



Equality Impact Assessment Form



**National
Services
Scotland**

This is a legal document as set out in the Equality Act (2010) and the Equality Act 2010 (Specific Duties) (Scotland) regulations 2012 and may be used as evidence for cases referred for further investigation for compliance issues.

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NSS Equality Impact Assessment (EQIA) Form

Complete this form after Screening has identified that an EQIA is required.

Section 1: Details of what you are assessing

a) The name of the new or revised policy, strategy, project/programme, procedure, or service being assessed: Infection Control in the Built Environment and Decontamination ARHAI

b) Directorate / Service Area: ARHAI Scotland, NHS S Assure

c) Owner/Person Responsible:.

Name:A.Rankin

Position:Nurse Consultant IPC

d) Equality Impact Assessment Team (the team can consist of one, two or more people as appropriate):

Name:Annette Rankin

Position:Nurse Consultant IPC

Name:Teresa Inkster

Position:Consultant IPC

Name:Kaileigh Begley

Position:Senior Nurse Infection Control

Name:Nicola Miller

Position:Senior Nurse Infection Control

Name:Scott McClelland

Position:Project Manager

(add more lines as appropriate)

e) Is the change being impact assessed new or existing?

☐ New

☒ Existing

f) What is the main aim and purpose of the new or changed policy, strategy, project/programme, procedure, or service being assessed?

Aim: To lead on the development and provision of evidence-based guidance and expert advice on infection prevention and control in the built environment to reduce healthcare associated infection (HAI).

Purpose: Provision of national evidence based infection prevention & control (IPC) guidance.

Benefits: To ensure patient safety is central to all infection prevention & control measures, thus increasing patient safety.

Desired outcomes: Adoption of national IPC guidance through supportive tools will impact positively across health and care settings.

g) Who are the main target groups/beneficiaries?

Staff ☒

Service Users ☒

Public ☒

Children and Young People ☒

Donor ☒

Other – **Type here** ☐

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h) What are the intended outcomes of the new or changed policy, strategy, project/programme, procedure, or service being assessed?

To ensure patient safety is central to all infection prevention & control measures, within the built environment, thus increasing patient safety. To ensure staff have easily accessible guidance and resources to ensure safe practice, thus reducing HAI.

Section 2: Information gathering and data

You should list here the sources of information used to assess the impact of the relevant policy or change. This can include sources such as internal reports, strategies, business plans, workforce plans, relevant stakeholders' reports, data and information, other public body relevant information, national information, research outcomes, data profiles, statistical data, consultation responses, in-depth interviews, academic or professional publications and any other evidence which has led to the development of this policy or change. You may wish to refer to the EQIA guidance links to potential sources of information.

Information/Evidence Gained and Used to Shape this Policy or Practice	List Details, Source and Date <i>(continue on a separate sheet if necessary)</i>
Community consultation/involvement outcomes from earlier contacts - this usually includes formally arranged contact with individuals or community, voluntary sector and other relevant interest groups	Equality data is not collected as our guidance is published and available for all. Guidance is aimed at protecting all health and care staff, patients and the general public from Healthcare Associated Infection. No Personal Identifiable Information (PII) is collected as part of activities undertaken by the ICBED programme. We ensure that other existing systems and processes consider equality and our Clinical effectiveness template applicable to this High Priority Programme noting that evidenced based IPC guidelines resulting from this programme will be applicable and accessible to all care settings and without prejudice to any patient population. Our process of stakeholder engagement and consultation provides them with the opportunity to review any materials we produce and highlight any potential inequalities e.g. where guidance may not be easily implemented. We continue to explore the possibility of having a Public Partner to support the ICBED Working Group. This process has become more complex post-pandemic as the role would likely be remote. We are progressing this further with the Head of Quality & Engagement, and have raised a risk supporting this. A consistent approach to IPC measures is highly likely to reduce infection transmission and ensure

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	equality of care in all areas. We ensure that the language and accessibility we use within our materials is inclusive for all groups (e.g. staff, patients, public). The consultation process currently in place demonstrates where our evidence reviews have considered findings to ensure equality is applied to guidance, including; applicability to Scottish health and care settings, general usability of the evidence, publication bias, consistency of evidence in developing conclusions. To ensure accessibility for people, regardless of on-screen reading ability, ARHAI have written and published the guidance in a web-based accessible way (HTML). This is also written in plain English.
Employee involvement/consultation feedback (e.g., survey, focus groups)	As above].
Research and information - list main sources	Not applicable as we don't have a research function. However, we are aware of the avenues via which to raise this].
Directorate/Service Area knowledge and experience	As 1 st section above].
Equality monitoring data	As 1 st section above].
Service user feedback (including customer contact, services and complaints)	As per our organisational complaints procedure].
Partner and or other public body feedback	As 1 st section above].
Other - this may be information gathered in another NHS Board or public service area, nationally or in partner organisations which is considered to have relevance	Not applicable].

Section 3: Consultation / Involvement

Consultation with key stakeholders can be undertaken throughout the whole of the equality impact assessment process. This section can include details of outcomes from current, earlier or ongoing consultation/involvement activities. This activity **can also help to reach people not previously involved** with these processes, but who will be affected by this policy or change when it is implemented.

The Consultation/Involvement process can also help **identify or agree changes** that need to be made to ensure the policy or change will be inclusive when implemented.

