APPENDIX 6

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.	Title of Policy - what are you equality impact assessing?	'Procedure for Managing an Extravasation'
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 this Procedure is to provide guidance on the prevention, detection and management of infiltrations and extravasations.
3.	Who Owns/Defines the Policy? - who is responsible for the Policy/work?	The Chief Executive has ultimate responsibility for all Health & Safety issues within the UHB, including prevention and management of an extravasation. However responsibility for many aspects of the management of these guidelines has been devolved down as follows: • Executive Lead • Head of Health and Safety • Occupational Health • Pharmacy • Chemotherapy Nurse Specialists • Health and Safety Advisers • Senior Nurses/Clinical Managers Principal reviewers will be: 1. Sarah Rowland, Chemotherapy and IV Access CNS. 2. Julie Broughton Chemotherapy CNS for Children and Young People,
4.	Who is Involved in undertaking this EqIA? - who are the key contributors to the	The EqIA was undertaken by the UHB Chemotherapy Nurse Specialists, in consultation with members of the the Cytotoxic Group, who are responsible

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Step 1	- Preparation	
	EqIA and what are their roles in the process?	for devising and supporting the implementation of these guidelines.
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?	 Policy on the Management of Parenteral Cytotoxic Chemotherapy Health and Safety Policy Incident Reporting Investigation Procedure Procedure for Handling Cytotoxics During Pregnancy
6.	Stakeholders - Who is involved with or affected by this Policy?	Implementation of these guidelines will involve the following: • Pharmacy/Sterile Production Services • Chemotherapy Nurse Specialists • Senior nurses/Clinical Managers • Health and Safety Department • All staff who administer IV medication • Patients receiving Intravenous medication • Parents of children receiving IV medications • Carers of patients receiving IV medication
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.	Contributory factors include: Staff training to ensure all staff are aware of the Procedure Training/raising awareness amongst senior nurses and clinical managers Completion of appropriate risk assessments Impact on staff release for training Yearly chemotherapy assessments, which includes knowledge of extravasation

Step 1	- Preparation	
		Failure to implement training and risk assess may adversely impact on the outcomes.

Form 2: Evidence Gathering

Equality	Evidence Gathered	Doe	s the				ring with regard to this
Strand				Polic	y/work? T	<u>ıck as ap</u>	propriate.
Race	A search undertaken on such 01/03/2013 indicated that there was no evidence of impact. The following organisations came to the same outcome UHB Incident Reporting Policy.		Y	Y	Y	Y	Take
	UHB policy for safe administration of medicine UHB incident form NMC (2002) Standards for the Administration of Medicines						account
	The following organisations found no evidence of impact .	I ≝			I		int
	Management of Extravasation of Cytotoxic Drugs in Children www.rcht.nhs.uk/DocumentsLibrary//PaediatricExtravasationPolicy .pdf - Cached Appendix 7.Initial Equality Impact Assessment Screening Form	Eliminating Disc		Promoting	oromoting Go	Encoura	of difference
	The following organisations found no evidence of impact	ᆵ		i ti	ŏ	ging	even
	This is not an exhaustive list but one can be made available upon request.	Discrimination a		g Equality of	Relation	Encouraging participation	n if it involves favourably*
Disability	A search undertaken on such 01/03/2013 indicated that there was no evidence of impact. The following organisations came to the same outcome Management of Extravasation of Cytotoxic Drugs in Children www.rcht.nhs.uk/DocumentsLibrary//PaediatricExtravasationPolicy .pdf - Cached Appendix 7.Initial Equality Impact Assessment Screening Form	and Eliminating Harassment	Y	ty of Opportunity	Promoting Good Relations and Positive Attitudes	y vation in Public Life	Y volves treating some individuals more ably*
	NMC (2002) Standards for the Administration of Medicines						

