

# Dudley Group of Hospitals: Equality Impact Assessment

## Step 2 - Screening Tool

Please complete the following when screening your policy or service for potential impact on equality groups.

<b>1. Name of lead</b>	Nahla Farid
Contact number & email	Anaesthetic department ext. 2076 nahla.farid@dgh.nhs.uk
Directorate or Department and Team	Anaesthetic department
<b>2. Name of service or policy</b>	Guideline for the management of postoperative nausea and vomiting (PONV) in day case surgery unit
Is this a new or existing piece of work?	Update
<b>3. Target audience</b> e.g. patients and public; NHS staff; professional health organisations; voluntary organisation; internal staff	All medical staff and nursing staff involved with day case surgery
<b>4. What are the aims of the service/policy?</b> i.e. what does the policy or service hope to achieve?	To manage postoperative nausea and vomiting in day case surgery to improve patient satisfaction and unplanned hospital admission
<b>5. Does any part of this service or policy have the potential to have an adverse impact based on a person's age, disability, ethnic origin, gender, religion/belief or sexual orientation?</b> <i>If No, please provide brief reasons.</i>	No, the guideline does not involve any steps with the potential to affect patients' age, sex, gender, disability, ethnic origin, religion/belief or sexual orientation.
<b>6. Are there any factors that could lead to different outcomes or satisfaction levels based on people's age, disability, ethnic origin, gender, religion/belief or sexual orientation?</b> <b>If No, please provide brief reasons.</b>	No. the screening tool and management plan does not affect patients', age, sex, gender, disability, ethnic origin, religion/belief or sexual orientation.

If you have answered yes to any of questions 5 or 6, you must now complete a full Equality Impact Assessment using the proforma provided by the Trust.

If you have answered No to all of the above questions, a full assessment is not required. Please complete the following sign-off section and send a copy of this screening to your Head of Service, Matron or Head of Department as appropriate **and** to Liz Abbiss, Head of Communications at Trust HQ.

**Name of person completing this screening: Dr Nahla Farid**

**Job Title: Consultant**

**Date sent to Head of Service, Matron or Head of department: 18/05/2013**

**Date sent to Head of Communications, Trust HQ: July 2013**

For advice relating to completion of this screening, please contact Human Resources on 456111, ext 3251