

Screening Outcome Report 1st October 2016 to 31st December 2016

Introduction

Section 75 of the Northern Ireland Act 1998 requires the Trust, when carrying out its functions in relation to Northern Ireland, to have due regard to the need to promote equality of opportunity between nine categories of persons, namely:

- between persons of different religious belief, political opinion, racial group, age, marital status or sexual orientation;
- between men and women generally;
- between persons with a disability and persons without; and
- between persons with dependants and persons without.

Without prejudice to its obligations above, the Trust must also have regard to the desirability of promoting good relations between persons of different religious belief, political opinion or racial group.

The Equality Scheme outlines how we propose to fulfil our statutory duties under Section 75. Within the Scheme, the Trust gave a commitment to apply the screening methodology below to all new and revised policies and if necessary to subject policies to equality impact assessment. (EQIA)

Screening Methodology

For new or revised policies/proposals the Trust will consider the following four screening questions as per ECNI guidance:-

- What is the likely impact of equality of opportunity for those affected by this policy/proposal, for each of the Section 75 equality categories?
- Are there opportunities to better promote equality of opportunity for people within Section 75 equality categories?
- To what extent is the policy/proposal likely to impact on good relations between people of different religious belief, political opinion or racial group?
- Are there opportunities to better promote good relations between people of different religious belief, political opinion or racial group?

In keeping with the Trust's commitments in its Equality Scheme the Trust has applied the above screening criteria to new policies and proposals.

The screening process is used to identify which policies are likely to have an impact on equality of opportunity and/or good relations. Screening assesses the likely impact of the policy as major, minor or none.

If it is decided that a policy/proposal is likely to have major issues relating to equality, it is then necessary to consider carrying out a more detailed exercise called an equality impact assessment.

This screening report outlines the screening outcomes from the date of formal approval of the Trust's revised Equality Scheme i.e. 14th September 2011 to 31st March 2012 and will be produced each quarter thereafter.

Communication & Engagement

In order to carry out our functions there is a need to continue to effectively engage and work collaboratively with a wide range of stakeholders including Trust staff, Trade Unions, service users, carers, commissioners, voluntary/community sector, public representatives and independent providers.

The Trust is committed to promoting personal and public involvement in all its activities. The development of new policies and proposals will be supported by effective engagement processes to ensure that staff, service users and all interested parties are fully involved. Planning for, and delivering safe, clinically effective and cost effective services requires close collaboration at many levels.

If you have any queries about this document, and its availability in alternative formats (including Braille, disk and audio cassette, and in minority languages to meet the needs of those who are not fluent in English) then please contact:

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Outcome of Screening

The screening outcomes are outlined below. Four possible outcomes are recorded:

- 1 The policy has been '**screened in**' for equality impact assessment;
- 2 The policy has been '**screened out**' with mitigation or an alternative policy proposed to be adopted;
- 3 The policy has been '**screened out**' without mitigation or an alternative policy proposed to be adopted.
- 4 The policy will be **subjected to ongoing screening**. For more detailed strategies or policies that are to be put in place through a series of stages, screening should be considered at various times during implementation.

Description of Policy or Proposal	Screening Outcome	Reason for Reaching Screening Outcome
<p><u>Information Governance Policy</u></p> <p>This is a new policy which aims to inform staff of their roles and responsibilities in line with Trust policy/procedure/strategy</p>	<p>Out</p>	<p>The Policy was deemed to have no impact. The Trust undertakes to monitor the effect of the policy for equality of opportunity and good relations, disability duties and human rights by:</p> <ul style="list-style-type: none"> • Monitor levels and severity of complaints received with regard to the processing of client/staff records. • Data on compliance with SAR is included in the Quarterly Directorate Performance Review meetings. • Ensure publicity materials about the Trust's process are current and available to all. • In line with the legislation provide assistance to requestors when they are submitting requests under subject access.

