

Checklist for the Review and Approval of Procedural Documents

To be completed and attached to any document which guides practices when submitted to the appropriate committee for consideration and approval.

	Yes/No/ Unsure	Comments
Title of Document		WASTE MANAGEMENT POLICY
Could this policy be incorporated within an existing policy?	N	
Does this policy follow the style and format of the agreed template?	Y	
Has the front sheet been completed?	Y	
Is there an appropriate review date?	Y	
Does the contents page reflect the body of the document?	Y	
Are there measurable standards or KPIs to support the monitoring of compliance with and effectiveness of the document?	Y	
Are all appendices appropriate and/or applicable?	Y	
Have all appropriate stakeholders been consulted?	Y	
Has an Equality Impact Assessment been undertaken?	Y	
Is there a clear plan for implementation?	Y	
Has the document control sheet been completed?	Y	
Are key references cited and supporting documents referenced?	Y	
Does the document identify which Committee/Group will approve it?	Y	



Plans for communicating policy to – staff; practice membership; public (as appropriate)	Y	Staff intranet and via weekly newsletter
---	---	--

Individual Approval

If you are happy to approve this document, please sign and date it and forward to the chair of the committee/group where it will receive final approval.

Name	Caroline Hall Chief Finance Officer	Date	
Signature			

Committee Approval

If the committee is happy to approve this document, please sign and date it and forward copies to the person with responsibility for disseminating and implementing the document and the person who is responsible for maintaining the organisation’s database of approved documents.

Name	Cameron Ward Interim Accountable Officer	Date	29 November 2016
Signature			



WASTE MANAGEMENT POLICY

Version Number	2.0.
Ratified By	HVCCG EXEC TEAM
Date Ratified	November 2016
Name of Originator/Author	Amanda Yeates
Responsible Director	Chief Finance Officer
Staff Audience	All staff
Date Issued	November 2016
Next Review Date	November 2018

DOCUMENT CONTROL

Plan Version	Page	Details of amendment	Date	Author
1.0		New plan	Dec 14	AY
1.2		Review by Health & Safety Adviser – no changes suggested	Sep 14	AY
2.0	All	Substantial updates made to entire policy to fully incorporate the sustainable element of office efficiencies in relation to waste management (e.g. energy, water, paper etc)	Sep 16	AY



CONTENTS

Section		Page
1.	INTRODUCTION	6
2.	PURPOSE	6
3.	DEFINITIONS	7
4.	ROLES AND RESPONSIBILITIES	7
4.1	Roles and Responsibilities within the Organisation	7
4.2	Consultation and Communication with Stakeholders	9
5.	CONTENT	9
6.	MONITORING COMPLIANCE	14
7.	EDUCATION AND TRAINING	15
8.	REFERENCES	15
9.	ASSOCIATED DOCUMENTATION	15
Appendix 1:	EQUALITY IMPACT ASSESSMENT	16

1.	INTRODUCTION
	<p>This policy is designed to ensure that Herts Valleys Clinical Commissioning Group meets its obligations in relation to appropriate waste management.</p> <p>A sustainable health and care system works within the available environmental and social resources, protecting and improving health now and for future generations. This means working to reduce carbon emissions, minimising waste and pollution, making best use of scarce resources – building resilience to a changing climate and nurturing community strengths and assets. To help achieve this ambition, organisations are steered by a series of statutory, regulatory and policy requirements as well as high level guidance. They outline a number of things which organisations “must do” and some which they “should do.” Statutory requirements include:</p> <ul style="list-style-type: none"> • The Climate Change Act (2008) • DEFRA (1996) Waste Management, The Duty of Care, a Code of Practice • Environmental protection Act 1990 • Waste Minimisation Act 1998 • Waste Regulations 2011
2.	PURPOSE
	<p>The Waste Management policy has been produced as a best practice guide to the management of the CCG’s waste and the regulatory requirements that have to be adhered to, while instilling office etiquette to help the organisation achieve:</p> <ul style="list-style-type: none"> • Cost savings • Environmental benefits • Healthier and more productive working conditions • An enhanced corporate image and reputation <p>To achieve all of this will help to ensure a reduction in overall carbon emissions that will contribute to a positive overall impact on health expenditure, efficiency and equity. For this reason, the policy covers not only conventional types of waste disposal, but explores other opportunities for waste management, such as opportunities for energy efficiency, water saving and a reduction in paper usage.</p>



