

**NHS Greater Glasgow and Clyde
Equality Impact Assessment Tool For Frontline Patient Services**



It is essential to follow the EQIA Guidance in completing this form

Name of Current Service/Service Development/Service Redesign:

Bone Metabolism Unit , Western Infirmary, Emergency Care & Medical Services Directorate

Please tick box to indicate if this is a: Current Service Service Development Service Redesign

Brief description of the above: (Please include if this is part of a Board-wide service or is locally determined).

The Bone Metabolism Unit at the Western Infirmary, Glasgow provides assessment of patients from 16 years upwards at risk of osteoporosis (thinning of the bones) and other metabolic bone disease (Metabolism: chemical processes within the body which affect bone). The majority of patients are in the 50+ age group.

Patients can be referred into the service via the Fracture Clinic, General Practice (GP), Bone Clinic and other Specialist Clinics for example Orthopaedic Clinic (bone problems) Falls Service and Accident and Emergency Department.

Patients are offered X-rays and specialised scans for fracture risk assessment. Patients who are diagnosed with osteoporosis are offered education, treatment and management of osteoporosis and fracture prevention.

Who is the lead reviewer and where based?

Con Gillespie, Lead Nurse Emergency Care and Medical Services

**Please list the staff groupings of all those involved in carrying out this EQIA
(when non-NHS staff are involved please record their organisation or reason for inclusion):**

Lead Nurse, Patient Representative, Associate Specialist, Radiographer, Lead Osteoporosis Nurse Specialist, 2 Osteoporosis Nurse Specialists, Team Secretary, Team Administration, Quality Co-ordinator, Assistant Equality and Diversity Advisor;

Impact Assessment – Equality Categories

Equality Category	Existing Good Practice	Remaining Negative Impact
<p>All</p>	<ul style="list-style-type: none"> • The clinic has a good sized waiting area. Patients are escorted through each stage of their consultation by a member of staff. For example, to the consultation room and to the scanning room. • The service has recently conducted a satisfaction survey with 150 service users 143 have said they are very satisfied with the service they have received. • A patient representative was present at the EQIA and also said they had received a good service. • All patients have an individual assessment and therefore any specific needs are built into the care plan, e.g. communication support, religious needs. • The patient's dignity is maintained at all times. It is not necessary for patients to undress to have their scan carried out. • The door to the scanning room is always closed to maintain privacy during the scanning procedure and consultation. • Staff are happy for a family member or carer to accompany the patient to their appointment. 	<ul style="list-style-type: none"> • All staff have not attended equality and diversity training. • Service referral forms are not always fully completed by staff referring patients to the service. • Two data collection systems are used by the service PASS Web and The CRISS system. Information entered does not communicate with each other, ie. not all patient data can be transposed easily.
<p>Gender</p>	<ul style="list-style-type: none"> • Gender data is recorded in the patient information database and is recorded to help analyse scan results. (The sexes have different density of bones). • Staff try to accommodate requests for same gender health professionals. • To date, staff have not experienced any issues with transgender patients. • Staff are aware of gender based violence issues and are able to discuss issues disclosed by patients during their consultation. 	<ul style="list-style-type: none"> • No negative impact identified.

<p>Ethnicity</p>	<ul style="list-style-type: none"> • Ethnicity data is recorded in the patient information database and is required to help analyse scan results. (Ethnic groups have different density of bones). • Staff are aware of how to access interpreters. Languages requested to date include Polish, Farsi Urdu and Punjabi. Staff document in the case notes when an interpreter has been involved in a patient consultation. • Staff document in the case notes when a patient insists on family member interpreting for them. • Staff are aware of cultural issues. For example the importance of cultural dress such as Burkahs and Hijjabs. These items do not require to be removed during a scan. 	<ul style="list-style-type: none"> • Information leaflets are not available in other languages.
<p>Disability</p>	<ul style="list-style-type: none"> • If a patient has any disabilities this is documented in the case notes in the comments box. • Disabled car parking spaces are available at the hospitals. • A drop off zone also available at the entrance to the building. • The clinic is situated on the ground floor of the hospital. • Loop system is available in the room where patient education is offered. • Patients can be offered a written plan of their treatment. • Staff are aware of BT Text Direct. • Staff are aware of how to book British Sign Language interpreters. Staff document in the case notes when an interpreter has been involved in a patient consultation. • There are accessible toilets available. • Mobility is a particular problem for patients with metabolic bone conditions. However; staff are 	<ul style="list-style-type: none"> • The chairs in the waiting area are only one size. • At present the service does not have access to a portable loop system. • The sign post to G Block where the clinic is situated is difficult to find. • The size of the print on the sign for G Block would be easier to see if it was larger. • Disability data is not recorded or analysed. • Deaf awareness training has been difficult to access due to lack of places being available on the course.

