### Form 1: Preparation

Part A must be completed at the beginning of a Policy/function/strategy development or review, and for every such occurrence. (Refer to the Step-by-Step Guide for additional information).

Step	1 – Preparation	
1.	<b>Title of Policy</b> - what are you equality impact assessing?	Cardiff and Vale University Health Board (UHB) Incident, Hazard and Near Miss Reporting Policy and Procedure
2.	Policy Aims and Brief Description - what are its aims? Give a brief description of the Policy (The What, Why and How?)	The aim of the policy and procedure is to: To provide a structure for the reporting, investigation and management of adverse incidents, near misses and hazards that occur within the UHB. This Policy & Procedure is an update on the policy originally approved in September 2008.
3.	Who Owns/Defines the Policy? - who is responsible for the Policy/work?	The Chief Executive is ultimately responsible for ensuring compliance with the Health and Safety at Work etc Act 1974 and associated legislation, and that this policy is implemented and effective within Cardiff and Vale University Health Board.
		The Executive Director of Nursing, jointly with the Executive Medical Director and Executive Director of Therapies and Health Sciences have Board level responsibility for clinical governance/patient safety and quality, which includes clinical risk and patient safety.
		The Executive Nurse Director as lead for patient safety and Director of Governance as lead for Health and Safety are responsible for safety within the UHB, however responsibility for many aspects of the management of these arrangements is devolved through the management structures of the UHB which are outlined fully within the Policy/Procedure.
4.	Who is Involved in undertaking this EqIA? - who are the key contributors to the EqIA and what are their roles in the process?	The EqIA has been undertaken by the Assistant Director of Patient Safety & Quality and builds on the EqIA previously undertaken. The EqIA has been shared with the Policy T&F Group for any comment.

Step '	I – Preparation	
5.	Other Policies - Describe where this Policy/work fits in a wider context. Is it related to any other policies/activities that could be included in this EqIA?	The Policy review aligns very closely with the following Policies/Procedures and review of the related EqIA where appropriate has also been taken into account; Risk Management Policy, Risk Assessment and Risk Register Procedure, Health and Safety Policy, Putting Things Right / NHS Redress Guidance (April 2012). However, a full list of related Policies and reference material is provided in Section 22 of the Policy.
6.	Stakeholders - Who is involved with or affected by this Policy?	This Policy affects staff, patients, visitors and all users of its premises and services, including contractors working within its premises.
7.	What factors may contribute to the outcomes of the Policy? What factors may detract from the outcomes? These could be internal or external factors.	Engagement of relevant key stakeholders and awareness of the importance of incident and hazard reporting. The UHB is considered to have an 'open' incident reporting culture and this openness and related importance needs to be promoted.

## Form 2: Evidence Gathering

Equality	Evidence Gathered	Does the evidence apply to the following with regard to this
Strand		Policy/work? Tick as appropriate.

Race	An internet search reviewing the following NHS Trusts was undertaken to inform the development of this Policy. The following organisations were reviewed; Walsall Healthcare NHS Trust; https://www.walsallhealthcare.nhs.uk/media/71795/in cident%20and%20hazard%20reporting.pdf; Stockport NHS Foundation Trust; https://www.stockport.nhs.uk/websitedocs/Relevanc e%20Screening%20- %20Incident%20Reporting%20and%20Management% 20Policy.pdf Cornwall Partnership NHS Foundation Trust; http://www.rcht.nhs.uk/DocumentsLibrary/CornwallF oundationTrust/Policies/Corporate/B5Governance/R M00109.pdf Barking and Dagenham NHS Trust; http://www.onel.nhs.uk/downloads/Working- here/Policies-and-guidelines/BD/Incident-reporting- policy.pdf NHS Brent; http://www.brentpct.org/doxpixandgragix/IncidentRe portingandManagementPolicyv5 1010.doc North East London NHS Foundation Trust; http://www.nelft.nhs.uk/ documentbank/SI Policy S ept 2011 CG008.pdf NHS Bradford & Airedale Community Services; http://www.bradford.nhs.uk/wp- content/uploads/2010/07/Reporting-and- Management-of-Incidents-and-the-Investigation-of- and-Learning-from-Incidents-Complaints-and- Claims.pdf The above evidence from the above organisations suggests that there is no or little impact. The list is not exhaustive. A hard copy of the evidence is available.	Eliminating Discrimination and Eliminating Harassment		Promoting Equality of Opportunity		Promoting Good Relations and Positive Attitudes		Encouraging participation in Public Life	<b>\</b>	Take account of difference even if it involves treating some individuals more favor	
Disability	An internet search reviewing the following NHS Trusts was undertaken to inform the development of this Policy. The following organisations were reviewed;		√		√		1		√	favourably*	<b>√</b>