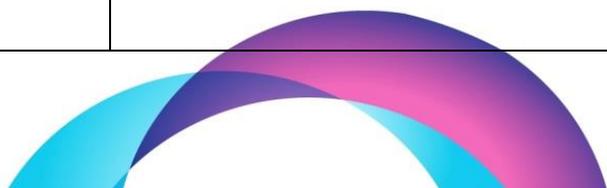
	<p>The policy objectives are to:</p> <ul style="list-style-type: none"> • Dispose of different types of waste in the most appropriate way • Apply the principles of reduce, reuse and recycle to all our behaviours • Reduce the amount of energy consumed by HVCCG • Actively raise carbon awareness at every level of the organisation • Engage and maximise the potential of employees to contribute to the success of the organisations Sustainable Development Management Plan and Good Corporate Citizen score • Assist staff to adopt sustainable behaviours into their daily working routines 																
3.	DEFINITIONS																
3.1	<p>Regulations encompass all waste produced in healthcare. Waste is broadly defined as any substance or object that is discarded and as such is subject to a number of regulatory requirements. Even if material is sent for recycling it is still regarded as waste and should be dealt with in accordance with the law. Waste regulation requires the classification of waste on the basis of its characteristics.</p> <p>Examples of non-clinical waste that might be produced within the health care sector:</p> <table border="1" data-bbox="231 1227 1329 1608"> <thead> <tr> <th data-bbox="231 1227 783 1267">Hazardous Waste</th> <th data-bbox="783 1227 1329 1267">Non-hazardous Waste</th> </tr> </thead> <tbody> <tr> <td data-bbox="231 1267 783 1344">Fluorescent tubes</td> <td data-bbox="783 1267 1329 1344">Domestic Waste (black bag or municipal waste)</td> </tr> <tr> <td data-bbox="231 1344 783 1384">Cleaning Chemicals</td> <td data-bbox="783 1344 1329 1384">Food Waste</td> </tr> <tr> <td data-bbox="231 1384 783 1424">Oils</td> <td data-bbox="783 1384 1329 1424">Offensive/Hygiene Waste</td> </tr> <tr> <td data-bbox="231 1424 783 1464">Batteries</td> <td data-bbox="783 1424 1329 1464">Packaging Wastes</td> </tr> <tr> <td data-bbox="231 1464 783 1541">Waste Electronics</td> <td data-bbox="783 1464 1329 1541">Recyclates (paper, glass, aluminium etc)</td> </tr> <tr> <td data-bbox="231 1541 783 1581">Asbestos</td> <td data-bbox="783 1541 1329 1581">Furniture</td> </tr> <tr> <td data-bbox="231 1581 783 1608">Solvents</td> <td data-bbox="783 1581 1329 1608">Paper and confidential waste</td> </tr> </tbody> </table> <p>However, waste can more widely be defined as “to use, or expend carelessly, extravagantly or to no purpose” in relation to energy, water and office supplies for example. There are also statutory requirements which apply to the NHS for the minimisation and monitoring of this aspect of waste.</p>	Hazardous Waste	Non-hazardous Waste	Fluorescent tubes	Domestic Waste (black bag or municipal waste)	Cleaning Chemicals	Food Waste	Oils	Offensive/Hygiene Waste	Batteries	Packaging Wastes	Waste Electronics	Recyclates (paper, glass, aluminium etc)	Asbestos	Furniture	Solvents	Paper and confidential waste
Hazardous Waste	Non-hazardous Waste																
Fluorescent tubes	Domestic Waste (black bag or municipal waste)																
Cleaning Chemicals	Food Waste																
Oils	Offensive/Hygiene Waste																
Batteries	Packaging Wastes																
Waste Electronics	Recyclates (paper, glass, aluminium etc)																
Asbestos	Furniture																
Solvents	Paper and confidential waste																
4.	ROLES AND RESPONSIBILITIES																
4.1	Roles and Responsibilities within the Organisation																
4.1.1	The Accountable Officer is responsible for ensuring that effective																



