

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:

Forensic Mental Health Services

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).

NHS Greater Glasgow and Clyde (NHSGGC) Forensic Mental Health Services is charged to care and treat some of the most vulnerable and disenfranchised service users within the Health Board. It does this by operating across a spectrum of service provision from the community to low and medium secure rehabilitation units. The aim of the service is to provide a comprehensive health care service, a recovery orientated approach to those mentally disordered offenders who pose a serious risk to others: to balance this need to care for patients with the need to keep the public (including staff and families) safe; and to provide input, expertise and professional advice to criminal justice agencies and other health and social care organisations.

Who is the lead reviewer and where based?

Tommy Harrison, Leverndale Hospital

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):

General Manager, Patient Service Manager, Nurse Consultant & Service Development Nurse
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Impact Assessment – Equality Categories

Equality Category	Existing Good Practice	Further Action Required
Gender	<ul style="list-style-type: none"> • Men’s Health Clinic implemented in 2005 and introduced across the service. • Separate Female ward and dedicated clinical team for support • Gender mix of staff 50:50. • As part of Inequality Champions project, a number of training programmes have been identified including Gender and Sexual Abuse. • Staff have received training on sexual health awareness • Several senior staff have received training in therapy for sexual offenders. • Staff have also received training in ‘Safe to Say’ which raises awareness of the issues of sexual abuse. • Information is delivered through a named nurse, patient community meetings and advocacy network to support understanding of condition, treatment and rights • The service has invested in the professional production of patient information handbooks which are now available in all wards and information notice stands. 	<ul style="list-style-type: none"> • Women’s Health identified as a priority within Health Promoting Health Service Action Plan. • Need to ensure that the DVD complies with equalities standards, particularly in areas of language subtitling and different audio formats. • Need to ensure that during initial assessment process all diversity information is being captured at source and information utilised as apt of the care planning process. • Measurement tool for patient involvement needs to be able to breakdown and analyse data from different diversity perspectives. • Although training of staff is underway, we are unsure whether training delivered to staff is being recorded via an equalities perspective to ensure fair access in line specific equality duties. • Need to ensure that all staff understand the rights of patients in relation to Disability Discrimination Act. •

	<ul style="list-style-type: none"> • Staff induction takes into account equality /inequality issues. • There are local community meetings to help involve people in decision making • A DVD is being developed to help patients/ carers understand the nature and diversity of the service. 	
<p>Ethnicity</p>	<ul style="list-style-type: none"> • Ethnicity is currently being recorded for all patients. Present 93% of patients are white European • Information is delivered through a named nurse, patient community meetings and advocacy network to support understanding of condition, treatment and rights. • The service has invested in the professional production of patient information handbooks which are now available in all wards and information notice stands. • Staff induction takes into account equality /inequality issues. • There are local community meetings to help involve people in decision making • A DVD is being developed to help patients/ carers understand the nature and diversity of the service. 	<ul style="list-style-type: none"> • Need to ensure that correct ethnicity codes are being utilised by the service. • Need to ensure that the DVD complies with equalities standards, particularly in areas of language subtitling and different audio formats. • Need to ensure that during initial assessment process all diversity information is being captured at source and information utilised as apt of the care planning process. • Measurement tool for patient involvement needs to be able to breakdown and analyse data from different diversity perspectives. • Although training of staff is underway, we are unsure whether training delivered to staff is being recorded via an equalities perspective to ensure fair access in line specific equality duties. • Need to ensure that all staff understand the rights of patients in relation to Disability Discrimination Act. •