	Walsall Healthcare NHS Trust; https://www.walsallhealthcare.nhs.uk/media/71795/in cident%20and%20hazard%20reporting.pdf; Stockport NHS Foundation Trust; https://www.stockport.nhs.uk/websitedocs/Relevanc e%20Screening%20- %20Incident%20Reporting%20and%20Management% 20Policy.pdf Cornwall Partnership NHS Foundation Trust; http://www.rcht.nhs.uk/DocumentsLibrary/CornwallF oundationTrust/Policies/Corporate/B5Governance/R M00109.pdf Barking and Dagenham NHS Trust; http://www.onel.nhs.uk/downloads/Working- here/Policies-and-guidelines/BD/Incident-reporting- policy.pdf NHS Brent; http://www.brentpct.org/doxpixandgragix/IncidentRe portingandManagementPolicyv5_1010.doc North East London NHS Foundation Trust; http://www.nelft.nhs.uk/_documentbank/SI_Policy_S ept_2011_CG008.pdf NHS Bradford & Airedale Community Services; http://www.bradford.nhs.uk/wp- content/uploads/2010/07/Reporting-and- Management-of-Incidents-and-the-Investigation-of- and-Learning-from-Incidents-Complaints-and- Claims.pdf The above evidence from the above organisations suggests that there is no or little impact. The list is not exhaustive. A hard copy of the evidence is available.					
Gender	available.  An internet search reviewing the following NHS Trusts was undertaken to inform the development of this Policy. The following organisations were reviewed; Walsall Healthcare NHS Trust; <a href="https://www.walsallhealthcare.nhs.uk/media/71795/incident%20and%20hazard%20reporting.pdf">https://www.walsallhealthcare.nhs.uk/media/71795/incident%20and%20hazard%20reporting.pdf</a> ;	√	<b>√</b>	1	<b>√</b>	

	https://www.stockport.nhs.uk/websitedocs/Relevance%20Screening%20- %20Incident%20Reporting%20and%20Management%20Policy.pdf Cornwall Partnership NHS Foundation Trust; http://www.rcht.nhs.uk/DocumentsLibrary/CornwallFoundationTrust/Policies/Corporate/B5Governance/RM00109.pdf Barking and Dagenham NHS Trust; http://www.onel.nhs.uk/downloads/Workinghere/Policies-and-guidelines/BD/Incident-reportingpolicy.pdf NHS Brent; http://www.brentpct.org/doxpixandgragix/IncidentReportingandManagementPolicyv5 1010.doc North East London NHS Foundation Trust; http://www.nelft.nhs.uk/documentbank/SI Policy Sept 2011 CG008.pdf NHS Bradford & Airedale Community Services; http://www.bradford.nhs.uk/wp-content/uploads/2010/07/Reporting-and-Management-of-Incidents-and-the-Investigation-of-and-Learning-from-Incidents-Complaints-and-Claims.pdf The above evidence from the above organisations suggests that there is no or little impact. The list is not exhaustive. A hard copy of the evidence is					
	available.	,			,	
Sexual Orientation	An internet search reviewing the following NHS Trusts was undertaken to inform the development of this Policy. The following organisations were reviewed; Walsall Healthcare NHS Trust; <a href="https://www.walsallhealthcare.nhs.uk/media/71795/incident%20and%20hazard%20reporting.pdf">https://www.walsallhealthcare.nhs.uk/media/71795/incident%20and%20hazard%20reporting.pdf</a> ; Stockport NHS Foundation Trust; <a href="https://www.stockport.nhs.uk/websitedocs/Relevance%20Screening%20-%20Incident%20Reporting%20and%20Management%20Policy.pdf">https://www.stockport.nhs.uk/websitedocs/Relevance%20Screening%20-%20Incident%20Reporting%20and%20Management%20Policy.pdf</a>	<b>→</b>	1	7	7	