	<p>arrangements are in place for the disposal of CCG waste.</p>
<p>4.1.2</p>	<p>The Chief Finance Officer will be the Lead Director with delegated responsibility for all aspects of managing the disposal of waste.</p>
<p>4.1.3</p>	<p>The Head of Corporate Support will oversee the implementation of the Waste Management policy and the implementation, monitoring and review of HVCCG's Sustainable Development Management Plan. Through these activities, the CCG aims to ensure all waste is minimised and disposed of appropriately. This, in turn, will enable a continual reduction in its carbon emissions, contribute to reducing the impact of NHS carbon emissions on climate change, and ensure a more sustainable use of its resources.</p>
<p>4.1.4</p>	<p>The Office Manager will be responsible for:</p> <ul style="list-style-type: none"> • The cancelling of collections or any alterations to contracts in relation to general waste as and when the CCG's circumstances change. • Ensuring that all waste bins/bags are of appropriate type, colour and size • Ensuring that adequate supplies of waste bags and bins are provided to ensure that segregation takes place • Ensuring that waste bags and bins are properly identified and that staff are aware of the different categories of waste and how each category of waste should be disposed of • Ensuring that all waste bag holders are waterproof, pedal operated, secure, well-maintained and well cleaned. • Coordinating the disposal of electrical or large items • Ensuring that any appropriate risk assessments in relation to the handling of hazardous waste are carried out
<p>4.1.5</p>	<p>Line managers are responsible for ensuring that this policy is built into local processes and that there is ongoing compliance. All staff are responsible for adhering to the CCG's policy and ensuring that waste is segregated into the correct receptacle. Staff should also be familiar with the policy for waste management; should report dangerous situations to their line managers as soon as they are identified, and assist with the completion of an incident form. They should not handle any waste considered to be too heavy, or for which the correct method of disposal is unfamiliar. If in any doubt, the employee must contact their manager; should assist with the classification/segregation/recycling/reduction of waste and improvement of policy and safe working practices; should ensure that the nature and dangers of any waste to be carried are known by the collectors through proper segregation and clear labelling (where appropriate).</p>
<p>4.1.6</p>	<p>Staff are also responsible for ensuring that they demonstrate exemplar sustainable and low carbon behaviours within the workplace.</p>

4.2	Consultation and Communication with Stakeholders
	<p>The following stakeholders have been consulted in relation to this policy:</p> <ul style="list-style-type: none"> • HVCCG Exec Team • HVCCG Senior Leadership Team • Local Counter Fraud Officer • Office Manager • Sustainable Development Working Group • Staff Involvement Group
5.	CONTENT
5.1.	Waste Minimisation
	<p>The CCG recognises that waste minimisation is the cornerstone of an effective waste management policy. Waste minimisation should be considered as good management practice which will contribute to a safer, cleaner environment.</p> <p>In addition to this, the Climate Change Act 2008 is a legally binding long-term framework to cut carbon emissions and sets legally binding targets to reduce carbon emissions by 80% by 2050. All organisations need to demonstrate how this is being measured, monitored and managed.</p> <p>The values of the NHS to protect health and well-being means there is a need for the NHS to be a leading public sector exemplar. NHS organisations can, and should demonstrate to partner organisations and the population that healthy people depend on a healthy environment.</p> <p>For this reason, staff are initially asked to adhere to the following principles in order to reduce the total amount of waste produced by the CCG:</p>
5.1.1	Office Equipment
	<p>Office equipment is the fastest growing energy user in the business world. As most equipment is often left on when not being used, there are opportunities to make significant savings. All equipment should be switched off when not in use and power down modes enabled. Equipment lifespan will be extended and maintenance costs and risk of breakdown should be reduced. Where possible, seven day timers will be installed for communal equipment such as printers and photocopiers which will help to reduce the likelihood of machines being left on out of hours.</p> <p>Other ways to increase the efficiency of office equipment which should be</p>