Description of Policy or Proposal	Screening Outcome	Reason for Reaching Screening Outcome
		<ul style="list-style-type: none"> Attainment of the DHSSPS Information Governance Framework and, Information Management Controls Assurance Standard.
<p><u>Verification of Life Extinct Policy</u></p> <p>This is a revised policy providing medical and appropriately trained nursing staff guidance on a consistent and standardised approach to the verification of life extinct.</p>	Out	<p>The Policy was deemed to have no impact. The policy promotes equality throughout all of the section 75 categories as it aims to achieve a consistent approach to the Verification of Life Extinct and the recording of same.</p>
<p><u>Estates Control of Contractors Policy</u></p> <p>This is a revised policy aiming to appropriately manage contractors brought onto Trust facilities by the Estates Department</p>	Out	<p>The Policy was deemed to have no impact. The Trust undertakes to monitor the effect of the policy for equality of opportunity and good relations, disability duties and human rights by meeting regularly – Estates and contractors and key worker feedback.</p>
<p><u>The Safe Use and Maintenance of Ice Machines and Water Coolers</u></p> <p>This is to replace Ice Machine Policy and includes water coolers. The policy aims to give guidance on the production of safe ice cooled water</p>	Out	<p>The Policy was deemed to have no impact.</p>
<p><u>Infant Feeding Policy</u></p> <p>This is a revised policy which aims to ensure all staff within the Trust understand their role and responsibilities in supporting expectant and new mothers and their partners to feed and care for their baby in ways which support optimum health and well-being.</p>	Out	<p>The Policy was deemed to have no impact and was screened out. The Trust undertakes to monitor the effect of the policy for equality of opportunity and good relations, disability duties and human rights by reviewing data, auditing and complaints/compliments.</p>
<p><u>Ward Order Communications (WOC) Protocol</u></p> <p>This is a revised policy which aims to provide direction to staff as to how the WOC system should be used for the ordering and receipt of Laboratory test requests – the</p>	Out	<p>The Policy was deemed to have no impact and was screened out. The Trust undertakes to monitor the effect of the policy for equality of opportunity and good relations, disability duties and human rights by incidents/complaints raised will be investigated and auctioned as per</p>

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successful use of WOC system depends on the adherence to the protocol.		Trust procedure.
<p><u>Policy on the management of pain in adults</u></p> <p>This is a new policy which aims to provide guidance to staff of the best practice for the assessment, planning and evaluation of pain in adults.</p>	Out	The Policy was deemed to have no impact and was screened out. The Trust undertakes to monitor the policy and review the policy in 3 years.
<p><u>Guideline for Medicines Reconciliation</u></p> <p>This is a new policy aiming to:</p> <ul style="list-style-type: none"> • Ensure individual staff members understand their role and responsibilities with regards to medicines reconciliation. • Promote patient safety by ensuring any discrepancies in a patients list of medication are noticed, acted upon and resolved thus preventing an adverse drug event. • Set standards for medicines reconciliation which can be used for audit and subsequent quality improvement • Promote good practice and the development of safe systems of work. 	Out	The Policy was deemed to have no impact and was screened out.
<p><u>Policy on the Management of an adult with a tracheostomy within the Ulster Hospital</u></p> <p>This is a new policy aiming to provide direction to staff on the management of an adult patient with a traceostomy within the Ulster Hospital</p>	Out	The Policy was deemed to have no impact. The Trust undertakes to monitor the effect of the policy for equality of opportunity and good relations, disability duties and human rights by monitoring IR1 forms.
<p><u>Carbon Management Policy</u></p> <p>This is a revised policy aiming to reduce the environmental effects due to SET energy usage and reduce financial payments to external utilities suppliers.</p>	Out	The Policy was deemed to have no impact. The Trust undertakes to monitor the effect of the policy for equality of opportunity and good relations, disability duties and human rights by reviewing complaints and feedback from key worker.

