

Equality & Health Impact Assessment for Exposure Injury and Safe Management of Sharps Policy and Procedure documents

Part 1

Please answer all questions:-

1.	For service change, provide the title of the Project Outline Document or Business Case and Reference Number	There is no change in service provision.
2.	Name of Clinical Board / Corporate Directorate and title of lead member of staff, including contact details	Quality, Nursing and Allied Health Professional Directorate Jennie Leleux, Lead Nurse, Infection Prevention and Control. jennie.leleux2@wales.nhs.uk
3.	Objectives of strategy/ policy/ plan/ procedure/ service	To describe Public Health Wales's policy of implementation of and adherence to current guidance on the use and management of Sharps and response following an sharps/exposure injury. The Procedure documents detail current recommended practice for management of Sharps and response following an sharps/exposure injury.
4.	Evidence and background information considered. For example <ul style="list-style-type: none"> • population data • staff and service users data, as applicable • needs assessment • engagement and involvement findings 	Applicable legislation and guidance <ul style="list-style-type: none"> • Control of Substances Hazardous to Health (COSHH) Regulations (2002) http://www.hse.gov.uk/coshh/ • European Waste Codes (EWC), 18-01-01,03,09 and 18-02-01,02,08 https://www.gov.uk/how-to-classify-different-types-of-waste/healthcare-and-related-wastes

<ul style="list-style-type: none"> • 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"> • Guidance on management of potential exposure to blood borne viruses in emergency workers. PHE, 2019 https://www.gov.uk/government/publications/blood-borne-viruses-managing-potential-risk-in-emergency-workers • Health and Care Standards for Wales (2015). https://www.gov.wales/health-and-care-standards • Health and Safety at Work Act etc (1974) https://www.legislation.gov.uk/ukpga/1974/37 • Health and Safety (Sharp Instruments in Healthcare) Regulations 2013 http://www.hse.gov.uk/pubns/hsis7.htm • Human Tissue Act, 2004. GMC. https://www.legislation.gov.uk/ukpga/2004/30/contents • Management of Health and Safety at Work Regulations (1999) http://www.legislation.gov.uk/uksi/1999/3242/contents/made . • ISO 23907-1:2019 (2019) Sharps injury protection — Requirements and test methods — Part 1: Single-use sharps containers. https://www.iso.org/standard/71506.html • Loveday et al (2014) epic 3: National; Evidence-Based Guidance for Preventing Healthcare-Associated infections in NHS Hospitals in England. https://www.ncbi.nlm.nih.gov/pubmed/24330862 • NHS Wales Shared Services Partnership (2013) WHTM 07-01 Safe management of healthcare waste. https://nwssp.nhs.wales/ourservices/specialist-estates-services/specialist-estates-services-documents/whtms-library/whtm-07-01-safe-management-of-healthcare-waste-pdf/ • Personal Protective Equipment (PPE) at Work Regulations (2002) http://www.hse.gov.uk/toolbox/ppe.htm • The European framework on Prevention of Sharps injuries in Hospital and Healthcare Sector Council Directive 2010/32/EU (May 2010) https://osha.europa.eu/en/legislation/directives/council-directive-2010-32-eu-prevention-from-sharp-injuries-in-the-hospital-and-healthcare-sector
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		<ul style="list-style-type: none"> • The Health and Social Care (Quality and Engagement) (Wales) Act (2020) https://www.gov.wales/health-and-social-care-quality-and-engagement-wales-act-summary • The National Institute for Health and Clinical excellence (2012) Infection Prevention and control of healthcare associated infections in primary and community care https://www.nice.org.uk/guidance/cg139 • United Kingdom Surveillance of Significant Occupational Exposures to Blood borne Viruses in Healthcare Workers. PHE 2014. https://www.gov.uk/government/publications/bloodborne-viruses-eye-of-the-needle
5.	<p>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>Those affected by this review will be Public Health Wales staff and potentially, service users (in the instance of an sharps/exposure injury).</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 	This Policy & Procedures does not impact on this group. The two Screening Services that have contact with sharps are Breast Test Wales Biopsy services and Diabetic Eye Screening Wales (through service user equipment) and these see a wide age range of service users. These policy/procedure documents should help staff feel confident about	N/A	N/A

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
	managing sharps and any exposure injuries.		
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 medical conditions such as diabetes	There is a need to meet communication needs and support informed consent to take a blood sample, for example with people with a learning disability.	An advocacy service and availability of easy read materials would aid communication and support informed consent.	N/A
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	This Policy & Procedures does not impact on this group.	N/A	N/A

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
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			
6.4 People who are married or who have a civil partner.	This Policy & Procedures does not impact on this group.	N/A	N/A
6.5 Women who are expecting a baby, who are on a break from work after having a baby, or who are breastfeeding.	This Policy & Procedures does not impact on this group.	N/A	N/A
6.6 People of a different race, nationality, colour, culture or ethnic origin including non-English speakers,	The procedure for follow up of a sharps/exposure injury requires the risk assessment and taking of a blood sample from the Source person, with	The need for translation services has been stated in section 4.1.1 of the Sharps and Exposure Injury Procedure.	N/A

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
gypsies/travellers, migrant workers	consent. If the service user does not speak or understand English sufficiently to make an informed decision, translation/interpretation services must be made available.		
6.7 People with a religion or belief or with no religion or belief. The term 'religion' includes a religious or philosophical belief	This Policy/Procedure may impact on people with religious beliefs that include not consenting to the use of blood or blood transfusions for medical procedures.	If consent to take blood is not given, the process for 'unknown source' should be followed. The service user should not be put under any pressure to participate.	N/A
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) 	This Policy & Procedures does not impact on this group.	N/A	N/A

