

## Equality, Good Relations and Human Rights Screening Template

**\*\*\*Completed Screening Templates are public documents and will be posted on the Trust's website\*\*\***

See [Guidance Notes](#) for further background information on the relevant legislation and for help in answering the questions on this template (follow the links).

### **(1) Information about the Policy/Proposal**

(1.1)

Guideline statement for the safe prescribing, handling and administration of Systemic Anti-Cancer Therapies (SACT)

(1.2) Is this a new, existing or revised policy/proposal?

This is a new guideline

(1.3) What is it trying to achieve (intended aims/outcomes)?

Purpose

This guideline is intended to safeguard patients and staff by defining best practice for all disciplines involved in the delivery of SACT for malignant disease.

Objectives

To ensure the responsibilities and actions required by personnel involved in the handling, prescribing and administration of hazardous drugs are clear.

- Staff will be familiar with the appropriate personal protective equipment appropriate for particular tasks.
- Prescribers will be familiar with their responsibilities in relation to prescribing hazardous drugs
- Pharmacists will be familiar with their responsibilities in relation prescription verification, preparation, handling, storage and disposal of hazardous drugs
- Nurses will be aware of their responsibilities in relation handling, storage administration and disposal of hazardous drugs.



(1.4) Are there any Section 75 categories (see list in 3.1) which might be expected to benefit from the intended policy/proposal?

All categories outlined in Section 75 will benefit from the policy

(1.5) Who owns and who implements the policy/proposal - where does it originate, for example DHSSPS, HSCB?

This guideline was developed through the Northern Ireland Cancer Network (NICaN) and has been adopted by the SEHSCT. Implementation is the responsibility of all staff involved in the delivery of SACT to oncology and haematology patients.

(1.6) Are there any factors that could contribute to/detract from the intended aim/outcome of the policy/proposal/decision? (Financial, legislative or other constraints?)

There are no specific key constraints that could detract from the intended aim or outcome.

(1.7) Who are the internal and external stakeholders (actual or potential) that the policy/proposal/decision could impact upon? (staff, service users, other public sector organisations, , trade unions, professional bodies, independent sector, voluntary and community groups etc)

- Patients
- MacDermott Chemotherapy staff
- Oncology Consultants and Medical Staff
- Ward 6A
- Trust Cancer Managers
- Outpatient Staff

(1.8) Other policies with a bearing on this policy/proposal (for example regional policies) - what are they and who owns them?

- Guideline for the Management of Systemic Anti-Cancer Treatment (SACT) Hypersensitivity (NICaN)
- Guidelines for the use of granulocyte colony stimulating factor (GSCF) in adult oncology & haematology patients
- Guidelines for the checking of Pregnancy status before SACT
- Primary Care Guidance for Patients within 6 weeks of Systemic Anti-Cancer Therapy (SACT)
- Final Generic SACT CMG protocol
- NICaN Regional Antiemetic Guidelines for Adult Patients Receiving Systemic Anti-Cancer Treatment and/or Radiotherapy
- Final NICaN Prioritisation for SACT

## (2) Available evidence

Evidence to help inform the screening process may take many forms. What evidence/information (both qualitative and quantitative) have you gathered to inform this policy? Specify details for relevant Section 75 categories.

### *Details of evidence/information*

- Safe Handling of Hazardous Drugs. HSE Information Sheet MISC615.
- SHPA Standards of Practice for the Safe Handling of Hazardous Drugs in Pharmacy Departments. Aus J Hospital Pharm. 1999;29(2):108-116.
- COSHH Regulations NI 2003
- COSHH Approved Code of Practice (ACOP) (6th Edition) 2013
- COSHH (NI): A brief guide to the Regulations. What you need to know about Control of Substances Hazardous to Health Regulations (Northern Ireland) 2003 (COSHH (NI)).

For complete of references and bibliography see relevant section in guideline.

## (3) Needs, experiences and priorities

(3.1) Taking into account the information above what are the different needs, experiences and priorities of each of the Section 75 categories and for both service users and staff.