Description of Policy or Proposal	Screening Outcome	Reason for Reaching Screening Outcome
<p><u>Code of Practice on Protecting the Confidentiality of Service User Information</u></p> <p>This is a revised policy informing staff about the appropriate and inappropriate sharing of personal/persona sensitive information in line with the DHSSPS Code of Practice on Protecting the Confidentiality of Service User Information.</p>	Out	<p>The Policy was deemed to have no impact. The Trust undertakes to monitor the effect of the policy for equality of opportunity and good relations, disability duties and human rights by:</p> <ul style="list-style-type: none"> • Monitor levels and severity of complaints received with regard to the processing of client/staff records. • Data on compliance with SAR is included in the Quarterly Directorate Performance Review meetings. • Ensure publicity materials about the Trust's process are current and available to all. • In line with the legislation provide assistance to requestors when they are submitting requests under subject access.
<p><u>Policy for the Management of Regulated Vocational Qualifications</u></p> <p>This replaces the policy for the Management of Qualifications on the Qualifications Credit Framework (QCF)</p>	Out	<p>The Policy was deemed to have no impact. The Trust undertakes to monitor the effect of the policy for equality of opportunity and good relations, disability duties and human rights:</p> <ul style="list-style-type: none"> • Registration forms have details of age, gender, any disabilities, nationality and ethnicity. These details are required for registering candidates with the Awarding Body • Evaluations will be reviewed and recorded from each candidate. • Feedback will be sought from Line Managers • Regular meetings with Assessors and Internal Quality Assurers • Regular Regional Meetings • Regular Nursing & Midwifery Workforce/Learning & Development Forum meetings • External Verifier monitoring visits on behalf of Awarding Body/Organisation(s)

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<p><u>Interim medical devices policy and operational guidelines</u></p> <p>This is a revised policy which aims to provide direction to managers and staff on the use management and purchase of medical devices</p>	Out	The Policy was deemed to have no impact and was screened out. The Trust undertakes to monitor the effect of the policy for equality of opportunity and good relations, disability duties and human rights by Monitoring IR1 forms/NIRAC incidents and compliance with PALS procedures
<p><u>Non-Medical Prescribing Policy</u></p> <p>This is a revised policy detailing the procedures and requirement for non-medical prescribers within the Trust</p>	Out	The Policy was deemed to have no impact and was screened out.
<p><u>Policy for patient flow throughout the acute sites within the South Eastern Trust</u></p> <p>This is an existing policy providing direction to staff on how to effectively manage in-patient beds to ensure patients have a timely admission to, efficient journey through and prompt discharge from hospital</p>	Out	The Policy was deemed to have no impact and was screened out. The Policy is written to meet the needs of all section 75 categories being admitted to the Trust The Trust will screen the Policy again at next review June 2019.

Description of Policy or Proposal	Screening Outcome	Reason for Reaching Screening Outcome
<p><u>Policy for Requesting Portable Imaging Examinations</u></p> <p>This is a revised policy which defines the acceptable criteria for requesting a portable imaging examination for medical professionals who are authorised to request imaging examinations. Adherence will ensure unnecessary portable imaging is undertaken and therefore benefit patients and staff in relation to radiation dose.</p>	Out	<p>The Policy was deemed to have no impact and was screened out. The Trust undertakes to monitor the effect of the policy for equality of opportunity and good relations, disability duties and human rights:</p> <ul style="list-style-type: none"> • Requests for portable imaging examinations will be subject to audit one month after the implementation of this policy and every six months thereafter. • Policy has a review date
<p><u>Policy for the Safe Use, Handling & Disposal of Sharps</u></p> <p>This is a revised policy offering operational guidelines to staff on safe handling of sharps in practice.</p>	Out	<p>The Policy was deemed to have no impact and was screened out. The Policy will continue to be monitored through IR1 notifications.</p>
<p><u>Policy for the Prescribing, Monitoring and Dispensing of Oral / Subcutaneous* Methotrexate and Administration of Oral Methotrexate</u></p> <p>This is a revised policy setting out requirements for prescribing, dispensing, administration and monitoring of methotrexate with the intention of meeting DHSSPSNI recommendations and reducing risk of adverse incidents.</p>	Out	<p>The Policy was deemed to have no impact and was screened out.</p>

Description of Policy or Proposal	Screening Outcome	Reason for Reaching Screening Outcome
<p><u>Further Education & Assistance Policy</u></p> <p>This is a revised policy. The purpose is to provide managers with standards to ensure there is a fair, equitable and consistent approach to the education, training and development of staff</p>	Out	The Policy was deemed to have no impact and was screened out. The Policy will continue to be monitored through selection/recruitment and complains/compliments.
<p><u>Policy for the Provision of Hospitality and Entertainment</u></p> <p>This is a revised policy to set direction on the provision of hospitality</p>	Out	The Policy was deemed to have no impact and was screened out. The Policy will continue to be monitored through incident monitoring.
<p><u>Internet Policy V3.1</u></p> <p>This is a revised policy setting out managerial and staff responsibilities in terms of Internet usage. This policy should be read in conjunction with related Trust ICT Policies.</p>	Out	The Policy was deemed to have no impact and was screened out. Monitoring of this policy will be via software and systems in place that monitor and record all Internet usage. The Trust ICT Department will also monitor issues emanating from Trust Complaints/ Compliments / Grievances/ Disciplinary Hearings.
<p><u>Volunteer Policy</u></p> <p>This is a revised policy aiming to provide clear guidance on the involvement of volunteers within the Trust.</p>	Out	The Policy was deemed to have a minor impact and is written to meet the needs of all volunteers and the Trust commits to monitoring the policy for any potential adverse impact.