		1			1	1	,	
	Cornwall Partnership NHS Foundation Trust; http://www.rcht.nhs.uk/DocumentsLibrary/CornwallF oundationTrust/Policies/Corporate/B5Governance/R M00109.pdf Barking and Dagenham NHS Trust; http://www.onel.nhs.uk/downloads/Working-here/Policies-and-guidelines/BD/Incident-reporting-policy.pdf NHS Brent; http://www.brentpct.org/doxpixandgragix/IncidentReportingandManagementPolicyv5_1010.doc North East London NHS Foundation Trust; http://www.nelft.nhs.uk/documentbank/SI_Policy_Sept_2011_CG008.pdf NHS Bradford & Airedale Community Services; http://www.bradford.nhs.uk/wp-content/uploads/2010/07/Reporting-and-Management-of-Incidents-and-the-Investigation-of-and-Learning-from-Incidents-Complaints-and-Claims.pdf							
	The above evidence from the above organisations suggests that there is no or little impact. The list is not exhaustive. A hard copy of the evidence is available.							
Age	An internet search reviewing the following NHS Trusts was undertaken to inform the development of this Policy. The following organisations were reviewed; Walsall Healthcare NHS Trust; https://www.walsallhealthcare.nhs.uk/media/71795/in cident%20and%20hazard%20reporting.pdf; Stockport NHS Foundation Trust; https://www.stockport.nhs.uk/websitedocs/Relevanc e%20Screening%20- %20Incident%20Reporting%20and%20Management% 20Policy.pdf Cornwall Partnership NHS Foundation Trust; http://www.rcht.nhs.uk/DocumentsLibrary/CornwallF oundationTrust/Policies/Corporate/B5Governance/R M00109.pdf		<b>√</b>	V	1	<b>√</b>		

	T					 
	Barking and Dagenham NHS Trust;					
	http://www.onel.nhs.uk/downloads/Working-					
	here/Policies-and-guidelines/BD/Incident-reporting-					
	policy.pdf					
	NHS Brent;					
	http://www.brentpct.org/doxpixandgragix/IncidentRe					
	portingandManagementPolicyv5_1010.doc					
	North East London NHS Foundation Trust;					
	http://www.nelft.nhs.uk/_documentbank/SI_Policy_S					
	ept 2011 CG008.pdf					
	NHS Bradford & Airedale Community Services;					
	http://www.bradford.nhs.uk/wp-					
	content/uploads/2010/07/Reporting-and-					
	Management-of-Incidents-and-the-Investigation-of-					
	and-Learning-from-Incidents-Complaints-and-					
	Claims.pdf					
	The above evidence from the above organisations					
	suggests that there is no or little impact. The list is					
	not exhaustive. A hard copy of the evidence is					
	available.					
Religion or	An internet search reviewing the following NHS	V	<b>V</b>	<b>V</b>	<b>V</b>	
Belief	Trusts was undertaken to inform the development of	<b>'</b>	٧	<b>'</b>	٧	
Dellei	this Policy. The following organisations were					
	reviewed;					
	Walsall Healthcare NHS Trust;					
	https://www.walsallhealthcare.nhs.uk/media/71795/in					
	cident%20and%20hazard%20reporting.pdf;					
	Stockport NHS Foundation Trust;					
	https://www.stockport.nhs.uk/websitedocs/Relevanc					
	e%20Screening%20-					
	%20Incident%20Reporting%20and%20Management%					
	20Policy.pdf					
	Cornwall Partnership NHS Foundation Trust;					
	http://www.rcht.nhs.uk/DocumentsLibrary/CornwallF					
	oundationTrust/Policies/Corporate/B5Governance/R					
	M00109.pdf					
	I MUUTU9.DOT					
	Barking and Dagenham NHS Trust;					
	Barking and Dagenham NHS Trust; http://www.onel.nhs.uk/downloads/Working-					
	Barking and Dagenham NHS Trust;					