<b>Category</b>	<b>Needs, experiences and priorities</b>	
	<b>Service users</b>	<b>Staff</b>
<b>Gender</b>	<b>Female</b> 51.25% <b>Male</b> 48.75%	<b>Female</b> 83% <b>Male</b> 17%
<b>Age</b>	All users of this protocol are over 16  Patients less than 16 years of age require separate guidance  80% of service users in SE Trust area are over 16	<b>16-24</b> 5 % <b>25-34</b> 30% <b>35-44</b> 25% <b>45-54</b> 25% <b>55-64</b> 14% <b>65+</b> 1% .
<b>Religion</b>	<b>Protestant</b> 50.52% <b>Roman Catholic</b> 27.90% <b>Other</b> 0.82% <b>None</b> 14.65% <b>Not Known</b> 6.11%	<b>Protestant</b> 43% <b>Roman Catholic</b> 21% <b>Other/Not Known</b> 36%
<b>Political Opinion</b>	Not collected  Local council voting preferences are considered with 2 out of 3 council areas return a unionist majority	Broadly Unionist 3% Broadly Nationalist 10% Do not wish to answer 13% Other 6% Not known 68% Local council voting preferences are considered with 2 out of 3 council areas return a unionist majority
<b>Marital Status</b>	<b>Single</b> 31.7% <b>Married</b> 51.64% <b>Divorced</b> 6.01% <b>Widowed</b> 6.85% <b>Separated</b> 3.70% <b>Other</b> 0.1%	<b>Single</b> 32.71% <b>Married</b> 61.13% <b>Divorced</b> 2.25% <b>Widowed</b> 0.43% <b>Separated</b> 1.04% <b>Other</b> 0.5% <b>Not known</b> 1.94%
<b>Dependent Status</b>	Households with dependent children 33.38%	<b>Child or children</b> 18% <b>Dependant older</b> 3% <b>A person with disability</b> 2% <b>None</b> 12% <b>Other/not known</b> 65%
<b>Disability</b>	Household with one or more persons with a limiting long term illness 19.82%	<b>Not known</b> 67% <b>No</b> 31% <b>Yes</b> 1%

<b>Ethnicity</b>	<b>Black African</b> 0.1% <b>Irish Traveller</b> 0.04% <b>Bangladeshi</b> 0.06% <b>Pakistani</b> 0.04% <b>Black Caribbean</b> 0.03% <b>Mixed Ethnic Group</b> 0.35% <b>Chinese</b> 0.26 % <b>White</b> 98.50% <b>Indian</b> 0.25% <b>Other</b> 0.3 % <b>Filipino</b> 0.06%	<b>Black African</b> 0.1% <b>Irish Traveller</b> 0.08% <b>Bangladeshi</b> 0.03% <b>Pakistani</b> 0.03% <b>Black Caribbean</b> 0.03% <b>Mixed Ethnic Group</b> 0.13% <b>Chinese</b> 0.18% <b>White</b> 35.26% <b>Indian</b> 0.66% <b>Other</b> 0.61% <b>Filipino</b> 0.45% <b>Not known</b> 62.47%
<b>Sexual Orientation</b>	Estimated 10% of population is LGBT equates to estimated 168,527 of the NI population i.e. possibly one in 10 in terms of clientele/service user– Data source Rainbow Project July 2008	<b>Opposite sex</b> 29.9% <b>Do not wish to answer</b> 1.18% <b>Not known</b> 67.9% <b>LGBT</b> 0.48%

(3.2) Provide details of how you have involved stakeholders, views of colleagues, service users and staff etc when screening this policy/proposal.

This guideline has been developed in consultation with the Northern Ireland Cancer Network Pharmacy Group, NICaN SACT Clinical Reference Group & NICaN SACT Nurses Group and and has been adopted by the SEHSCT. Views of colleagues, service users and staff have been considered during the development of the guideline.

#### (4) Screening Questions

You now have to assess whether the impact of the policy/proposal is major, minor or none. You will need to make an informed judgement based on the information you have gathered.