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<p><u>Management of acute upper and lower gastrointestinal bleeding for patients 16 and over</u></p> <p>This is a new policy providing recommendations based on current evidence for best practice in the management of acute upper and lower GI bleeding</p>	Out	The Policy was deemed to have no impact and was screened out. Monitoring of this policy will be via feedback from staff.
<p><u>Guideline Statement for Respiratory Health Surveillance</u></p> <p>This Policy assists the Trust comply with Statutory Regulations and to take the steps necessary to minimise any adverse health effects and reduce potential liability.</p>	Out	The Policy was deemed to have no impact and was screened out. This Policy will be reviewed on a 2 yearly basis and updated as appropriate.
<p><u>Guidelines for the use of the CME McKINLEY T34 syringe pump for adult palliative patients</u></p> <p>This is an existing policy providing guidance on the use of CME McKinley T34 syringe pump</p>	Out	The Policy guideline has been written to meet the needs of all section 75 categories and no impact has been identified
<p><u>Guidelines for the Control of Multi-resistant Gram Negative Bacteria</u></p> <p>This is a revised policy informing staff of the care management principles of patients with MRGN Bacteria</p>	Out	The Policy was deemed to have no impact and was screened out. Once implemented this will be monitored in respect of complaints and follow up of patient management.

Description of Policy or Proposal	Screening Outcome	Reason for Reaching Screening Outcome
<p><u>Guideline statement: Prevention and Control of Tuberculosis among Health Care Workers</u></p> <p>The purpose of this Guideline Statement is to assist the South Eastern Health & Social Care Trust to comply with current DHSSPS / NICE Guidelines on the Management of Healthcare Workers Infected with TB.</p>	Out	The Policy was deemed to have no impact and was screened out.
<p><u>Governance Arrangements in Social Care and Social work</u></p> <p>This is a revised policy advising on the safe and effective care arrangements in Social Care</p>	Out	The Policy was deemed to have no impact and was screened out. Monitoring of this policy will be via appointments and complaints.
<p><u>Protocol for the Supply of Over-labelled Discharge Medication Directly from Wards</u></p> <p>Revised from local protocols that have been in use in various wards for some time. One Trust wide protocol is now required to allow over-labelled medication to be supplied to patients on discharge against a discharge prescription at ward level. This avoids the delay in waiting for the discharge prescription to be supplied by pharmacy. This will help expedite discharges at ward level.</p>	Out	The Policy was deemed to have no impact and was screened out.

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<p><u>NICaN Acute Oncology Clinical Guidelines</u></p> <p>This is a new policy produced to support the diagnosis and treatment of acute oncological complications.</p>	Out	<p>The Policy was deemed to have no impact and was screened out. Monitoring this policy will be via complaints/compliments/IR1 forms, feedback from staff, user forum and patient satisfaction surveys.</p>
<p><u>Policy on Spirometry (adults)</u></p> <p>This is an existing policy to ensure that staff involved in performing spirometry adequately meets the training requirements and adhere to recommendations on performing spirometry.</p>	Out	<p>The Policy was deemed to have no impact and was screened out. Self-monitoring by staff performing the procedure will be carried out.</p>
<p><u>Management of Transient Ischaemic Attack (TIA)</u></p> <p>This is an existing policy to provide evidence based guidance on the management of patients following Transient Ischaemic Attack (TIA) in the Trust</p>	Out	<p>The Policy was deemed to have no impact and was screened out. Monitoring will be via:</p> <ul style="list-style-type: none"> • Clinical audit undertaken on a regular basis. • Monitoring of overall compliance by Stroke Team. • Staff feedback. • Compliments and complaints.
<p><u>Local Rules for Diagnostic Use of X-Rays in: The Cardiac Catheterisation Laboratory (Cath Lab)</u></p> <p>This is a revised policy providing a written and approved scheme of work relating to the use of ionising radiation in the Cardiac Catheterisation Laboratory on the Ulster hospital site</p>	Out	<p>The Policy was deemed to have a minor impact and was screened out. The Trust undertakes to monitor the effect of the policy for equality of opportunity and good relations, disability duties and human rights by:</p> <ul style="list-style-type: none"> • Policy has a review date • Imaging equipment Q.A programme in place including checks on protective clothing, safety features and warning lights • Controlled area and equipment handover document • Monitoring of