	NHS Brent; http://www.brentpct.org/doxpixandgragix/IncidentRe portingandManagementPolicyv5 1010.doc North East London NHS Foundation Trust; http://www.nelft.nhs.uk/ documentbank/SI Policy S ept 2011 CG008.pdf NHS Bradford & Airedale Community Services; http://www.bradford.nhs.uk/wp- content/uploads/2010/07/Reporting-and- Management-of-Incidents-and-the-Investigation-of- and-Learning-from-Incidents-Complaints-and- Claims.pdf The above evidence from the above organisations suggests that there is no or little impact. The list is not exhaustive. A hard copy of the evidence is available.									
Welsh Language	No evidence but we would make the policy available in Welsh if requested.		1	1		1		√	-	
liberty; to a fa corresponden	human right to: life; not to be tortured or treated in ir trial; not to be punished without legal authority; to ce; to freedom of thought, conscience and religion; and to not be discriminated against in relation to a	resp to fre	ect fo	or private of expre	and far	nily ind c	life, ho	ome an embly;	id to marry	and
Human Rights	The Policy takes into account that all incidents, he (investigated where appropriate) and dealt with converge Policy/Procedure. The policy adheres to the Hundre to be treated in an inhumane or degrading way and correspondence	onsiste nan Ri	ently ghts .	in line wi Act partic	th the recularly i	equi n re	iremen gard to	nts of the of the original or	he an right t	

• This column relates only to Disability due to the specific requirement in the Equality Act 2010 to treat disabled people more favourably to achieve equal outcomes. This is not applicable to the other equality strands.

Form 3: Assessment of Relevance and Priority

Equality Strand	Evidence: Existing evidence to suggest some groups affected. Gathered from Step 2. (See Scoring Chart A)	xisting evidence to suggest some Nature, profile, scale, cost, numbers Multiply 'evidence to suggest some affected, significance.							
Race	1	0	0						
Disability	1	0	0						
Gender	1	0	0						
Sexual Orientation	1	0	0						
Age	1	0	0						
Religion or Belief	1	0	0						
Welsh Language	1	0	0						
Human Rights	1	0	0						

#### **Scoring Chart A: Evidence Available**

3	Existing data/research
2	Anecdotal/awareness data only
1	No evidence or suggestion

**Scoring Chart B: Potential Impact** 

-3	High negative
-2	Medium negative
-1	Low negative
0	No impact
+1	Low positive
+2	Medium positive
+3	High positive

### **Scoring Chart C: Impact Decision**

-6 to -9	High Impact (H)			
-3 to -5	Medium Impact (M)			
-1 to -2	Low Impact (L)			
0	No Impact (N)			
1 to 9	Positive Impact (P)			

# FORM 4: (Part A) Outcome Report

Policy Title:	Incident, Hazard & Near Miss Reporting Policy and Procedure				
Organisation:	Cardiff and Vale UHB				
Name:	Robert Williams				
Title:	Assistant Director of Patient Safety & Quality				
Department:	Corporate Nursing				
Summary of Assessment:	Our assessment found that there is little or no impact on any of the equality strands.  This assessment was supported by a detailed internet search of similar related Policy/Procedures across English NHS providers. A search of Welsh NHS Trust Health Board Providers did not find any impact assessments on a similar Policy.				
	None of the Trusts reviewed identified any impact with their related assessments either.  Overall there is no impact				
Decision to Proceed to Part B Equality Impact Assessment:	Not necessary as there has been no identified impact.				

#### **Action Plan**

You are advised to use the template below to detail any actions that are planned following the completion of Part A or Part B of the EqIA Toolkit. You should include any remedial changes that have been made to reduce or eliminate the effects of potential or actual adverse impact, as well as any arrangements to collect data or undertake further research.

		Action(s) proposed or taken	Reasons for action(s)	Who will benefit?	Who is responsible for this action(s)?	Timescale
1.	What <b>changes</b> have been made as a result of the EqIA?	N/A	N/A	N/A	N/A	N/A
2.	Where a Policy may have differential impact on certain groups, state what arrangements are in place or are proposed to <b>mitigate</b> these impacts?	N/A	N/A	N/A	N/A	N/A
3.	Justification: For when a policy may have adverse impact on certain groups, but there is good reason not to mitigate.	N/A	N/A	N/A	N/A	N/A
4.	Describe any mitigating actions taken?	N/A	N/A	N/A	N/A	N/A
5.	Provide details of any actions planned or taken to promote equality.	N/A	N/A	N/A	N/A	N/A

Date:	August 2012		
Monitoring Arrangements:	Regular monitoring of the Incident, Hazard and Near Miss Reporting Policy and Procedure to ensure its application.		
Review Date:	August 2015		
Signature of all Parties:	Robert Williams, Assistant Director of Patient Safety & Quality.		