Equality Protected Characteristic	Specific Characteristics	Date	What did you do and what was the outcome? <i>(continue on a separate sheet if necessary)</i>
Age	Older People (65+)		Our ICBED Guidance programme applies equally to all staff, patients, service users, visitors, and contractors, regardless of protected characteristics as defined by the Equality Act 2010. The purpose of the guidance/programme is to promote safe and effective infection prevention and control practices and to reduce the risk of infection transmission across all settings. ICBED programme would be made aware of any inequalities associated with guidance issued via the 'contact us' page or local stakeholder groups. although it should be noted, that key characteristic data is not collected.
	Younger People (16-64)		
	Children (0-15)		
	Looked After Children (Corporate Parenting)		
Disability	Physical Disability		As above
	Sensory Impairment		
	Mental Health		
	Learning Disability		
Gender	Male transitioning to female		As above

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Reassignment			
	Female transitioning to male		
Marriage/Civil Partnership	Women		As above
	Men		
	Same Sex Couple (Male)		
	Same Sex Couple (Female)		
Pregnancy / Maternity/Paternity	Women		As above
	Men		
Race	A list of categories used in the census is <u>here</u>		As above
Religion / Belief	A list of categories used in the census is <u>here</u>		As above
Sex	Female		As above
	Male		
	Other Gender Identity		
Sexual Orientation	Lesbian		As above
	Gay		
	Bisexual person		
Socio-economic			As above

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(fairness)			
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Section 4: Detail the Positive and / or Negative Impacts

Key Questions to Address

The Assessment should highlight areas of interest covering the following:

- > Positive and negative impacts across all protected characteristics
- > Scale of the impact: An indication of the degree of potential impact, and whether this is judged to have a High, Medium or Low impact
- > Anticipated duration of the impact if relevant
- > Whether there is a specific differential impact to a particular protected characteristic or characteristics
- > Or if the impact is wider ranging and general in its effect
- > Whether any impacts identified would/could be mitigated by an amendment to the policy, service reform or change

This information will be indicated by activities at Section 2 and Section 3 above.

Equality Protected Characteristic	Specific Characteristics	Positive Impact (it could benefit the group concerned)	Negative Impact (it could disadvantage the group concerned)	No Potential Impact Identified (provide reason where possible)
Age	Older People (65+)			No adverse impact on any protected group has been identified. The guidance is intended to be applied fairly, consistently, and proportionately to all individuals. Where required, reasonable adjustments will be made to ensure that individuals with disabilities, communication needs, cultural requirements, or other specific needs are able to understand and comply with the guidance. The implementation of this guidance is expected to have a positive impact by
	Younger People (16-64)			
	Children (0-15)			
	Looked After Children (Corporate Parenting)			

				supporting the health, safety, and wellbeing of all individuals regardless of their protected characteristics.
Disability	Physical Disability			As above
	Sensory Impairment			
	Mental Health			
	Learning Disability			
Gender Reassignment	Male transitioning to female			As above
	Female transitioning to male			
Marriage/Civil Partnership	Women			As above
	Men			
	Same Sex Couple (Male)			
	Same Sex Couple (Female)			
Pregnancy / Maternity/Paternity	Women			As above
	Men			
Race	A list of categories used in the census			As above
Religion / Belief	A list of categories used in the census			As above
Sex	Female			As above
	Male			

	Other Gender Identity			
Sexual Orientation	Lesbian			As above
	Gay			
	Bisexual person			
Socio-economic (fairness)				As above

Section 5: Recommendations and Actions

As a result of this equality impact assessment, please **clearly describe practical actions** you plan to take to:

- ☒ *reduce or remove any identified **negative impact***
- ☒ *promote any **positive impact** or*
- ☒ ***gather** further information/evidence*

Protected Characteristic:

No.	Action Identified	Key Impacts/Outcomes	Owner	Date for Completion
1	No potential indirect impact identified.			
2				
3				
4				
5				

Protected Characteristic:

No.	Action Identified	Key Impacts/Outcomes	Owner	Date for Completion
1	No potential indirect impact identified.			
2				
3				
4				
5				

Section 6: Outcomes

When the evidence has been considered in relation to the proposed new or changed policy, strategy, project/programme, procedure, or service, the likely impacts will be apparent. The type, scale, duration, and specificity of the likely impacts will inform the direction of the outcome of the EQIA.

There are four potential outcomes as follows:

1. No major change required. The new or changed policy, strategy, project/programme, procedure, or service is robust and can continue without amendment
2. Continue the new or changed policy, strategy, project/programme, procedure, or service. A justification is required for continuing despite the potential for adverse impact
3. Adjust or Amend the new or changed policy, strategy, project/programme, procedure, or service Remove barriers, make changes to better advance equality or remove or mitigate negative impact
4. Stop, or Remove the new or changed policy, strategy, project/programme, procedure, or service if adverse effects cannot be justified and cannot be mitigated

Outcome: No major change required. The new or changed policy, strategy, project/programme, procedure, or service is robust and can continue without amendment.
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Section 7: Authorising the Assessment

The following signatures are required:

Directorate Director or Deputy

Signed	Name	Date
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Quality Assured by Equality and Fairness Impact Assessment Trained Officer (within Directorate /Service)

Signed	Date
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Section 8: Publishing the Assessment

The completed and authorised EQIA should be added to the relevant Service pages that are publicly accessible.

Date Action Completed		Date for Review of EQIA	
Location of EQIA (Link)			