

Equality Impact Assessment (EqIA) Screening Template

The Equality Impact Assessment Screening Template is a short exercise that involves looking at the overall proposal and deciding if it is relevant to the Public Sector Equality Duty, and other key areas.

The questions in the Screening Template below will help you to decide if the proposal is relevant to the Equality Act 2010 and whether a detailed EqIA is required. The key question is whether the proposal is likely to an impact (either positive or negative) on any of the protected characteristics.

Quite often, the answer may not be obvious, and staff, service-user or provider information will need to be considered to make a preliminary judgment.

There is no one size fits all approach, but the screening process is designed to help fully consider the circumstances and to inform evidence-based decisions.

Note: If the proposal is of a significant nature and it is apparent from the outset that a full Equality Impact Assessment (EqIA) will be required, then it is not necessary to complete the Screening Template and you can proceed to complete the full EqIA.

What to do:

In general, the following questions all feed into whether an EqIA is required:

- How many people is the proposal likely to affect?
- How significant is its impact?
- Does it relate to an area where there are known inequalities?

At this initial screening stage, the point is to try to assess obvious negative or positive impacts.

You will need to provide sufficient information within the template to justify the assessment of impact.

If a negative/adverse impact has been identified (actual or potential) during completion of the screening tool, a full EqIA must be undertaken.

If no negative / adverse impacts arise from the proposal, it is not necessary to undertake a full EqIA however, the decision and justification must be clearly recorded.

On completion of the Screening Template, staff should:

- Check that all sections of the template are fully completed.
- Ensure that the Project/Policy owner has signed off the Screening Template.
- Send a copy of the completed template along with the related policy to the Diversity & Inclusion Team for them to review – email this to Inclusion.hdd@wales.nhs.uk

Date of commencement of Screening Assessment:	01/11/2023
Screening conducted by (name and email address	Sarah Burton, Specialist Midwife for Public health. Sarah.burton3@wales.nhs.uk
Title of programme, policy or project being screened:	Substance Misuse in Pregnancy Guideline

Description of the programme/policy/project being screened (including key aims and objectives)

A guideline to ensure all women/ Birthing person who have a historical or current history of substance misuse a receive:

- Appropriate referrals to outside agencies including drug and alcohol services and safeguarding.
- Appropriate Multi-disciplinary and care planning and communication with all agencies specific to the woman/birthing person individual needs and that of their baby.
- Appropriate care by all staff ensuring non-judgemental attitudes and language to those with substance misuse.
- Appropriate care in the antenatal, intrapartum, and postnatal period that includes analgesia in labour, care of their baby following birth, managing withdrawal symptoms.
- Appropriate care when the woman/ birthing person with unknown substance misuse presents in labour/ for care in the hospital.

Evidence considered (including staff and population data, relevant research, expert and community knowledge etc.)

https://nhswales365.sharepoint.com/sites/HDD_Corporate_Governance/SitePages/Policy 20pages/All%20Policies,%20Procedures%20and%20Guidelines/All-Policies,-Proceduresand-Guidelines.aspx#:~:text=868,Wales%20Safeguarding%20Procedure

NICE Guideline for Pregnancy and Complex Social Factors: a model for service provision for pregnant women with complex social factors 2010 www.nice.org.uk/guideance/cg110 868 - All Wales Safeguarding Procedures

607 - Sharing information in pregnancy (safeguarding children) procedure -

502 - Acute Pain Management Patients Taking Strong Opioids Guideline -

795 - Acute Pain in the Acute Hospital Setting Guideline -

337 - Epidural Analgesia Guideline - -

Neonatal Network Guideline on the Management of Neonatal Abstinence Syndrome Wales, - http://www.walesneonatalnetwork.wales.nhs.uk/sitesplus/documents/1034/Neonatal%20Abstinence%20Syndrome%20All%20Wales%20Oct%202017%20final.pdf

Advisory Council on the Misuse of Drugs 2003 Hidden Harm Responding to the needs of children of problem drug users London: Home Office.

Department of Health 2007 Drug Misuse and Dependence – Guidelines on Clinical Management DOH: The Stationary Office Ltd.

Maternity Health Care Wales - a 5-year Vision for the future (2019-2024)

National Institute for Health and Clinical Excellence NICE Guidance Opioid dependence: Managing special circumstances. Updated 2022. Available at Scenario: Managing special circumstances | Management | Opioid dependence | CKS | NICE

National Institute for Health and Clinical Excellence (NICE) 2010. Guideline CG110. Pregnancy and complex social factors: a model for service provision for pregnant women with complex social factors. available from Overview | Pregnancy and complex social factors: a model for service provision for pregnant women with complex social factors | Guidance | NICE

Social Services and Wellbeing Act 2014

Substance Misuse Delivery Plan, 2019-2022 Welsh Government 2019

Royal College of Obstetricians and Gynacology. 2017. Pregnant women should be screened for substance abuse; psychiatrist tells international congress on obstetrics and gynaecology. https://www.rcog.org.uk/en/news/pregnant-women-should-be-screened-forsubstance-abuse-psychiatrist-tells-international-congress