Description of Policy or Proposal	Screening Outcome	Reason for Reaching Screening Outcome
		Complaints/IRI's/Compliments <ul style="list-style-type: none"> • User satisfaction surveys • Personal dosimetry monitoring • Pre-pregnancy examination check forms in use • Patients holding forms in use • Information for female employees who are pregnant or thinking of becoming pregnant • Dose audits undertaken • Staff supervision • Training records in new equipment • Record Keeping-radiation protection surveys/equipment performance surveys/patient dosimetry surveys • Records of maintenance and modification logs
<p><u>HIV and Post Exposure Prophylaxis Following Sexual Exposure (PEPSE)</u></p> <p>This is a new Policy to provide safe and effective care to patients in a timely manner; to ensure decisions made by clinical staff are based on the best evidence and that patients who require PEPSE receive it in a timely manner in accordance with recommended guidance and to ensure this procedure links with guidance outlined in the other Trust policies</p>	Out	<p>The Policy was deemed to have no impact and was screened out. This policy has been written to meet the needs of all the patients and clients who may require administration of PEPSE. This includes the needs of all Equality categories. The policy will also contribute to the normalisation of testing for all categories, including gender and sexual orientation. The Policy will be monitored on a regular basis and will be review in 3 years. Any identified impact will be addressed as the policy is implemented.</p>
<p><u>Protocol for Supra-pubic catheter change</u></p> <p>This is an existing Policy to provide guidance for nursing staff on supra pubic changes</p>	Out	<p>The Policy was deemed to have no impact and was screened out. Guidelines will be updated every 3 years and will be adapted to reflect best practice / evidence base available at that time.</p>

Description of Policy or Proposal	Screening Outcome	Reason for Reaching Screening Outcome
<p><u>Guidelines for the management of central venous access devices in children and young people. Regional GAIN guidelines</u></p> <p>To provide healthcare workers involved in the management of children and young people to consistently manage central venous access devices in this patient group across healthcare settings.</p>	Out	<p>The Guidance was deemed to have a low impact and was screened out. The Guideline is there to assist staff to carry out a risk assessment in their particular clinical setting in order to make reasonable adjustments for patients in relation to the management of the device which has been inserted for treatment purposes.</p>
<p><u>Prescribing, Administration and Monitoring of Gentamicin in Neonates SET/PtCtCare (261) 2016</u></p> <p>This is a new Policy. All gentamicin prescriptions for neonates must be prescribed on the Neonatal Network NI regional gentamicin IV prescription chart for neonates.</p>	Out	<p>This Policy was deemed to have no impact and was screened out.</p>
<p><u>South Eastern Health & Social Care Trust Policy and Procedural Arrangements relating to the use of Display Screen Equipment (DSE)</u></p> <p>This is a revised Policy to assist the Trust to comply with the requirement of the Health & Safety at Work Order (NI) 1978, as amended, the Display Screen Equipment Regulations 1992, as amended and associated legislation and HSE Guidelines.</p>	Out	<p>This Policy was deemed to have no impact and was screened out.</p> <p>This policy does not exclude any particular groups and has been developed through consultation with representatives from a wide cross section of staff.</p> <p>This Policy is not expected to have a negative impact on equality, good relation and Human Rights</p> <p>This Policy is devised to promote greater safety of staff in all of the equality categories</p>