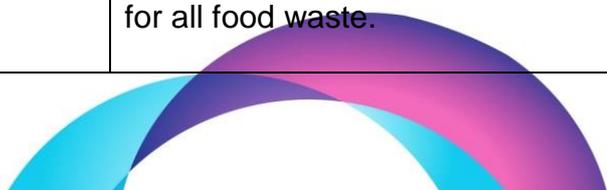
	<p>adopted are:</p> <ul style="list-style-type: none"> • Ensuring all monitors are switched off when users are away from their desk for more than an hour • Ensuring all monitors and base units are switched off at the end of the day • Enabling any standby features to limit energy consumption on all computers and monitors • Disabling screensavers • Printing in black and white only where appropriate. Small squares of colour can be used for RAG ratings if necessary, rather than colouring whole rows • Setting printing defaults to double sided • Printing in batches where possible to allow the machine to spend more time in standby than idling mode • Only switching on printers when required in the morning • Switching all printers off at the end of the day • Thinking carefully about the number of copies actually required so as to save on energy, paper and waste disposal costs • Reporting any faults with electrical equipment to the office manager for rectification as soon as possible
<p>5.1.2</p>	<p>Office Lighting</p> <p>Lighting is a significant energy cost in an office. There are many simple and inexpensive ways to reduce the energy consumption and costs associated with lighting, without compromising health, safety or comfort levels:</p> <ul style="list-style-type: none"> • All staff are responsible for switching off unnecessary lighting • Lights in unoccupied areas, including offices and meeting rooms, should be switched off • Dimmed, blackened, flickering or failed lights should be reported to the Office Manager so that arrangements for them to be replaced can be made as soon as possible
<p>5.1.3</p>	<p>Heating / Air Conditioning</p> <ul style="list-style-type: none"> • Staff should report areas of the office that are too hot, cold or draughty to the Office Manager. This will enable the Office Manager to look for trends and investigate particular problem areas. There may be maintenance issues which, if addressed, will make staff less likely to request the use of electric fans etc. • Staff should dress appropriately as to feel comfortable within their working environment i.e. they can add or remove a sweatshirt/jumper depending on the room temperature.



<p>5.1.4</p>	<p>Water</p> <p>The involvement of all staff at all levels in increasing water efficiency is imperative. Too often, the supply of water from a tap is taken for granted, and no thought given to the fact that water supplies are metered and that the volume of water used has to be paid for, in addition to the standing charges. Simple good housekeeping can save money and help the environment.</p> <ul style="list-style-type: none"> • The CCG will encourage water consciousness in all staff and encourage their sustained participation in continuing efforts to use water efficiently • Staff should report any water leaks or dripping taps promptly to the Office Manager so that appropriate action can be taken to eliminate these as soon as possible • Staff should not leave taps running (e.g. for washing up) but use the sink or the dishwasher available • Staff should use the water heater in the kitchen, rather than the kettle, wherever possible
<p>5.1.5</p>	<p>Purchasing</p> <p>To ensure that office equipment purchased is both manufactured in a sustainable way and contributes to a reduction in energy costs:</p> <ul style="list-style-type: none"> • Wherever possible, HVCCG will acquire energy efficient goods with “A-energy efficient” ratings and/or accredited to one of the four recognised energy labelling schemes • The environmental criteria of new office supplies will be considered and, wherever possible HVCCG will only buy more environmentally friendly products (e.g. recycled paper or reusable equipment, such as refillable pens, rechargeable batteries etc)
<p>5.1.6</p>	<p>Catering</p> <ul style="list-style-type: none"> • Choose re-usable alternatives to plastic/paper: plates, cutlery, cups • Avoid using individual sachets where possible • Bulk buy where possible as this is cost effective and reduces packaging. However, do not over order as waste can be generated by shelf life deterioration or expiry
<p>5.1.7</p>	<p>Paper</p> <p>There are many ways for the organisation to reduce their paper use and costs. It has been shown that reductions of 20% or more are possible in most offices. Potential savings are up to 10 times the purchasing costs of</p>



