

Equality Analysis Register for the Period 1.4.2018 – 31.3.2019

Policy No. (if applicable)	Name of policy, strategy, procedure or area being assessed	Aim of policy	Accountable Director [title]	Responsible person/dept/assessment carried out by [title]	Date of Screening
HR09	Personal Files Policy	This policy covers the details and information staff and managers will require in relation to the management of staff personal files/ This interim review is in line with GDPR requirements/	Director of Workforce	Head of Workforce and Organisational Development	29/03/2019
HR03	Disciplinary Policy	To ensure that there is a systematic approach to addressing behaviour that falls below the required standards of conduct and that any disciplinary action is fairly and consistently applied	Director of HR and OD	HR	27/03/2019
OP95	Introduction of New Clinical Techniques and Interventional Procedures	This policy describes the review and approval process to be applied by all staff prior to the introduction of a new clinical technique or interventional procedure into practice/	Medical Director	Healthcare Governance Manager – Division 1	26/03/2019
HR05	Equality of Opportunity Policy	Overarching policy statement	Director of Workforce	Head of Workforce and Organisational Development	26/03/2019
IP 12	Standard Precautions	The aim of this policy is to provide guidance on the appropriate management of Standard Precautions for Infection Prevention to prevent exposure of staff /patients to infectious agents including blood and body fluids and cross contamination	Director of Infection Prevention and Control Chief Nurse	Infection Prevention Nurse	12/03/2019
CP11	Resuscitation Policy	To provide direction and guidance for the planning and implementation of a high quality and robust resuscitation service to the organisation/	Chief Nurse	Head of Clinical Skills and Resuscitation Service	09/03/2019
OP 103	VIP/Celebrity Visitors to the Trust	<ul style="list-style-type: none"> • Provides structured guidance to RWT staff in order to safeguard children, adults and staff/ • Outlines the roles and responsibilities within the organisation • Identifies key terminology for staff 	Chief Nurse		01/03/2019

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		<ul style="list-style-type: none"> Stipulates safeguarding processes to ensure safe practice Identifies key documents that all RWT staff should be aware of and to use/refer to within their practice Provides information on points of contact for staff to access when a VIP/celebrity visits the Trust 			
	Palliative & End-of-Life Care Strategy	Sets out the Royal Wolverhampton NHS Trust's strategy for palliative and end-of-life care, outlining the strategic objectives for care delivery	Chief Nurse	Consultant in Palliative Medicine	19/02/2019
TBC	Waiting List Initiative Policy	The Waiting List Initiative Policy outlines the the process and authorisation procedure for the planning, booking, monitoring and payment of staff who undertake Waiting List Initiatives/	Chief Operating Officer	Head of Resourcing	14/02/2019
OP08	Complaints Management Policy	To obtain views of service users and enable them to raise concerns	Chief Nurse	Head of Patient Experience and Public Involvement	08/02/2019
OP12	IT Security Policy	The purpose of the information security policy is to protect the security of the Trust's information assets and to ensure all staff are made aware of good practice surrounding the security of corporate and personal information/	Chief Financial Officer	IT Security Manager	17/01/2019
N/A	Medical Handover Policy	This policy describes the processes and procedures used for effective and efficient handover of patients between individuals or teams of doctors/	Medical Director	Divisional Medical Director	14/12/2018
CP26	Blood Transfusion Policy	To provide direction for all staff involved in the blood transfusion process, ensuring the highest standards and a consistent approach to safe transfusion practice across the organisation	Chief Operating Officer	Lead Transfusion Practitioner	17/10/2018
	Cleaning Strategy	The Trust requires effective use of cleaning services to ensure the hospital is safe for patients, visitors and staff and has a duty of care to ensure that cleaning standards are maintained and do not become a vehicle for infection/ The aim of the	Director of Infection Prevention/Chief Nurse	Head of Hotel Services	29/08/2018

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		policy is to have in place, throughout the Trust, a standardised approach to Cleaning Standards/ A Cleaning Strategy is the requirement of the Code of Practice for the Prevention and Control of Healthcare Acquired Infection/			
	Management of Dysphagia Policy	Ensure safety of patients with dysphagia, ensure safe practice by staff when working with patients with dysphagia	Chief Nurse	Service Manager – Speech & Language Therapy	22/08/2018
IP07	Viral Haemorrhagic Fever Policy	This policy directs what RWT staff should do on the identification, risk assessment, control of infection and options for isolation of viral hemorrhagic fever in the UK/ This now includes isolation of VHF infection within a High Level Isolation Unit (HLIU)/	Chief Nurse	Nurse Manager Infection Prevention Team	08/08/2018
HR	Leave for Official Duties Policy	To ensure there is a systematic approach to approving leave of absence from the Trust and ensuring that it is fairly and consistently applied	Director of Workforce	De3puty HR Manager Division2	26/07/2018
CP56	Management of Patients receiving sedation	To maintain patient safety during sedation	Medical Director	Consultant Antitheist	18/06/2018
CP24	Bone Bank Policy	To provide the framework of required procedures for the harvesting of femoral heads during primary hip replacement surgery and the provision to recipient patients/	Medical Director	Bone Bank Coordinator	08/06/2018
OP 104	Business Continuity Management	The aim of the policy is to establish a framework for the Trust Business Continuity Management process/ It sets out the identification, management and responsibilities to enhance the Trust resilience and deliver essential services in the event of a severe disruption/emergency situation/	Accountable Emergency Officer/Chief Operating Officer	Head of Emergency Planning and Business Continuity	30/05/2018
OP96	Pressure Injury (ulcer) Prevention and	To prevent patient from developing pressure injuries	Chief Nursing Officer	Tissue viability Lead Nurse	25/05/2018

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	Management for Adult & Paediatric Patients in Hospital and Community Services				
CP62	Organ Donation Policy	The aim of the policy is to provide a framework to ensure that any invasively ventilated patient has the potential to become an organ donor when treatment is withdrawn prior to their death/	Medical Director	Consultant in Anaesthesia in Intensive Care Medicine	30/04/2018
OP106	Safeguarding Children Supervision Policy	This policy outlines the types and process of Safeguarding Children Supervision and the requirements for individuals/ staff groups to participate in appropriately agreed levels of Safeguarding Supervision/	Chief Nurse	Safeguarding Children Lead	19/04/2018
	Education and Training Strategy	To detail the expectations around Education and training provision for RWT staff	Medical Director	Head of Education & Training	06/04/2018
No number	Female Genital Mutilation Policy	This policy has been designed to address the trusts responsibilities and processes in respect of FGM and safeguarding against FGM in accordance with local and national guidance and legislation by adopting a care, protect and prevent approach/ To provide appropriate guidance for staff in the event that a woman or girl is identified as having undergone FGM or is at risk of FGM/	Director of Nursing	Safeguarding Adults Nurse	