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I	NMC code of conduct (2008)					
	The above organisations found no evidence of impact . This is not an exhaustive list but one can be made available upon request.					
Gender	A search undertaken on such 01/03/2013 indicated that there was no evidence of impact. The following organisations came to the same outcome					
	Management of Extravasation of Cytotoxic Drugs in Children www.rcht.nhs.uk/DocumentsLibrary//PaediatricExtravasationPolicy .pdf - Cached Appendix 7.Initial Equality Impact Assessment Screening Form					
	Management of Extravasation Policy - Greater Manchester and www.gmccn.nhs.uk//Managementofextravasationversion13finalre viewJune2014.pdf - Cached Equality. Impact. Assessment: Insert date EIA completed. Key points. • How to manage an Procedure for immediate management of peripheral extravasation. 8 NMC code of conduct (2008)					
	The above organisations found no evidence of impact . This is not an exhaustive list but one can be made available upon request.					
Sexual Orientation	A search undertaken on such 01/03/2013 indicated that there was no evidence of impact. The following organisations came to the same outcome . Management of Extravasation of Cytotoxic Drugs in Children www.rcht.nhs.uk/DocumentsLibrary//PaediatricExtravasationPolicy .pdf - Cached	Y	Y	Y	Y	
	Appendix 7.Initial Equality Impact Assessment Screening Form21. Management of Extravasation of Cytotoxic Drugs in Children. Ratified: Review: 5					
	Management of Extravasation Policy - Greater Manchester and www.gmccn.nhs.uk//Managementofextravasationversion13finalre viewJune2014.pdf - Cached Equality. Impact. Assessment: Insert date EIA completed. Key points. • How to manage an Procedure for immediate					

I	management of peripheral extravasation. 8					
	Equality and Impact Assessment Database - Birmingham Children's 83.138.172.49//HCCEqualityImpactAssessmentDatabase%20- %20version1.pdf - Cached 1 Nov 2011 Equality Impact Assessment Database. Dept Policy & Procedures for transfer of young recognise & manage extravasation injuries					
	This is not an exhaustive list but one can be made available upon request.					
Age	A search undertaken on such 01/03/2013 indicated that there was no evidence of impact. The following organisations came to the same outcome.	Y	Y	Y	Y	
	 The management of intravenous infiltration injuries in infants and children Treadwell, Terry; Ostomy Wound Management, 2012 Jul; 58 (7): 40-4. A retrospective chart review of risk factors for extravasation among neonates receiving peripheral intravenous fluids. McCullen KL; Pieper B; Journal of Wound, Ostomy & Continence Nursing, 2006 Mar-Apr; 33 (2): 133-9. The following organisations found no evidence of impact. This is not an exhaustive list but one can be made available upon request 					
Religion or Belief	A search undertaken on such 01/03/2013 indicated that there was no evidence of impact. The following organisations came to the same outcome.	Y	Y	Y	Y	
	Management of Extravasation of Cytotoxic Drugs in Children www.rcht.nhs.uk/DocumentsLibrary//PaediatricExtravasationPolicy .pdf - Cached Appendix 7.Initial Equality Impact Assessment Screening Form					
	Management of Extravasation Policy - Greater Manchester and www.gmccn.nhs.uk//Managementofextravasationversion13finalre viewJune2014.pdf - Cached Equality. Impact. Assessment: Insert date EIA completed. Key points. • How to manage an Procedure for immediate management of peripheral extravasation. 8					

Reference No: 277

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Welsh Language	Equality and Impact Assessment Database - Birmingham Children's 83.138.172.49//HCCEqualityImpactAssessmentDatabase%20- %20version1.pdf - Cached 1 Nov 2011 Equality Impact Assessment Database. Dept Policy & Procedures for transfer of young recognise & manage extravasation injuries The following organisations found no evidence of impact This is not an exhaustive list but one can be made available upon request. No evidence but we would make the policy available in Welsh if requested Also booklets re: risk of extravasation would be available in Welsh		Y	Y	Υ	Y		
•	human right to: life; not to be tortured or treated in ndence; to freedom of thought, conscience and relig	_	radin	g way to i	respect for	private a	nd fam	nily life, home
Human Rights	This policy supports all the principles of the Human Rights Act but particularly the articles concerned with; not to be tortured or treated in an inhumane or degrading way; to respect for private and family life, home and correspondence; to freedom of thought, conscience and religion and to freedom of expression. It also takes account of the principles of the UN Convention on the Rights of the Child.							
	http://www.direct.gov.uk/en/Governmentcit	tizensa	ndrigh	ts/Yourrigh	tsandrespon	sibilities/D	G_40029	<u>)51</u>