<p>Disability</p>	<ul style="list-style-type: none"> • Disability is being recorded as part of initial assessment process. • The building complies with DDA requirements. • In relation to access, Rowanbank is a single storey building and all patients have access to single rooms with en-suite facilities. • Two of the wards have specific DDA compliant single rooms. • Information is delivered through a named nurse, patient community meetings and advocacy network to support understanding of condition, treatment and rights • The service has invested in the professional production of patient information handbooks which are now available in all wards and information notice stands. • Staff induction takes into account equality inequality issues. • There are local community meetings to help involve people in decision making • A DVD is being developed to help patients/ carers understand the nature and diversity of the service. 	<ul style="list-style-type: none"> • Plan to refurbish low secure facilities at Leverndale to single room accommodation with en-suite facilities. • Need to ensure that the DVD complies with equalities standards, particularly in areas of language subtitling and different audio formats. • Need to ensure that during initial assessment process all diversity information is being captured at source and information utilised as apt of the care planning process. • Measurement tool for patient involvement needs to be able to breakdown and analyse data from different diversity perspectives. • Although training of staff is underway, we are unsure whether training delivered to staff is being recorded via an equalities perspective to ensure fair access in line specific equality duties. • Need to ensure that all staff understand the rights of patients in relation to Disability Discrimination Act.
<p>Sexual Orientation</p>	<ul style="list-style-type: none"> • Information is delivered through a named nurse, patient community meetings and advocacy network to support understanding of condition, treatment and rights. • The service has invested in the professional production of patient information handbooks 	<ul style="list-style-type: none"> • No negative impact • Need to ensure that the DVD complies with equalities standards, particularly in areas of language subtitling and different audio formats • Need to ensure that during initial

	<p>which are now available in all wards and information notice stands.</p> <ul style="list-style-type: none"> • Staff induction takes into account equality /inequality issues. • There are local community meetings to help involve people in decision making • A DVD is being developed to help patients/ carers understand the nature and diversity of the service. 	<p>assessment process all diversity information is being captured at source and information utilised as apt of the care planning process.</p> <ul style="list-style-type: none"> • Measurement tool for patient involvement needs to be able to breakdown and analyse data from different diversity perspectives. • Although training of staff is underway, we are unsure whether training delivered to staff is being recorded via an equalities perspective to ensure fair access in line specific equality duties. • Need to ensure that all staff understand the rights of patients in relation to Disability Discrimination Act.
<p>Religion and belief</p>	<ul style="list-style-type: none"> • The facility at Rowanbank benefits from a multi-faith room and the facility has been visited by various religious leaders. There is a hospital chaplin at Leverndale Hospital who links with all the different faith groups • Approximately 20 staff members are currently undergoing in-house Muslim awareness training across the directorate. • The service has purchased several copies of the Multi-faith Spiral Calendar of Festivals which staff can access. • Information is delivered through a named nurse, patient community meetings and advocacy network to support understanding of condition, treatment and rights. 	<ul style="list-style-type: none"> • Further discussion with service users/staff/ spiritual care team on what other resources are required as part of the multi-faith room. • Need to ensure that the DVD complies with equalities standards, particularly in areas of language subtitling and different audio formats • Need to ensure that during initial assessment process all diversity information is being captured at source and information utilised as apt of the care planning process. • Measurement tool for patient involvement needs to be able to breakdown and analyse data from different diversity perspectives. • Although training of staff is underway, we

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<p>Age (Children/Young People/Older People)</p>	<ul style="list-style-type: none"> • Approximately 164 staff members have received a significant level of training on Child protection. • Each clinical area holds a copy of NHSGGC Child Protection: Policies and Procedures manual. • There is a dedicated Family room at Rowanbank, which enables children to visit their relatives in a safe, secure and welcoming environment. • Information is delivered through a named nurse, patient community meetings and advocacy network to support understanding of condition, treatment and rights • The service has invested in the professional production of patient information handbooks which are now available in all wards and information notice stands. • Staff induction takes into account equality /inequality issues. • There are local community meetings to help 	<ul style="list-style-type: none"> • Given the rising average age particularly within low secure consideration should be given for additional training on the care and treatment of the older adult. • Need to ensure that the DVD complies with equalities standards, particularly in areas of language subtitling and different audio formats • Need to ensure that during initial assessment process all diversity information is being captured at source and information utilised as apt of the care planning process. • Measurement tool for patient involvement needs to be able to breakdown and analyse data from different diversity perspectives. • Although training of staff is underway, we are unsure whether training delivered to staff is being recorded via an equalities