Assess which protected characteristics will potentially be affected by the proposal:

Group	Positive Impact	Negative Impact	No Impact
Age Is it likely to affect older and younger people in different ways or affect one age group and not another?			X
Disability Those with a physical disability, learning disability, sensory loss or impairment, mental health conditions, long-term medical conditions such as diabetes	X		
Gender Reassignment Consider the potential impact on individuals who either:	Х		
 Have undergone, intend to undergo or are currently undergoing gender reassignment. Do not intend to undergo medical treatment but wish to live in a different gender from their gender at birth 			
Marriage / Civil Partnership			Х

This also covers those who are not married or in a civil partnership.		
Pregnancy and Maternity Maternity covers the period of 26 weeks after having a baby, whether or not they are on Maternity Leave	X	
Race / Ethnicity People of a different race, nationality, colour, culture or ethnic origin including non- English / Welsh speakers, gypsies/travellers, asylum seekers and migrant workers.	X	
Religion or Belief The term 'religion' includes a religious or philosophical belief.		Х
Sex Consider whether those affected are mostly male or female and where it applies to both equally does it affect one differently to the other?		х
Sexual Orientation Whether a person's sexual attraction is towards their own sex, the opposite sex or to both sexes.		х

Consider the potential impacts of the programme/policy/project on the following wider determinants:

Additional Determinants	Positive Impact	Negative Impact	No Impact
Armed Forces Community Consider members of the Armed Forces and their families, whose health needs may be impacted long after they have left the Armed Forces and returned to civilian life. Also consider their unique experiences when accessing and using day-to-day public and private services compared to the general population. It could be through 'unfamiliarity with civilian life, or frequent moves around the country and the subsequent difficulties in maintaining support networks, for example, members of the Armed Forces can find accessing such goods and services challenging.' For a comprehensive guide to the Armed Forces Covenant Duty and supporting resource please see: Armed-Forces-Covenant-duty-statutory-quidance			X
Socio Economic Duty Consider those on low income, economically inactive, unemployed or unable to work due to ill-health. Also consider people living in areas known to exhibit poor economic and/or health indicators and individuals who are unable to access services and facilities. Food / fuel poverty and personal or household debt should also be considered. For a comprehensive guide to the Socio-Economic Duty in Wales and supporting resource please see: more-equal-wales-socio-economic-duty	X		
Welsh Language Please note opportunities for persons to use the Welsh language and treating the Welsh language no less favourably than the English language.			Х

Summary of Potential Impacts Identified

Positive Impacts

This Guideline ensures all Women and Birthing Persons who use or have recently used substances that may impact on their pregnancy will undergo appropriate risk assessments for their health and wellbeing and their baby's health following birth. Both physical and mental health will be considered and managed by way of unbiased patient-centred individualised assessments, referrals and multi-disciplinary team working. These can include referrals to the Perinatal Mental Health Team, Paediatric services, Anaesthetics, along with positive support from the Drug and Alcohol teams and workers, Safeguarding teams, and wider support from the Local Authority dependant on need for positive support and care planning. It will outline a specified confidential communication process that will help provide cohesive care between services and ensure that privacy and confidentiality for those whose substance misuse is unknown to their families and friends. Consideration to the individual's financial circumstances and to where and when the woman/ birthing person would like to receive care.
For women/ birthing person with a learning disability, information will be provided in plain English to promote understanding and this will be accompanied by written information. Each woman or birthing person will be asked about whether they consider themselves to have a learning disability during pregnancy and for those with a positive response (whether formally diagnosed or not) will be provided with a "Maternity Passport". This passport will then be used to help all care providers communicate with the woman or birthing person in the most meaningful way based on their individual needs. The maternity passport will also identify any additional need relating to barriers surrounding language and other forms of communication.
Negative Impacts
None

Has the screening identified any negative impacts?	Yes	No
If yes, a full Equality Impact Assessment will need to be undertaken.		

If No negative impacts were identified, please give full justification here

This guideline aims to promote inclusion, equality and diversity to providing a complete guideline for caring to those who are pregnant and have current or recent substance misuse which improves communication with outside services, MDT working and care planning, analgesia provision in labour, management of withdrawals and safeguarding issues which will be based on individual circumstances, reducing likelihood of bias and prejudice, improving outcomes for all birthing persons and their babies.

Any complaints we receive in regards to any protected group will be addressed on an individual basis and if required a Full EqIA will be undertaken.

Screening Completed	Name	Sarah Burton / Cerian Llewelyn
by:	Title	Specialist Public Health Midwife / Risk
		and Governance Lead Midwife
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	Date	15/11/23
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by:	Title	Head of Midwifery
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	Doto	15/11/23
	Date	10/11/23
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	Date	4/12/2023