**(4.1) What is the likely impact of equality of opportunity for those affected by this policy/proposal, for each of the Section 75 equality categories?**

<b>Section 75 category</b>	<b>Details of policy/proposal impact</b>		<b>Level of impact? Minor/major/none</b>
	<b>Services Users</b>	<b>Staff</b>	
<b>Gender</b>	<b>Female</b> 51.25% <b>Male</b> 48.75%	<b>Female</b> 83% <b>Male</b> 17%	None/None
<b>Age</b>	All users of this protocol are over 1 Patients less than 16 years of age require separate guidance 80% of service users in SE	<b>16-24</b> 5 % <b>25-34</b> 30% <b>35-44</b> 25% <b>45-54</b> 25% <b>55-64</b> 14% <b>65+</b> 1%	None/None

	Trust area are over 16	.	
<b>Religion</b>	<b>Protestant</b> 50.52% <b>Roman Catholic</b> 27.90% <b>Other</b> 0.82% <b>None</b> 14.65% <b>Not Known</b> 6.11%	<b>Protestant</b> 43% <b>Roman Catholic</b> 21% <b>Other/Not Known</b> 36%	None/None
<b>Political Opinion</b>	Not collected  Local council voting preferences are considered with  2 out of 3 council areas return a unionist majority	Broadly Unionist 3% Broadly Nationalist 10% Do not wish to answer 13% Other 6% Not known 68%  Local council voting preferences are considered with 2 out of 3 council areas return a unionist majority	None/None
<b>Marital Status</b>	<b>Single</b> 31.7% <b>Married</b> 51.64% <b>Divorced</b> 6.01% <b>Widowed</b> 6.85% <b>Separated</b> 3.70% <b>Other</b> 0.1%	<b>Single</b> 32.71% <b>Married</b> 61.13% <b>Divorced</b> 2.25% <b>Widowed</b> 0.43% <b>Separated</b> 1.04% <b>Other</b> 0.5% <b>Not known</b> 1.94%	None/None
<b>Dependent Status</b>	Households with dependent children 33.38%	<b>Child or children</b> 18% <b>Dependant older</b> 3% <b>A person with disability</b> 2% <b>None</b> 12% <b>Other/not known</b> 65%	None/None
<b>Disability</b>	Household with one or more persons with a limiting long term illness 19.82%	<b>Not known</b> 67% <b>No</b> 31% <b>Yes</b> 1%	None/None
<b>Ethnicity</b>	<b>Black African Black African</b> 0.1% <b>Irish Traveller</b> 0.04% <b>Bangladeshi</b> 0.06% <b>Pakistani</b> 0.04% <b>Black Caribbean</b> 0.03% <b>Mixed Ethnic Group</b> 0.35% <b>Chinese</b> 0.26 % <b>White</b> 98.50% <b>Indian</b> 0.25% <b>Other</b> 0.3 % <b>Filipino</b> 0.06%	<b>Black African</b> 0.1% <b>Irish Traveller</b> 0.08% <b>Bangladeshi</b> 0.03% <b>Pakistani</b> 0.03% <b>Black Caribbean</b> 0.03% <b>Mixed Ethnic Group</b> 0.13% <b>Chinese</b> 0.18% <b>White</b> 35.26% <b>Indian</b> 0.66% <b>Other</b> 0.61% <b>Filipino</b> 0.45% <b>Not known</b> 62.47%	None/None
<b>Sexual Orientation</b>	Estimated 10% of population is LGBT equates to estimated 168,527 of the NI population i.e. possibly one in 10 in terms of	<b>Opposite sex</b> 29.9% <b>Do not wish to answer</b> 1.18% <b>Not known</b> 67.9% <b>LGBT</b> 0.48%	None/None

	clientele/service user– Data source Rainbow Project July 2008		
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**(4.2) Are there opportunities to better promote equality of opportunity for people within Section 75 equality categories?**

<b>Section 75 category</b>	<b>Please provide details</b>
Gender	The Trust remains committed to embracing diversity, promoting good relations and challenging sectarianism and racism to ensure service users and staff enjoy equality of opportunity and access to services in a welcoming and safe environment.  The Trust has an ongoing strategy of staff training and engagement
Age	As above
Religion	As above
Political Opinion	As above
Marital Status	As above
Dependent Status	As above
Disability	As above
Ethnicity	As above
Sexual Orientation	As above