	<p>available to help patients with any mobility issues.</p> <ul style="list-style-type: none"> • Staff are trained in moving and handling to assist patients with mobility. .Wheel chairs are also available on request to help with access from the car park to the clinic. • There is good signage within the hospital building to assist way finding. • If a patient has learning difficulties, staff would discuss their needs with the carer as well as the patient. • Staff tailor any information to meet the particular needs of the patient for example if the patient has learning difficulties. • Models of vertebrae (back bone) are available to describe diagnoses and treatments. • Staff are happy to phone a relative or carer to explain patient's diagnoses and treatment regime with the patient's consent, as there are important dietary requirements involved in relation to medication. • Treatment can be tailored to accommodate memory problems or other disability issues. 	
<p>Sexual Orientation</p>	<ul style="list-style-type: none"> • Staff are aware of the Civil Partnership Act and aware of the importance of using appropriate terminology e.g. partner. 	<ul style="list-style-type: none"> • Sexual orientation data is not recorded or analysed.
<p>Religion and belief</p>	<ul style="list-style-type: none"> • Staff are aware that particular religions may have concerns about the content of medications and can contact the Pharmacy Department for guidance on medication content. • Staff are aware of the importance of articles of faith, for example a Kirpan (small sword which is important to the Sikh religion) and would discuss with the patient how to best accommodate this for scans being undertaken. 	<ul style="list-style-type: none"> • Religion is not recorded or analysed.

	<ul style="list-style-type: none"> • Staff have access to a Religions and Cultures Manual 	
Age (Children/Young People/Older People)	<ul style="list-style-type: none"> • Age is recorded in the patient information database .and is required to help analyse scan results (bone density is affected by age). • Information and treatment is tailored to the individual • There are transition clinics for patients who are transferring from Yorkhill Hospital to adult services. 	<ul style="list-style-type: none"> • No negative impact identified.
Social Class/Socio-Economic Status	<ul style="list-style-type: none"> • Patients who are on benefits are entitled to reclaim their travelling expenses. Staff can signpost patients to the cashier's office for travelling expenses reimbursements. • Patients are advised about benefits and given information where they can get further information for example the National Osteoporosis Society has specific information relating to benefits • Transport can be booked for patients attending the clinic. 	<ul style="list-style-type: none"> • No negative impact identified.
Additional marginalisation	<ul style="list-style-type: none"> • Staff can accommodate patients with addiction issues. • Prisoners have also been seen at the clinic. • Asylum seekers, refugees and the travelling community have all accessed the service. Copies of clinic letters are also given to the patients to help with their management. This is especially helpful if they are changing address regularly. • Patients from residential homes have also used the service. Copies of clinic letters are sent to the GP as well as the home to help with patient care. 	<ul style="list-style-type: none"> • There is an upper limit of weight that all scanning machines operate to.

Actions	Date for completion	Who is responsible?(initials)
<p>Cross Cutting Actions</p> <ul style="list-style-type: none"> • Increase the size and clarity of the signage indicating where G Block is situated at the Western Infirmary • Contact the Learning and Education Department regarding the difficulties in accessing deaf awareness training. • Review the number of staff who have not attended Equality and Diversity Training. • Explore the possibility of recording and monitoring disability, religion and sexual orientation data. 	<p>Feb 11</p> <p>Nov 11</p> <p>Nov 11</p> <p>Feb 11</p>	<p>M Mackenzie, M Fraser</p> <p>M Fraser</p> <p>M Fraser</p> <p>C Gillespie</p>
<p>Specific Actions</p> <ul style="list-style-type: none"> • Review the availability range of chairs in the waiting area. • Review the availability of patient information in other languages • Obtain a portable loop system for patients, who are hard of hearing, including poster to advertise its availability. <p>Explore the possibility of raising awareness with healthcare practitioners about the importance of completing referral forms to include all relevant information.</p> <ul style="list-style-type: none"> • Explore if scanning machines can be purchased to accommodate other weights. If not then establish where the nearest one is available if required. 	<p>Feb 11</p> <p>Nov 11</p> <p>Nov11</p> <p>Feb 11</p> <p>Feb11</p>	<p>M MacKenzie, M Fraser</p> <p>M Fraser</p> <p>M Fraser, S Hammad</p> <p>M Fraser</p> <p>M MacKenzie, M Fraser</p>

Ongoing 6 Monthly Review **Please write your 6 monthly EQIA review date:**

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Lead Reviewer: **Name:** Con Gillespie
Sign Off: **Job Title** Lead Nurse Clinical Improvement & Development

Signature



Date: 6th September 2010

Please email copy of the completed EQIA form to irene.mackenzie@ggc.scot.nhs.uk

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