	<p>paper, through reducing the costs of storage, toner, printing, labour, postage and disposal. Some practical guidance for a general reduction in paper usage is:</p> <ul style="list-style-type: none"> • Think before you print – critically assess the need for a hard copy of the document. • Printing defaults should be set to double sided • The “booklet” setting which will print 2 sides onto one sheet of paper should be used where appropriate • Technology should be used – electronic mail, the internet, intranet and document scanners can radically reduce paper use, while also saving time and money. Laptops / ipads should be taken to meetings instead of paper. Ensure agendas and key documents are displayed on a projector at meetings so that attendees do not need to bring paper copies. • Recycle – collect the paper you use and then reuse where possible (e.g. for notepaper) or use the recycle bins when disposing of paper. Cut down on the use of post it notes by using scrap paper and paperclips. Reuse envelopes, paper folders, folder dividers and other office items as much as possible. • Use a whiteboard where possible, rather than a flip chart • The print preview function should be used to check the layout and style of the document before printing. Proof read the document on the screen before printing out
<p>5.2</p>	<p>However much effort is made to reduce generated waste, there will always be a requirement for disposal of the remainder. Within the CCG it is very unlikely that the waste generated will be an infectious hazard. Infectious waste is waste that has been generated from a person with signs and symptoms of infection and could be considered infectious or potentially infectious. Nevertheless, staff should assess the waste they produce for any other hazardous properties it may contain and dispose of it appropriately.</p>
<p>5.2.1</p>	<p>Domestic Waste</p> <p>Waste produced from any area of the CCG that is the same as household waste and not recyclable, i.e. non confidential office waste, kitchen waste, paper towels, packaging etc. should be placed in the small bins located around the office or appropriately labelled large bins.</p>
<p>5.2.2</p>	<p>Recycling</p> <p>Recycling containers are placed all around the general offices and are clearly labelled. These should be used for all plastic bottles, tins, non-confidential paper items and cardboard where appropriate. In addition, at the Hemel One office, a food waste bin is provided in the kitchen area which should be used for all food waste.</p>



	Toner cartridges should be recycled via the Corporate Support team at Hemel One. At the Apsley campus both toner cartridges and batteries should be recycled through the Reception team.
5.2.3	<p>Confidential Waste</p> <p>Confidential waste is either personal or sensitive information which must be disposed of securely, separately from everyday household waste. Confidential waste must be shredded, or contained securely in the lockable cabinets situated around the office, labelled for this purpose. It is more expensive to dispose of confidential waste than to recycle general waste paper and therefore the confidential waste bins should only be used for documents of a confidential nature. All other waste paper should be placed in the general recycling bins situated around the office.</p>
5.2.4	<p>Electrical and Electronic Equipment Waste (WEEE)</p> <p>Items included in this category should be either returned to the producer from whom it was purchased or be disposed of by the Officer Manager. Records of disposal of electrical and electronic equipment have to be made and kept for at least 2 years.</p> <p>Computers and other IT equipment should be returned to the IM&T department.</p> <p>Items such as fluorescent tubes, lighting equipment and electrical equipment which includes refrigerators or small/large appliances should be referred to the Office Manager.</p>
5.2.5	<p>Offensive Hygiene Waste</p> <p>This is non-infectious human waste (e.g. sanitary protection) which does not require specialist treatment or disposal, but which may cause offence to those coming into contact with it. It should be disposed of in the bins provided for this purpose within the office cloak/rest rooms.</p>
5.2.6	<p>Non-hazardous Bulk Waste</p> <p>Redundant and condemned furnishing should be considered for reuse prior to disposal, then referred to the Office Manager for removal if appropriate.</p> <p>The local council, agencies and community projects will be considered for the disposal of redundant bulky household waste from offices, e.g. furniture and white goods, where appropriate.</p>
5.2.7	<p>Aerosols</p> <p>Aerosols of normal household size may normally be disposed of as domestic</p>