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
6.9 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	This Policy & Procedures does not impact on this group.	N/A	N/A
6.10 People according to where they live: Consider people living in areas known to exhibit poor economic and/or health indicators, people unable to access services and facilities	This Policy & Procedures does not impact on this group.	N/A	N/A
6.11 Consider any other groups and risk factors relevant to this strategy, policy, plan, procedure and/or service	This Policy & Procedures does not impact on other groups.	N/A	N/A

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
6.12 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	The Sharps and Exposure Injury and Safe Management of Sharps Policy and Procedure documents will be produced in both English and Welsh and therefore will not discriminate against any person who wishes to communicate in Welsh. However, there may be a delay in the availability of copies in both languages due to translation service timescales.	Require Translation services to convert the document into Welsh for publication. If communication is required in Welsh then access to translation services will be required.	To translate document as per PHW policy.

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
	Infection Prevention & Control contains specialised language. If verbal communication is required in Welsh, a specialised translation service may be required.		
Treating the Welsh language no less favourably than the English language	The Sharps and Exposure Injury and Safe Management of Sharps Policy and Procedure documents will be produced in both English and Welsh.	Require Translation services to convert the document into Welsh for publication.	To translate document as per PHW policy.

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
6.6 Non-English speakers	The procedure for follow up of a sharps/exposure injury requires the risk assessment and taking of a blood sample from the Source person, with consent. If the service user does not speak or understand English sufficiently to make an informed decision, translation services must be made available.
6.7 People with a religion or belief or with no religion or belief. The term 'religion' includes a religious or philosophical belief	This Policy/Procedure may impact on people with religious beliefs that include not consenting to the use of blood or blood transfusions for medical procedures. If consent to take blood is not given, the process for 'unknown source' should be followed. The service user should not be put under any pressure to participate.

<p>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 medical conditions such as diabetes</p>	<p>There is a need to meet communication needs and support informed consent to take a blood sample, for example with people with a learning disability. An advocacy service and availability of easy read materials would aid communication and support informed consent</p>
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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
<p>7.2 Lifestyles</p> <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 • Risk-taking activity i.e. gambling, addictive behaviour 	<p>Adherence to this policy by staff members will lower the risk of sharps/exposure injuries as far as is reasonably possible and ensure care following an injury is prompt and holistic,</p>	<p>No unintended consequences identified.</p>		

	<p>for both the injured party and the Source, thereby protecting the health and wellbeing of both staff and service users.</p>			
<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 	<p>Adherence to this policy by staff members will lower the risk of sharps/exposure injuries as far as is reasonably possible and ensure care following an injury is prompt and holistic, for both the injured party and the Source, thereby protecting the health and wellbeing of both staff and service users.</p>	<p>No unintended consequences identified.</p>		
<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? 	<p>Experiencing a sharps/exposure injury produces anxiety. This set of documents is intended to limit the negative effects of sharps/exposure injuries through</p>	<p>No unintended consequences identified.</p>		

	<p>lowering the risk of them occurring, and providing clear guidance for prompt assessment and treatment, plus psychology support in the event of an injury. It also gives clear guidance on how to support the Source through the process of consenting to blood tests.</p>			
<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 • Light/noise/odours, pollution • Quality & safety of play areas (formal/informal) • Road safety • Urban/rural built & natural environment • Waste and recycling • Water quality 	<p>Adherence to this policy by staff members will lower the risk of sharps/exposure injuries as far as is reasonably possible and ensure care following an injury is prompt and holistic, for both the injured party and the Source, thereby protecting the health and wellbeing of both staff and service users.</p>	<p>No unintended consequences identified.</p>		

<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 	<p>Adherence to this policy by staff members will lower the risk of sharps/exposure injuries as far as is reasonably possible and ensure care following an injury is prompt and holistic, for both the injured party and the Source, thereby protecting the health and wellbeing of both staff and service users.</p>	<p>No unintended consequences identified.</p>		
<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 	<p>Adherence to this policy by staff members will lower the risk of sharps/exposure injuries as far as is reasonably possible and ensure care following an injury is prompt and holistic, for both the injured party and the Source, thereby protecting the health and wellbeing of both</p>	<p>No unintended consequences identified.</p>		

	staff and service users.			
7.8 Macro-economic, environmental and sustainability factors <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 • Government policies i.e. Sustainable Development principle (integration; collaboration; involvement; long term thinking; and prevention) • Gross Domestic Product • Regeneration 	Adherence to this policy by staff members will lower the risk of sharps/exposure injuries as far as is reasonably possible and ensure care following an injury is prompt and holistic, for both the injured party and the Source, thereby protecting the health and wellbeing of both staff and service users.	No unintended consequences identified.		

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		
Experiencing a sharps/exposure injury produces anxiety. This set of documents is intended to limit the negative effects of sharps/exposure injuries through	Information contained in this suite of policy & procedure documents will be cascaded to staff. Datix incidents will be monitored for trends and learning points to identify any further training/input required.	Jennie Leleux, Lead Nurse for Infection		

<p>lowering the risk of them occurring, and providing clear guidance for prompt assessment and treatment, plus psychology support in the event of an injury. It also gives clear guidance on how to support the Source through the process of consenting to blood tests.</p>		Prevention & Control.		
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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).