



Initial Screening Tool

Title of policy/service/function/procedure/ programme/ or strategy being assessed: Resuscitation Policy OP039

Is it new or revised

(If revised, please attach a copy of the original Equality Impact Assessment.)

Senior Manager Responsible : Senior Clinical Advisor

Department Medical Directorate

Section _____

Equality Impact Assessment Screening Team

Name	Department	Role
David Whitmore	Medical Directorate	Senior Clinical Adviser
Mark Whitbread	Medical Directorate	Clinical Practice Manager
Mark Faulkner	Medical Directorate	Clinical Adviser
Neil Thompson	Medical Directorate	Assistant Medical Director
Daryl Mohammed	Medical Directorate	Assistant Medical Director
Douglas Chamberlain	Uni of Wales / UK Resus Council	External Expert Adviser

Date of screening 05/2010

Title: Equality Impact Assessment Guidance and Form	Version: 3.0
Date: 16/03/2010	Owner: Equality and Inclusion



Please summarise below the aims and objectives of this policy/service/function etc. including any intended outcomes.

The key objective of this Policy is to ensure that: clinical staff have the ability to provide resuscitation whether it is basic life support (BLS) intermediate life support (ILS) or advanced life support (ALS) to a patient who has collapsed in cardiac or respiratory arrest. This is essential if the mortality and morbidity following such situations is to be reduced.

Please state below who is intended to benefit from this policy/service/function etc. and in what way.

clinical staff and patients

Please state in the table below whether the policy/service/function etc. could have any potential impact on any of the equality strand groups, whether service users, staff or other stakeholders

Equality Strand Group	Is there likely to be a positive or neutral impact in regard to:	If the impact is adverse, can this be justified on the grounds of promoting equality of opportunity for an equality strand group or for another reason?
Age	Neutral	
Disability	Neutral	
Gender	Neutral	
Race	Neutral	
Religion or Belief	Neutral	
Sexual Orientation	Neutral	

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Please provide and summarise below any relevant evidence for your declaration above – this could include for example the results of specific consultations, complaints or compliments, customer satisfaction or other surveys, service monitoring and take-up, comments from stakeholders and demographic data.

The policy follows nationally and internationally accredited resuscitation guidelines, which have been wholly adopted by JRCALC.

Are there any gaps in the evidence you have which make it difficult for you to determine whether there would be an adverse impact?

No Yes

If yes, please state below how you intend to acquire this evidence and your timescales for doing so.

If you have identified a positive or negative potential impact for any equality strand group, which is not legal or justifiable, then you must complete a full Equality Impact Assessment. Please insert below any issues you have identified/recommendations for the full Equality Impact Assessment.

If you have only identified a neutral or positive impact on any equality strand group then no further action is required, other than having your Director sign off this form, a copy stored on the shared drive and sent to Communications for publication on the Trust's website.

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Name of Director: Fionna Moore (Medical Director)

Signature:

Date: 27/05/10

A handwritten signature in black ink, appearing to read 'Fionna Moore', with a long horizontal flourish underneath.

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