	(black bag) waste, but any special instructions on the label must be taken into consideration.
5.2.8	Broken glass, containers and tins Broken glass needs to be securely bagged/boxed and disposed of via general waste.
5.2.9	Asbestos Waste
	The removal and disposal of waste known or suspected to contain asbestos material is covered by specific regulations. If there is any suspicion that material destined to be discarded contains asbestos, expert advice should immediately be sought immediately. Please refer to the HVCCG Asbestos policy for further information.
5.3	Spillages of Waste All spillages of waste must be cleared up as soon as possible. <ul style="list-style-type: none"> • Non-hazardous waste can be brushed up and re-bagged • Fluid spillages can be mopped up or soaked up if oil • Hazardous waste spillages – glass, tins etc brush up once appropriate measure have been taken to protect hands and dispose into the relevant receptacle • Broken sewers must be reported to the Office Manager in the first instance so that immediate action can be taken • Large liquid spillages e.g. burst water pipe should be reported to the Officer Manager or senior manager on call if out of hours, who will ensure the appropriate action is taken.
5.4	Frequency of Collection Arrangements for the collection of waste must meet the needs of waste producers', waste must not be allowed to collect to more than small amount.
6.	MONITORING COMPLIANCE
	The Head of Corporate Support will be responsible for ensuring this policy is reviewed every 2 years or as a result of changes to legislation or changes to CCG procedures. Key Performance Indicators which could be used to monitor effectiveness of waste disposal are as follows: <ul style="list-style-type: none"> • Number and type of adverse incidents

	<ul style="list-style-type: none"> • Number and type of Serious Untoward Incidents • Results of Health and Safety Audits <p>Compliance with this policy will also be measured via the quarterly environmental dashboard, which measures the organisations' carbon footprint, to include specific information about energy, water and paper usage.</p>
7.	EDUCATION AND TRAINING
	<p>A policy for the safe and efficient management of waste cannot be effective unless it is applied carefully, consistently and universally. All CCG employees have been made aware of this policy via a policy briefing and should adhere to it.</p> <p>Sustainability training has been provided to existing CCG staff and new staff will receive training in relation to sustainability, as well as being made aware of the CCG's waste management policy, as part of the induction process.</p> <p>Participation in regular national campaigns (e.g. NHS Sustainability Day, Green Office Week, Climate Change Week and Energy Saving Week) will be used to motivate staff to review their own energy management practices and give them a sense of ownership in improving their own work areas.</p> <p>HVCCG will use its website, staff intranet, newsletter and other means to increase awareness and to advise of new or amended policies, procedures and guidelines relating to sustainability.</p>
8.	REFERENCES
	<ul style="list-style-type: none"> • Control of Substances Hazardous to Health (COSHH) Regulations 2002 • Environmental Protection Act (1990) Section 34 • Environmental Protection (1991) Duty of Care Regulations • Hazardous Waste Regulations 2005 • Health and Safety at Work Act (1974) • Directive 2012/19/EU of the European Parliament and of the Council of 4 July 2012 on Waste, Electrical and Electronic Equipment (WEEE)
9.	ASSOCIATED DOCUMENTATION
	<ul style="list-style-type: none"> • HVCCG Health and Safety Policy • HVCCG Risk Management Strategy • HVCCG Incident Reporting policy and procedure • HVCCG Asbestos Policy • HVCCG Control of Substances Hazardous to Health policy





Appendix 1 - HVCCG Equality & Quality Inclusion Analysis Form

Step 1:

<p>Name of 'Policy or function' – this may relate to:</p> <ul style="list-style-type: none">• Waste Management Policy	<ul style="list-style-type: none">• Purpose• Aims• Objectives <p>Please refer to section 2 of the policy.</p>
--	---

Step 2:

<p>Test for relevance:</p> <ul style="list-style-type: none">• Will this help to deliver one or more of the aims of the Equality Act 2010?• Will this have a potential impact on the nine characteristic groups and/or others as described in the guidance? <p>Does the above 'Policy' have any relevance to equality? Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> Please give your reasons for your selection.</p> <p><small>Waste Management Policy v.2.0 November 2016</small></p>



This policy will not have any impact on the nine characteristic groups.

