

## **Equality Screening Report**

1 July 2018 – 30 September 2018

This document can be made available in alternative formats on request

## Introduction

The Western Health and Social Care Trust (WHSCT) must consider by law, Section 75 of the Northern Ireland Act 1998, how we promote equality and remove discrimination for people who use our services and for members of staff. Our obligations are set out in our Equality Scheme. The 9 groups that are specified in the Equality Scheme are:

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Black and Minority	Different Marital Status e.g.	Disabled People
Ethnic People	Single, Married, Divorced,	
	Civil Partnership, Widowed	
Carers	Different Political Opinions	Men and Women
Different Ages -	Different Religious Beliefs	People who are
Young People/Older		Lesbian, Gay or
People		Bisexual

We also have to consider how we can promote good relations between people with different religious beliefs, political opinions or racial group (including people from the Travelling Community).

Within the Equality Scheme, the Trust gives a commitment to apply equality screening processes to all new and revised policies/proposals and, where necessary, to subject new policies/proposals to a full equality impact assessment. This process helps us to:

- assess the impact/consequences of our decisions on the people within the 9 equality groups;
- consider how we might better meet their needs (promote equality of opportunity);
- reduce any negative impacts/consequences (mitigating actions).

The Trust is required to have evidence that the following questions have been considered in relation to all policy development, strategic planning and general decision making:

- ➤ What is the likely impact on equality of opportunity for those affected by this policy/proposal, for each of the Section 75 categories? (minor/major/none)
- ➤ Are there opportunities to better promote equality of opportunity for people within the Section 75 categories?
- ➤ To what extent is the policy/proposal likely to impact on good relations, between people of a different religious belief, political opinion or racial group? (minor/major/none)

➤ Are there opportunities to better promote good relations between people of a different religious belief, political opinion or racial group?

(From 'Section 75 of the NI Act: A Guide for Public Authorities': ECNI).

The Trust's Equality Screening process provides this evidence.

If it is decided that a policy/proposal is likely to have major issues relating to equality, it is then necessary to consider carrying out a more detailed exercise called a full Equality Impact Assessment (EQIA).

Equality screening for all the policies/initiatives detailed has highlighted the need to ensure that information relating to them/the service is made available, throughout, to support those service users/families/carers who do not have English as a first language, including the use of foreign language interpreters and written translations etc., in line with Trust guidelines. In addition, service users, their families, carers or staff who require additional communication support including e.g. provision of information in Braille, sign language interpreters, large font or audio, will be provided with this.

Should you wish to obtain a copy of any of the policies and/or screening forms referred to in this document, or require them in an alternative format, please contact:

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## Western Health and Social Care Trust: Screening Outcomes for the Period 1 July 2018 – 30 September 2018

Medical Directorate					
Title of Policy and Description	Outcome of Equality Screening	Reason for Outcome	Date Compld		
Antimicrobial Stewardship Policy This policy is for Western Health and Social Care Trust (WHSCT) staff and is intended as a framework to support the appropriate use of antimicrobials in the Trust, to preserve the effectiveness of our antimicrobials, reduce avoidable adverse effects, and minimise healthcare associated infections.  Antimicrobials are medications that are used to kill or slow the spread of microorganisms that cause infection. Examples are antibiotics used for bacterial infections, antifungals to treat fungal infections and antivirals to treat viral infections.	recommended.	<ul> <li>It is anticipated that this policy will have a positive impact on all service users and staff. It outlines that:</li> <li>Antimicrobials must be prescribed only when there is clear clinical justification;</li> <li>Allergy status should be confirmed when the patient prior to prescribing antimicrobials;</li> <li>Relevant specimens for microbiology investigations should be taken prior to commencing antimicrobials must be commenced urgently for patients with severe sepsis or lifethreatening infections;</li> <li>Staff must document indications for all prescriptions for antimicrobial therapy in the medical notes including the indication for treatment, the drug, dose and route of administration;</li> <li>Staff must follow Trust antimicrobial guidelines with advice for complex patients being available from the Consultant Microbiologist.</li> <li>The policy aims to give WHSCT staff and other staff contracted to work within the Trust i.e. locum doctors and agency nurses appropriate information in relation to Antimicrobial Stewardship.</li> </ul>			

This policy will be communicated to staff via Trust
Communication. Staff will also be guided on how to
access policy and guidelines at Antimicrobial
Training.

Primary Care & Older People's Services Directorate					
Title of Policy and Description	Outcome of Equality Screening	Reason for Outcome	Date Compld		
Guidance for Use of a Mechanical Chest Compression Device to Provide External Chest Compressions in Patients Suffering Cardiac Arrest This guidance is for clinical staff within the Trust providing resuscitation in cardiac arrest situations using Mechanical Chest Compression Devices.	A full EQIA is not recommended.	The introduction of these Mechanical Chest Compression Device Guidelines will provide clarity on the use of such devices on patients in cardiac arrest. When in place this document will provide guidance to all staff involved in resuscitation attempts on the indications for use, how and when to deploy the device, how to operate and	8/8/18		
The guidelines describe the appropriate situations and methods to apply, operate, and discontinue the use of a Mechanical Chest Compression Device, in those adult patients within the WHSCT requiring chest compression related to cardiac arrest. Mechanical Chest Compression Devices are for use in adult patients (this is defined for the purposes of the guidance as those patients who are 18 years of age and over) and those patients who have reached the age of puberty.		discontinue its use. The guidance document will also provide advice on who has the authority to do so, in the absence of a senior clinician. This document will be shared with all staff involved in resuscitation attempts through training and will be made available on the Resuscitation Services SharePoint Site on the Trust's Intranet Site.			