Description of Policy or Proposal	Screening Outcome	Reason for Reaching Screening Outcome
<p><u>Interventional Procedures</u></p> <p>This is a revised Policy. The introduction of new interventional procedures into clinical practice requires a system of controls which protects patients from procedures being performed by unskilled practitioners. Northern Ireland now participates in the NICE Interventional Procedures Programme and new arrangements have been developed for HSC healthcare professionals intending to undertake new interventional procedures</p>	Out	This Policy was deemed to have no impact and was screened out.
<p><u>Chaperone Policy</u></p> <p>This is a revised Policy establishing guidance for the use of chaperones and procedures that should be in place for consultations, examinations, investigations and treatment that are intimate and/or could be misinterpreted. It is intended to safeguard <u>both</u> patients and staff of all ages, gender, race and cultural background</p>	Out	This Policy was deemed to have no impact and was screened out.
<p><u>Policy for the Development & Management of Trustwide and Service Specific Policies, Procedures, Guidelines & Protocols</u></p> <p>This is a revised Policy providing guidance on the policy process</p>	Out	This Policy was deemed to have no impact and was screened out. The policy aims is to provide direction on policy writing.

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<p><u>Care of Children being managed by Acute Adult Services Policy & Resource Pack</u></p> <p>This is a revised policy to ensure Children and young people up to the age of 18 years who are admitted to the adult wards should receive the same consideration with regard to their rights and safety as those admitted to paediatric wards</p>	Out	This Policy was deemed to have no impact and was screened out.
<p><u>Endorsing the Standards for the Use of Abbreviations in the Trust</u></p> <p>This is a new Policy. The overarching aim of the document is to offer regional direction on an agreed approach in the use of 'appropriate abbreviations' that will ensure recordkeeping practice remains contemporaneous and does not compromise patient safety</p>	Out	This Policy was deemed to have no impact and was screened out.
<p><u>Decontamination of Reusable Surgical Instruments</u></p> <p>This is a revised Policy aiming to guide staff on the consistent handling and use of reusable instruments</p>	Out	This Policy was deemed to have no impact and was screened out.
<p><u>Protocol for the use of Tracer Labels to Supply Pharmacy Only/General Sales List Medication at Ward Level</u></p> <p>This is a revised Policy. To allow Pharmacy only or General Sales List medication that is already sufficiently labelled with directions by the manufacturer, to be supplied to patients against a discharge prescription at ward level.</p>	Out	This Policy was deemed to have no impact and was screened out.

Description of Policy or Proposal	Screening Outcome	Reason for Reaching Screening Outcome
<p><u>Assessed Year in Employment, Protocol for Social Workers and Managers</u></p> <p>This is a revised policy aiming to achieve safe and effective care arrangements in Social Care.</p>	Out	<p>This Policy was deemed to have no impact and was screened out. The Trust undertakes to monitor the effect of the policy for equality of opportunity and good relations, disability duties and human rights by monitoring of appointments and complaints.</p>
<p><u>Endoscopy Training Policy for Medical Staff and Nurse Endoscopists</u></p> <p>This is revised policy to outline training, appraisal and assessment requirements for endoscopy trainees.</p>	Out	<p>This Policy was deemed to have no impact and was screened out. The Trust undertakes to monitor the effect of the policy for equality of opportunity and good relations, disability duties and human rights by feedback from staff.</p>
<p><u>Guideline for Safe Handling of Laundry</u></p> <p>This is a new policy providing guidance to all staff who are involved in handling laundry.</p>	Out	<p>This Policy was deemed to have no impact and was screened out. The Trust undertakes to monitor the effect of the policy for equality of opportunity and good relations, disability duties and human rights by any relevant matters raised with be included and review at time of guideline review or sooner if appropriate These will be identified for implementation monitoring and IR1s incident reports across the organisation.</p>
<p><u>Guidelines for the Prevention of Exposure to Aspergillus Spores during the Construction and Renovation of Healthcare Facilities</u></p> <p>This policy details the primary processes in place to ensure that, as a minimum standard, the Trust complies with its statutory duties and safe systems of work are applied. It should be operated in conjunction with any current</p>	Out	<p>This Policy was deemed to have no impact and was screened out. The Trust undertakes to monitor the effect of the policy for equality of opportunity and good relations, disability duties and human rights by</p> <ul style="list-style-type: none"> • Holding meetings regularly between Estates and Infection Prevention & Control Team personnel. • Key worker feedback

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Operational Policies and Procedures as operated by the Estates Department and contractors.		