**(4.3) To what extent is the policy/proposal likely to impact on good relations between people of different religious belief, political opinion or racial group? minor/major/none**

<b>Good relations</b>	<b>Details of policy/proposal impact</b>	<b>Level of impact Minor/major/none</b>
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<b>category</b>		
Religious belief	N/A	None
Political opinion	N/A	None
Racial group	The information will be provided in alternate languages and formats on request	None

<b>(4.4) Are there opportunities to better promote good relations between people of different religious belief, political opinion or racial group?</b>	
<b>Good relations category</b>	<b>Please provide details</b>
Religious belief	No
Political opinion	No
Racial group	No - The trust provides telephone and face to face interpreting services as requested

## **(5) Consideration of Disability Duties**

<b>(5.1) How does the policy/proposal encourage disabled people to participate in public life and promote positive attitudes towards disabled people?</b>
<p>The policy enables disabled people to access the same services as able bodied people.</p> <ul style="list-style-type: none"> <li>• The Trust Disability Action Plan 2018 – 2023 promotes these two duties</li> <li>• Consideration has been given to the profile of staff and/or service users affected by the proposal including those with a disability</li> <li>• No specific issues were identified in this proposal re disability duties</li> </ul>



## (6) Consideration of Human Rights

(6.1) Does the policy/proposal affect anyone's Human Rights?

Complete for each of the articles

Article	Positive impact	Negative impact = human right interfered with or restricted	Neutral impact
Article 2 – Right to life			X
Article 3 – Right to freedom from torture, inhuman or degrading treatment or punishment			X
Article 4 – Right to freedom from slavery, servitude & forced or compulsory labour			X
Article 5 – Right to liberty & security of person			X
Article 6 – Right to a fair & public trial within a reasonable time			X
Article 7 – Right to freedom from retrospective criminal law & no punishment without law			X
Article 8 – Right to respect for private & family life, home and correspondence.			X
Article 9 – Right to freedom of thought, conscience & religion			X
Article 10 – Right to freedom of expression			X
Article 11 – Right to freedom of assembly & association			X
Article 12 – Right to marry & found a family			X
Article 14 – Prohibition of discrimination in the enjoyment of the convention rights			X
1 <sup>st</sup> protocol Article 1 – Right to a peaceful enjoyment of possessions & protection of property			X
1 <sup>st</sup> protocol Article 2 – Right of access to education			X

**Please note: If you have identified potential negative impact in relation to any of the Articles in the table above, speak to your line manager and/or Equality Unit. It may also be necessary to seek legal advice.**

(6.2) Please outline any actions you will take to promote awareness of human rights and evidence that human rights have been taken into consideration in decision making processes.

Human rights awareness is provided through:

Trust corporate induction

E learning

Update sessions

Face to face

## (7) Screening Decision

**(7.1) Given the answers in Section 4, how would you categorise the impacts of this policy/proposal?**

Major impact	
Minor impact	
No impact	X

**(7.2) Do you consider the policy/proposal needs to be subjected to ongoing screening**

Yes	
No	X

**(7.3) Do you think the policy/proposal should be subject to and Equality Impact Assessment (EQIA)?**

Yes	
No	X

(7.4) Please give reasons for your decision and detail any mitigation considered.

The guideline has been written to meet the needs of all nine equality categories. The Trust will monitor the implementation and impact of the guideline and review formally in September 2020.

## **(8) Monitoring**

Please detail how you will monitor the effect of the policy/proposal for equality of opportunity and good relations, disability duties and human rights?

- Monitoring patient complaints/compliments/ IR1 forms
- Feedback from staff
- Feedback from User forum and patient satisfaction surveys

Approved Lead Officer: Caroline Lynas

Position: Service Improvement Lead

Date: 30/7/19

Policy/proposal screened by: Caroline Lynas

**Please forward completed schedule to:**

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