

**EQIA Report For  
Healthcare Environment Inspectorate  
Acute Hospital Inspection Reports**

**Date: 07/10/09**

## Policy, Function or Output Details

Section One:	Ownership / Commitments	
1.1 Organisation: NHS Quality Improvement Scotland Including SIGN	1.2 Directorate: Patient Safety and Performance Assessment	
1.3 Person Responsible: Tracy Walker, Programme Manager, HEI	1.4 Unit: Healthcare Environment Inspectorate (HEI)	
1.5 Product Title: Acute Hospital Inspection Reports	1.6 Target Publication Date: To be published mid-November 2009	
1.7 What stage is it at? Draft	1.8 Status: New	
1.9 This work has been developed: by NHS QIS and the Scottish Government.		
1.10 What equality data are you aware of being available in relation to the subject matter? N/A		

Section Two:	The Product Background	
2.1	<p>What is the purpose of this Product?</p> <p>To report the findings of HEI Inspections to acute hospitals in NHSScotland</p>	
2.2	<p>Which NHS QIS work themes does this relate to? Other projects</p> <p>Give details: Healthcare Associated Infection (HAI)</p>	
2.3	<p>Who are the stakeholders?</p> <p>The principal stakeholders are NHS boards, NHSScotland staff and members of the public.</p>	
2.4	<p>Who is it to benefit or affect?</p> <p>The product will benefit all stakeholders (as outlined in 2.3)</p> <p>In what way?</p> <p>The products are reporting on the findings of the individual HEI inspections to acute hospitals in NHSScotland. Each report will provide recommendations to NHS boards and acute hospitals as to action which is required to be taken. NHS boards will be required to produce improvement action plans which will be published on the HEI</p>	

	section of the NHS QIS website at the same time as these reports.
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Section Three:	Initial Checklist	
<b>Equality target groups</b>		
Please check the relevant boxes, where it is anticipated that there will be a differential impact on the equality group (due to their membership of that equality group)		
Age: consider children, young people and older people		<input type="checkbox"/>
Disability eg. physical, sensory impairment and learning disability.		<input type="checkbox"/>
Gender: male, female, transgender and transsexual people		<input type="checkbox"/>
Race/ethnic groups including minorities eg. gypsy travellers, refugees & asylum seekers.		<input type="checkbox"/>
Religion or belief: religious or other groups with a recognised belief system		<input type="checkbox"/>
Sexual orientation eg. lesbian, gay, bisexual		<input type="checkbox"/>
<b>Cross Cutting Strands</b>		
People in poverty		<input type="checkbox"/>
Homeless people		<input type="checkbox"/>
Language or social origins issues		<input type="checkbox"/>
People in Criminal Justice System		<input type="checkbox"/>
People with mental health issues		<input type="checkbox"/>
Marital status including civil partnership		<input type="checkbox"/>

Section Four:	Initial Checklist - Summary Sheet
4.1	<p>Have actual or potential differential positive impacts been identified for one or more equality target groups? No</p> <p>No specific groups of people will be advantaged by the production of these reports. There is a positive impact on all the equality target groups because the products are designed to:</p> <p>Support NHSScotland staff to reduce Healthcare Associated Infections (HAIs) by highlighting areas where further work is required and good practice.</p> <p>Provide public assurance that acute hospitals in NHSScotland are clean and safe to use.</p>
4.2	<p>Have actual or potential differential negative impacts been identified for one or more equality target groups? No</p> <p>No specific groups of people will be disadvantaged by the production of these reports. There is not any negative impact on any of the equality target groups because the products are designed to:</p> <p>Support NHSScotland staff to reduce HAIs by highlighting areas where further work is required and good practice.</p> <p>Provide public assurance that acute hospitals in NHSScotland are clean and safe to use.</p>
4.3	<p>Additional information and evidence required:</p> <p>There are no positive and negative impacts on equality target groups as these products are not directly about patient care or services but rather about systems and processes used by NHS boards and acute hospitals in relation to HAIs and infection prevention and control so this does not affect any equality target group in any way.</p>
4.4	Assessment status:

	<ul style="list-style-type: none"> <li>• Data collection was sufficient for the initial checking Yes</li> <li>• If not what can / should be done to improve it:</li> </ul>
4.5	<p>This has been subjected to EQIA before No Date:</p> <p>Give details of outcomes etc.</p>
4.6	<p>What efforts will be made/ have been made to include representatives from the relevant equality target groups as identified in Section 3?</p> <p>Members of the public (HEI Associate Inspectors – Patient Focus) are members of the inspection teams.</p> <p>NHSScotland staff and patients are interviewed as part of the inspections.</p> <p>The reports are available within the public domain and as such have been written and produced in clear format. Alternative formats are available on request.</p>
4.7	<p>How have they been/will they be involved in the development?</p> <p>Give details:</p> <p>There was a public consultation held in November 2008 where comments were sought from each Public Partnership Forum. The consultation document and questions were posted on both the Scottish Government and Scottish Health on the Web (SHOW) websites which also led to responses being submitted from members of the general public and other organisations.</p> <p>Associate Inspectors - Patient Focus inspectors involved in shaping HEI methodology.</p>
4.8	<p>What research or consultation has been/requires to be carried out with regard to the impact on equality target groups as identified in Section 3?</p> <p>The Scottish Government carried out a consultation into the formation of the HEI in November 2008. NHS QIS also carried consultation with a number of stakeholders prior to the establishment of the HEI.</p>
<b>Initial Checklist</b>	<b>Recommended actions and sign off</b>
4.9	<p>Further initial checking No</p> <p>If yes what should be undertaken?</p>
4.10	<p>Recommendations summary:</p> <p>Publish these products and disseminate to NHSScotland staff and the</p>

	public and provide copies in alternative formats on request.	
4.11	No further action is recommended and the conclusions of the initial checklist are accurate and comprehensive <input checked="" type="checkbox"/> If not give reasons: Publishing date:	
4.12	Assessors:	Start date: 07/10/09
		Finish date:07/10/09
Name:	Tracy Walker, Programme Manager, HEI (Lead Assessor)	Date: 07/10/09

<b>Section Five:</b>		<b>Impact assessment</b>
<b>Examination of Available Data</b>		
Data collection may include: consultations, surveys, databases, focus groups, in-depth interviews, pilot projects, reviews of complaints made, user feedback, academic or professional publications, consultants' reports etc		
5.1	Referring to the above list, who has been consulted with regard to the equality target groups?  NHSScotland staff (both from territorial and special health boards) HEI Inspectors (both salaried staff and patient focus inspectors) Scottish Government Health Directorate Health & Safety Executive	
5.2	What do you know from existing in-house quantitative/qualitative data, research, consultations, focus groups and analysis?  NHS QIS has produced a number of documents in support of the prevention and control of infection (eg. two sets of HAI standards, two peer review cycles and support with implementation for NHS boards.)	
5.3	What do you know from existing external quantitative/qualitative data, research, consultations, focus groups and analysis?  A number of external organisations have produced a considerable amount of data, guidance and recommendations in relation to HAI. These organisations include:	

	<ul style="list-style-type: none"> <li>- Scottish Government Health Directorate (including HAI Task Force)</li> <li>- Health Protection Scotland</li> <li>- Health Facilities Scotland</li> <li>- Infection Control Nurses Association</li> <li>- Scottish Antimicrobial Prescribing Group</li> </ul>
5.4	<p>What knowledge gaps were identified with regard to the equality target groups?</p> <p>None in relation to the subject area and specific requirements of this product. The purpose of this product is to record the findings from the inspections of acute hospitals in NHSScotland.</p>
5.5	<p>Describe actual/potential difficulties – with availability of information?</p> <p>None</p>



**Section Six:****Equality target groups**

Complete the following table, recognising that differential positive and adverse impacts (whether intended or unintended) could apply to each equality target group.

a) examples of positive impacts are:

Eliminating unlawful discrimination

Promoting equal opportunities

Promoting good relations

Taking account of different needs of equality target groups .

b) examples of negative impacts are:

Disadvantaging particular equality target groups

Examine for unlawful direct and indirect discrimination.