If you have selected yes, please complete section 3-8 below.

Step 3:

Engagement, involvement and consultation undertaken		PSED Due regard to:	1. Eliminating unlawful discrimination, harassment and victimisation			2. Advancing equality of opportunity between people			3. Fostering good relation between people			Please provide details of evidence considered, service, workforce, research (national or local), demographic etc.
Internal	<input type="checkbox"/>											
External	<input type="checkbox"/>											
Provide details		Equality Characteristic Groups	-ve	N	+ve	-ve	N	+ve	-ve	N	+ve	
		Age										

	Disability											
	Gender											
	Gender Reassignment											
	Marriage & Civil Partnerships											
	Pregnancy & Maternity											
	Race or Ethnicity											
	Religion or Belief											
	Sexual Orientation											
	Other groups (please list)											

Step 4

Engagement, involvement and consultation undertaken		Quality				Please provide details of evidence considered, service, workforce, research (national or local), demographic etc.
Internal	<input type="checkbox"/>					
External	<input type="checkbox"/>	Patient/Programmes	-ve	N	+ve	
		Patient Experience – will it: Impact on the experience of patients and service users? Impact on patient choice?				
		Patient Safety – will it: Impact on safety? Impact on preventable harm? Impact on the risk of healthcare acquired infection? Impact on clinical workforce capability, care and skills?				
		Clinical effectiveness – will it: Meet evidence based practice/NICE				



		guidance?				
		Impact on clinical leadership?				
		Include systems for monitoring clinical quality supported by good information?				



Step 5:

Have you identified any gaps or potential negative impact from the above? If yes, please state:			
Do you plan any further engagements? Yes <input type="checkbox"/> No <input type="checkbox"/>		Do you require further information or data to complete the analysis/actions? Yes <input type="checkbox"/> No <input type="checkbox"/>	
Any actions to be undertaken (including mitigation) regarding the negative impact:			
Action	Outcome	Lead	Date for completion
Any changes made as a result of this assessment?		YES <input type="checkbox"/>	NO <input type="checkbox"/>
Please provide brief description of changes			

Following information (internal use only)

Step 6: Key individuals

Analysis conducted by:	Lead Name:	Job Title:	Contact Details:



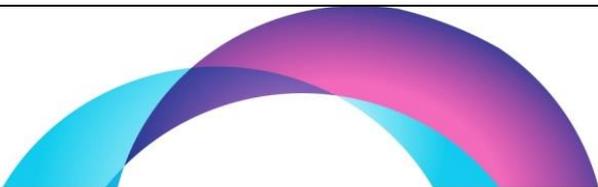
Other key contributors involved:			
---	--	--	--

Step 7:

Conclusion and/or recommendations:

Step 8:

Date form completed: Sep 2016	Clinical/Managerial approval: Alan Warren	Job Title/Directorate: Chief Financial Officer	Date: Sep 16	Signature: Alan Warren
Does a Committee or Senior Leadership Team need to be informed about this IEQIA? Yes <input type="checkbox"/> No <input type="checkbox"/>		Do you need to undertake monitoring/review Yes <input type="checkbox"/> No <input type="checkbox"/> If yes, date of Review:		Date of publication:
Completed copy to be forwarded to Quality Team (name)				





Questions to consider when carrying out an EQIA

In completing the EQIA you may find our annual publication of equality information along with local health inequality data from our website and/or intranet useful, as well as Hertfordshire County Council and National charities and EHRC.

