policy and procedure document offers consistent level of Infection prevention control practice across all clinical areas.

Assessment

Complete the wider determinants framework table below providing rational/evidence where appropriate:

1. Consider how the proposal could impact on the population and specific population groups identified above (positive/negative) for each of the wider determinants (the bullets under each determinant are there as a guide)
2. Record any unintended consequences (negative impacts) and/or gaps identified
3. Record any positive impacts or missed opportunities to maximise positive health and wellbeing outcomes
4. identify and record mitigation/recommendations where appropriate

Please note you may find that not all determinants are relevant to the project/plan however recording N/A is not acceptable a rational or evidence should be explained/referenced

Wider determinant for consideration	Positive impacts or additional opportunities	Unintended consequences or gaps	Population groups affected	Mitigation/recommendations
7.2 Lifestyles <ul style="list-style-type: none"> • Diet/nutrition/breastfeeding • Physical activity • Use of alcohol, cigarettes, e-cigarettes • Use of substances, non-prescribed drugs, abuse of prescription medication • Social media use • Sexual activity 	No impact			

<ul style="list-style-type: none"> • Risk-taking activity i.e. gambling, addictive behaviour 				
<p>7.3 Social and community influences on health</p> <ul style="list-style-type: none"> • Adverse childhood experiences • Citizen power and influence • Community cohesion, identity, local pride • Community resilience • Domestic violence • Family relationships • Language, cultural and spirituality • Neighbourliness • Social exclusion i.e. homelessness • Parenting and infant attachment • Peer pressure • Racism • Sense of belonging • Social isolation/loneliness • Social capital/support/networks • Third sector & volunteering 	No Impact			
<p>7.4 Mental Wellbeing</p> <ul style="list-style-type: none"> • Does this proposal support sense of control? • Does it enable participation in community and economic life? • Does it impact on emotional wellbeing and resilience? 	Provides confidence in NHS Service through effective IPC practice			
<p>7.5 Living/ environmental conditions affecting health</p> <ul style="list-style-type: none"> • Air quality • Attractiveness/access/availability/quality of area, green and blue space, natural space. • Health & safety, community, individual, public/private space • Housing, quality/tenure/indoor environment 	No impact			

<ul style="list-style-type: none"> • Light/noise/odours, pollution • Quality & safety of play areas (formal/informal) • Road safety • Urban/rural built & natural environment • Waste and recycling • Water quality 				
<p>7.6 Economic conditions affecting health</p> <ul style="list-style-type: none"> • Unemployment • Income, poverty (incl. food and fuel) • Economic inactivity • Personal and household debt • Type of employment i.e. permanent/temp, full/part time • Workplace conditions i.e. environment culture, H&S 	No impact			
<p>7.7 Access and quality of services</p> <ul style="list-style-type: none"> • Careers advice • Education and training • Information technology, internet access, digital services • Leisure services • Medical and health services • Other caring services i.e. social care; Third Sector, youth services, child care • Public amenities i.e. village halls, libraries, community hub • Shops and commercial services • Transport including parking, public transport, active travel 	No impact identified			
<p>7.8 Macro-economic, environmental and sustainability factors</p> <ul style="list-style-type: none"> • Biodiversity • Climate change/carbon reduction/flooding/heatwave • Cost of living i.e. food, rent, transport and house prices • Economic development including trade 	Supports the National plan to reduce anti microbial resistance and hospital acquired infections.			

<ul style="list-style-type: none"> • Government policies i.e. Sustainable Development principle (integration; collaboration; involvement; long term thinking; and prevention) • Gross Domestic Product • Regeneration 	<p>Does contribute to carbon emissions through the use of chemicals and electricity for Ultra violet cabinets however this is a more sustainable method of high level disinfection compared to chemical wipe systems.</p>			
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Stage 3

Summary of key findings and actions Please answer question 8.1 following the completion of the EHIA and complete the action plan

Key findings: Impacts/gaps/opportunities	Actions (what is needed and who needs to do) to address the identified mitigation and recommendations	Lead		
<p>This policy and procedure provide clear guidance for high level disinfection/decontamination practice for reusable medical devices. It conforms to current best practice guidance and national programmes to reduce hospital acquired</p>	<p>The Decontamination policy and procedure will lead to an operational change in practice for certain screening services.</p> <p>This change of practice will be implemented through the programme leads, corporate infection prevention lead, clinical staff and the Infection Prevention control group for PHW as well as facilities staff.</p>			

infection and the reduction of anti-microbial resistance.	An audit process will be completed to review compliance with policy			
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Alternatively, if appropriate, please explain the steps taken to consult with and consider the differential impact of the changes on the various protected characteristic groups (part 2) or any specific identified population groups (part 3).