^{*} This column relates only to Disability due to the specific requirement in the Equality Act 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)	Potential Impact: Nature, profile, scale, cost, numbers affected, significance. Insert one overall score (See Scoring Chart B)	Decision: Multiply 'evidence' score by 'potential impact' score. (See Scoring Chart C)
Race	2	1	2
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	2	0	0
Human Rights	1	0	0

Scoring Chart A: Evidence Available

	g Griant 7ti Evidence 7tvanasie
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:	Procedure for Managing an Extravasation
Organisation:	Cardiff and Vale University Health Board (UHB)
Name:	Julie Broughton,
Title:	Chemotherapy CNS for Children and Young People,
Department:	Paediatric Oncology and Haematology
Summary of	The Equality Impact Assessment undertaken, with the
Assessment:	exception of race identifies there is no impact on the
	equality groups identified. The potential impact on race
	will require the team to look at education/training issues
	as identified in the action plan
Decision to Proceed	No.
to Part B Equality Impact Assessment	The overwhelming impact is no impact or low 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 changes have been made as a result of the EqIA?	Additional information to be added to current information leaflets	To ensure awareness	Patients	Chemotherapy CNS Organisation	September 2013
2. Where a Policy may have differential impact on certain groups, state what arrangements are in place or are proposed to mitigate these impacts?	Education for staff on skin colour by identifying potential issues relating to extravasation and skin colour.	Safety of patients	Patients	All staff who administer IV medication	Meeting individual needs

3.	Justification: For when a policy may have adverse impact on certain groups, but there is good reason not to mitigate.	No adverse impact identified	N/A	N/A	N/A	N/A
4.	Describe any mitigating actions taken?	Not applicable	N/A	N/A	N/A	N/A
5.	Provide details of any actions planned or taken to promote equality.	Continue to ensure all members of staff are fully aware of the risks and options available to them We have included an equality statement into the guideline that clearly states that the policy is	To promote equality Cardiff & Vale UHB want to be explicit about its commitment to the equality agenda/legislatio n. To ensure that are policies are accessible to all	All staff Patients will be primary benefit which will impact positively on their families and/or patients as applicable	Chemotherapy Nurse Specialists, Lead Pharmacists, Consultants/Senior Medics	Training will be provided on induction, during Medicines Management training, through the medium of the Chemotherapy Awareness Study Day and The Chemotherapy Administration Workshop.

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	able to all as			
approp	oriate to			For review 2015
individ	ual, service			in line with The
area a	nd			Policy on the
organi	sational			Management of
circum	stances			Parenteral
				Cytotoxic
We wo	ould provide			Chemotherapy.
copies	s of the			Already
docum	nent in			completed within
alterna	ative formats,			the document
includi	ng Welsh if			
require	ed as via			There is no
appror	oriate and			timescale as this
would	meet patient			will be responsive
reques	st for			to individual need
interpr	eters, if			
require	ed.			

Date:	15/03/2013
Monitoring Arrangements:	For monitoring/review in line with the above policy. Auditing extravasation injuries. Assessing staff yearly on their knowledge of extravasation, within their yearly chemotherapy assessment Cytotoxic meeting quarterly, reviewing any UHB extravasation issues.
Review Date:	Review date 2016, in line with the above policy
Signature of all	
Parties:	Julie Broughton
	Chemotherapy CMS foe Children and Young People
	Sarah Rowland, Chemotherapy and IV Access CMS.