<b>Equality target groups</b>	<b>Positive impact</b>	<b>Adverse impact</b>	<b>Reason or comment for impact rating</b>
(i) Age: consider children, young people and older people	Low	None	No specific groups of people will be disadvantaged by the production of these reports. There is a positive impact on all the equality target groups because the products are designed to:  Support NHSScotland staff to reduce HAIs by highlighting areas where further work is required and good practice  Provide public assurance that acute hospitals in NHSScotland are clean and safe to use.
(ii) Disability eg. physical, sensory impairment and learning disability.	Low	None	As Above in Section Six (i)
(iii) Gender: men, women, transgender and transsexual people	Low	None	As Above in Section Six (i)
(iv) Race/ethnic groups including minorities eg. gypsy travellers, refugees & asylum seekers.	Low	None	As Above in Section Six (i)

(v) Religion or belief: religious or other groups with a recognised belief system	Low	None	As Above in Section Six (i)
(vi) Sexual orientation eg. lesbian, gay, bisexual	Low	None	As Above in Section Six (i)
<b>Cross Cutting Strands</b>			
(vii) People in poverty	Low	None	As Above in Section Six (i)
(viii) Homeless people	Low	None	As Above in Section Six (i)
(ix) Language or social origins issues	Low	None	As Above in Section Six (i)
(x) People in Criminal Justice System	Low	None	As Above in Section Six (i)
(xi) People with mental health issues	Low	None	As Above in Section Six (i)
(xii) Marital status including civil partnership	Low	None	As Above in Section Six (i)

Section Seven:		Impact Assessment Findings	
7.1	<p>Summary of positive impacts on affected equality target groups:</p> <p>No specific groups of people will be advantaged by the production of these reports. There is a positive impact on all the equality target groups because the products are designed to:</p> <p>Support NHSScotland staff to reduce HAIs by highlighting areas where further work is required and good practice.</p> <p>Provide public assurance that acute hospitals in NHSScotland are clean and safe to use.</p>		
7.2	<p>Summary of negative impacts on affected equality target groups:</p> <p>No specific groups of people will be disadvantaged by the production of these reports. There is not any negative impact on any of the equality target groups because the products are designed to:</p> <p>Support NHSScotland staff to reduce Healthcare Associated Infections (HAIs) by highlighting areas where further work is required and good practice.</p> <p>Provide public assurance that acute hospitals in NHSScotland are clean and safe to use.</p>		
7.3	<p>Summary of consultation undertaken with relevant equality target groups:</p> <p>The Scottish Government carried out a consultation into the formation of the HEI in November 2008. NHS QIS also carried consultation with a number of stakeholders prior to the establishment of the HEI.</p>		
7.4	Recommendations: None	Select	
7.5	Additional information and evidence required to fill any knowledge gaps?		
7.6	What steps can be taken to influence this work?		
Assessment of impact and significance:	Positive: Low	Adverse: No Impact	Amendments required: None

Recommended action: Ready to publish	Issue/continue use <input checked="" type="checkbox"/>	Withdraw from use <input type="checkbox"/>
	Review date:	

<b>Section Eight:</b>	<b>Notes For Review Where Applicable</b>
<p>Where gaps in knowledge or adverse impacts have been identified with regard to how this Product effects the relevant target equality groups, please identify what steps could be taken when it is reviewed. Consider actions which could: provide missing data on relevant equality target groups, minimise or remove adverse impacts or increase the positive impacts</p> <p>N/A</p>	

<b>Section Nine:</b>	<b>Impact Assessment sign off</b>	
Decision-making and reports to line management / board (Repeat this section for each stage of the decision-making process.)		
Directorate	Patient Safety and Performance Assessment	Assessment dates
I confirm this is report is an accurate account of the EQIA findings for this Select <input checked="" type="checkbox"/>		
Name:	Tracy Walker, Programme Manager HEI (Lead Assessor)	Date: 07/10/09
Agreed by Manager/Head of Unit	Name/Job Title: Susan Brimelow / Chief Inspector	Date: 08/10/09
Quality approved	Name: Jeniffer Kibagendi	Date: 12/10