	<p>involve people in decision making</p> <ul style="list-style-type: none"> • A DVD is being developed to help patients/ carers understand the nature and diversity of the service. 	<p>perspective to ensure fair access in line specific equality duties.</p> <ul style="list-style-type: none"> • Need to ensure that all staff understand the rights of patients in relation to Disability Discrimination Act.
<p>Social Class/ Socio-Economic Status</p>	<ul style="list-style-type: none"> • The service has sessions input from local Further Education Colleges to deliver adult literacy and numeracy groups in order to develop and support the maintenance of such skills for patients. • There has been significant investment into both health promotion and health improvement for both patients and staff. • The service has invested in the professional production of patient information handbooks which are now available in all wards and information notice stands. • Staff induction takes into account equality /inequality issues. • There are local community meetings to help involve people in decision making • A DVD is being developed to help patients/ carers understand the nature and diversity of the service. 	<ul style="list-style-type: none"> • No negative impact. Social class/Socio-economic issues covered as part of health improvement activity. • Need to ensure that the DVD complies with equalities standards, particularly in areas of language subtitling and different audio formats • Need to ensure that during initial assessment process all diversity information is being captured at source and information utilised as apt of the care planning process. • Measurement tool for patient involvement needs to be able to breakdown and analyse data from different diversity perspectives. • Although training of staff is underway, we are unsure whether training delivered to staff is being recorded via an equalities perspective to ensure fair access in line specific equality duties. • Need to ensure that all staff understand the rights of patients in relation to Disability Discrimination Act.

<p>Additional marginalisation</p>	<ul style="list-style-type: none"> • The service has sessions input from local Further Education Colleges to deliver adult literacy and numeracy groups in order to develop and support the maintenance of such skills for patients. • All patients have access to dedicated Advocacy service which is located at both in-patient sites and also covers the community service. • There is a robust and comprehensive complaints procedure available to patients, which includes a section on issues around discriminatory behaviours. • There has been a substantial level of work completed on appeals against levels of security, ensuring that patients are not cared for at an inappropriate and disproportional security level. • The directorate has two trainers in the Essential Shared Capabilities framework which will support environmental cultural change in the service by promoting rights-based, recovery-focused practice. 	<ul style="list-style-type: none"> • Need to ensure that during initial assessment process all diversity information is being captured at source and information utilised as part of the care planning process. • Measurement tool for patient involvement needs to be able to breakdown and analyse data from different diversity perspectives. • Need to ensure that during initial assessment process all diversity information is being captured at source and information utilised as apt of the care planning process. • Measurement tool for patient involvement needs to be able to breakdown and analyse data from different diversity perspectives. • Although training of staff is underway, we are unsure whether training delivered to staff is being recorded via an equalities perspective to ensure fair access in line specific equality duties. • Need to ensure that all staff understand the rights of patients in relation to Disability Discrimination Act.
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Actions	Date for completion	Who is responsible?(initials)
<p>Cross Cutting Actions</p> <ul style="list-style-type: none"> • There is a need to review what existing information is available in each of the wards to ensure consistency and also ensure fairer access to information • Link to the advocacy service to better understand the information needs for patients in the wards. • Link to Spiritual Care Team to access resources around Spiritual/ Religious care for staff and patients and further develop the multi-faith resource room • Investigate existing patient profiling data and ensure consistency with ISD codes. 	<p>Feb 2010</p> <p>Ongoing</p> <p>Ongoing</p> <p>Ongoing</p>	<p>TH</p> <p>BW/SB</p> <p>TH</p> <p>TH</p>
<p>Specific Actions</p> <ul style="list-style-type: none"> • Need to investigate the different forms of Diversity Training on offer for staff • Review care plan documentation to ensure that diversity related information is being captured. • Currently there is no way of knowing whether staff have a disability. Staff survey should help understand workforce and take forward appropriate actions. • Need to ensure that the DVD on patient/carers experience complies with equalities standards and to explore alternative audio formats and languages. 	<p>March 2010</p> <p>Dec 2009</p> <p>March 2010</p> <p>Dec 2009</p>	<p>MG</p> <p>MG/TH</p> <p>LMcW</p> <p>TH</p>

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

Lead Reviewer: Name: Tommy Harrison
Sign Off: Job Title:
Signature
Date:

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

Irene Mackenzie, Corporate Information and Development Manager, Corporate Inequalities Team, NHS Greater Glasgow and Clyde, Dalian House, 350 St Vincent Street, Glasgow, G3 8YZ. Tel: 0141-201-4970.