

Appendix 14 - Equality Impact Assessment Tool

Full equalities impact assessment

Directorate: Standards & Engagements

Service: Infection Prevention & Control Team

Piece of work being assessed: Management outbreak policy

Name of lead person: Katie Grayson

Other partners/stakeholders involved: Helen Bunter Equality & Diversity Lead.

Date of assessment: 22/01/09

Single Equality Scheme strand	Baseline data and research – What is available? What does it show? Are there any gaps? Use both quantitative and qualitative research and user data Include consultation with users if available	Is there likely to be a differential impact?
Gender	Viral and bacterial infections affect all patients	No
Race	Viral and bacterial infections affect all patients	No
Disability	Patients with long standing conditions such as HIV or other long standing illnesses may be more susceptible to infection	Yes
Sexual orientation	Viral and bacterial infections affect all patients	No
Age	Older patients are more likely to be susceptible to infection	Yes
Religion/belief	Viral and bacterial infections affect all patients. Some religions forbid the eating of all meat or some meat which will decrease their chances of contracting some infectious diseases.	Yes - beneficial

Equalities Impact Assessment Action Plan

Strand	Issue	Action required	How will you measure the impact/outcome?	Timescale	Lead
Age	Older patients are more susceptible to infection due to decreased immune response with age	None, Standard Infection Control Precautions are applicable for all groups of society, to protect them from infection risk. No special measures are needed.	Completed	Completed	Katie Grayson
Disability	Some disabled people are more susceptible to infection due to decreased immune response	Staff would implement reverse-barrier precautions for people who are known to be immunocompromised, following risk assessment and discussion with the Infection Control Team. Please see section ??	Completed	Completed	Katie Grayson

