Equality Impact Assessment Cover Report

| Title of Controlled Document: | Immunisation Policy | | | | |
|--|---|----------------|--|--|--|
| Document Control No. | 64 | Version No: 5. | | 5.0 | |
| Previous Document in use: | 4.1 | | | | |
| Controlled Document Lead: | Louise Hopton | | | | |
| Controlled Document Sponsor: | Michele Owen | | | | |
| Please list the keywords for searching purposes. Keywords will enable rapid searching and should reflect the guidance and clinical areas to which it applies. Occupational Health, Immunisations, Exposure prone procedures, Hepatitis B, Hepatitis C, HIV, Tuberculosis, Rubella, Measles, Varicella, chickenpox | | | | | |
| | | | | | |
| 1. Purpose (Specific outcomes; short-term/long-term objectives indirect aims) | To ensure the provision of an effective immunisation programme for health care workers | | | | |
| 2. Beneficiaries (Who is intended to benefit? How is the document trying to achieve this?) | Health care workers and patients, by ensuing health care workers have appropriate immunisations | | | | |
| 3. Implementation (Explain how this document will be implemented in full (include timescales and it should be no more than 3 months*)) | Implementation (inclucommunication and implementation) | • | Date to be completed (no later than 3 months*) | Completed – to be completed 3 months* from the date the policy is approved Y/N | |
| | Updating existing p | olicy | 1/11/18 | Υ | |
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| *a clinical audit against the guidance sh | ould take place within 12 m | onths of the | implementation. | · | |
| 4. To be completed if drugs ar | e prescribed as part o | of the Co | ntrolled Docum | nent: | |
| Drug | | | | On UHB Formulary (Y/N) | |
| | | | | | |
| | | | | | |
| | | | | | |
| 5. Stakeholders – who has been consulted | | | | | |

| Who? | Job title | Rationale? | Method of involvement? | Response (Y/N) |
|---------------------------|------------------------------|--------------------------------------|---------------------------|-------------------|
| OH team | Consultant, Lead nurses, OHA | Ensure consistency across the trust, | Face to face and by email | У |
| H&S | Lead | Safety of health care workers | Email | У |
| Infection Control | Lead | Safety of patients | Email | У |
| Learning and Development | Lead Nurse for standards | Ensure consistency across the trust | Email | У |
| Information Governance | Manager | Ensure consistency across the trust | Email | У |

6. Equality Impact Assessment – will the document have an impact on any of the strands listed below

For Clinical Guidance: The purpose of this form is to document that equalities issues have been considered taking into account each of the equality dimensions to confirm equality issues identified during the scoping stage have been addressed where possible, in the clinical evidence reviews or other clinical evidence underpinning the recommendations

| | Yes/No | Comments |
|--|--------|----------|
| Does the Controlled Document affect one group less or more favourably than another on the basis of: | | |
| Race | No | |
| Ethnic origins (including gypsies and travellers) | No | |
| Nationality | No | |
| Gender | No | |
| Culture | No | |
| Religion or belief | No | |
| Sexual orientation including lesbian, gay and bisexual people | No | |
| Age | No | |
| Disability - learning disabilities, physical disability, sensory impairment and mental health problems | No | |
| Gender reassignment | No | |
| Marriage/Civil Partnership | No | |
| Pregnancy/Maternity | No | |
| Carers responsibilities | No | |
| Is there any evidence that some groups are affected differently? | No | |
| If you have identified potential discrimination, are any | No | |

| exceptions valid, legal and/or justifiable? | | |
|--|-----|--|
| Is the impact of the Controlled Document likely to be negative? | No | |
| If so can the impact be avoided? | N/A | |
| What alternatives are there to achieving the Controlled Document without the impact? | N/A | |
| Can we reduce the impact by taking different action? | N/A | |

Are there any resources required for implementation? If yes please state what No

Is the document compatible with other Controlled Documents, external standards and legislation? If yes please state what standards and what legislation

- Infection Prevention and Control Policy and Procedures
- Patient Group Directions
- COSHH Procedure
- Staff Health Procedure Communicable Infections
- Public Health England (2014): "Guidance on Immunisation against infectious disease", (commonly referred to as the 'Green Book')
 https://www.gov.uk/government/collections/immunisation-against-infectious-disease-the-green-book
- Public Health England (2017): Integrated guidance on health clearance of healthcare workers and the management of healthcare workers infected with bloodborne viruses (hepatitis B, hepatitis C and HIV)
- NICE (2016): NICE clinical guidelines NG33: Tuberculosis: Clinical diagnosis and management of tuberculosis, and measures for its prevention and control

Are there any training requirement identified in the document? (Y/N) N

If you answered yes can you confirm that these have been agreed with the relevant Senior Education Lead? (Y/N please state who agreed them with)

Need to add section on which site/s the document applies to (merger)?

Applies to all sites