When completing this EQIA please consider the following in a proportionate and relevant way:

Equality monitoring

- In line with our legal obligations, you may wish to consider how you will monitor our service users and/or workforce data by the nine equality characteristic groups.

Access to services and information

- If an eligibility criteria is applicable, please ensure that this is not discriminative unless it can be justified.
- Please consider if our buildings are physically accessible to everyone or would some people such as those with a physical disability encounter barriers? If so, what mitigation steps have you undertaken?
- In some cases information about our policies, and/or publications may need to be available in Braille, large print, easy read or on a tape or in a different community language. Do images in our publications reflect the diverse population that we serve?

Respect, dignity and cultural awareness

- Please consider that our policies always treat service users, carers, members of the public and staff with respect and dignity and that, where appropriate, we take account of people's beliefs, languages and dietary needs.

Definitions of the relevant protected characteristic groups:



Age

Definition: Age refers to a particular age group.

If your service is open to people of all ages, how will you make sure it is used by people of all ages?

Disability

A person has a disability if they have:

- a) A physical or mental impairment, and
- b) The impairment has a substantial and long term adverse effect on the person's ability to carry out normal day to day activities

Race

Race includes:

- a) Colour
- b) Nationality
- c) Ethnic or national origins

How will you make sure that people from a wide range of ethnic backgrounds use your service? (NB you may find it helpful to look at this section alongside the section on Religion and Belief as the actions are closely related).



Religion or Belief

- 
- a) Religion means any religion and a reference to religion including a reference to a lack of religion
 - b) Belief means any religious or philosophical beliefs and a reference to belief includes a reference to lack of belief

Sex

Definition: A reference to a person who has a particular protected characteristic is a reference to a man or to a woman.

Sexual orientation

Sexual orientation means a person's sexual orientation towards:

- a) Persons of the same sex
- b) Persons of the opposite sex, or
- c) Persons of either sex

Gender reassignment

A person has a protected characteristic of gender reassignment if the person is proposing to undergo/is undergoing or has undergone a process (or part of a process) for the purpose of reassigning the person's sex, by changing physiological or other attributes of sex.

Pregnancy and maternity

Pregnancy is the condition of being pregnant or expecting a baby. Maternity refers to the period after the birth, and is linked to maternity leave in the employment context. In the non-work context, protection against maternity discrimination is for 26 weeks after giving birth, and this includes treating a woman unfavourably because she is breastfeeding.



Marriage and civil partnership

A person has the protected characteristic of marriage and civil partnership if the person is married or is a civil partner.

Public Sector Duty regarding social/economic inequalities

An authority to which this section applies must, when making decisions of a strategic nature about how to exercise its functions, have due regard to the desirability of exercising them in a way that is designed to reduce the inequalities of outcome which result from socio-economic disadvantage.

Quality considerations

- Patient Safety:
 - provision of information, data quality improvement, clinical coding,
 - serious incidents, incidents, never events, complaints, PALs enquiries
 - medicines management
 - equipment management
 - safe environment
 - management of Healthcare Associated Infections (HCAI)
- Clinical effectiveness of care:
 - NHS Outcomes Framework: how will the business case impact on the delivery of the five domains?
 - Preventing people from dying prematurely
 - Enhancing quality of life
 - Helping people recover from episodes of ill health or following injury

- 
- Ensuring people have a positive experience of care
 - Treating and caring for people in a safe environment and protecting them from avoidable harm:
 - standards applied by relevant professional bodies i.e. mandatory training, qualifications, CPD, revalidation & accreditation, CRB
 - Compliance with regulatory bodies
 - Compliance with relevant guidance / appraisals from NICE
 - Application of national standards and outcome measures
 - Participation in relevant clinical networks, national and local clinical audit programmes
 - Service development and improvement
 - Patient experience:
 - How is the service user engaged in planning and service design?
 - How are they listened too?
 - How do they get feedback on the service
 - How do we ensure equity of access equality and non-discrimination?