

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:

Renfrewshire CHP Podiatry Service

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).

Renfrewshire CHP Podiatry Service is a community based service across the entire CHP area. The team aim to provide a comprehensive, quality podiatry service to patients living in the Renfrewshire CHP area or those living in another CHP area of NHS Greater Glasgow & Clyde but choose to access services in this area. Podiatry focuses on supporting patients to remain independently mobile and pain free while promoting self care wherever possible. The Podiatry service provides assessment, diagnosis, treatment and foot health education to patients with a lower limb condition or systemic condition that affects the lower limb and foot.

Podiatry service is provided 5 days per week: Monday to Thursday 8.30 am - 5.00 pm & Friday 8.45 am - 4.00 pm

Who is the lead reviewer and where based?

Mary McCulloch, Podiatry Manager, Renfrewshire CHP

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):

The working group was composed of representatives from podiatry staff within the service, with guidance from the Equality and Diversity Team; These included:

- Podiatry manager
- Practice Development Podiatrist
- Staff-side representative
- Information Officer- Equality and Diversity Team
- Podiatry redesign Operational Group

Additional support was provided by Administration & Clerical colleagues and Clinical Governance Unit

Local Information used to complete EQIA

The EQIA group considered various sources of local information; These included:

- Information collected throughout the review and redesign process
- Assessment of the accommodation
- General feedback from suggestions / complaints and patient stories / experiences.
- Feedback obtained from the meeting with Local Senior Forum groups

Impact Assessment – Equality Categories

Equality Category	Existing Good Practice	Remaining Negative Impact
Gender	<ul style="list-style-type: none"> • Gender is not specifically recorded within the patient case notes but a title is recorded e.g. Mr /Mrs /Miss/ Master • Flexible appointment times can be given during 	<ul style="list-style-type: none"> • Data on gender is not currently disaggregated or analysed. • Fewer male than female patients access the service

	<p>the week.</p> <ul style="list-style-type: none"> • There is gender matching of patients if requested. • Service offers private treatment rooms for individual patient treatment/ consultations • There is vulnerable adult's awareness training for staff. • All staff undergo training in relation to their responsibilities in line with Adult and Support Protection Act (ASPA). • All podiatry staff have received Equality and Diversity information either through drama workshops, information sessions and / or training. • A Podiatry service information leaflet has been developed. Service leaflet was prepared in collaboration with team members, service users and equality and diversity team. Leaflet given to potential service users on request. • The e-learning on Equality and Diversity- Level 1 KSF was delivered to all staff at the August staff meeting. 	<ul style="list-style-type: none"> • Communication is not sufficiently targeted to meet the needs of different groups.
Ethnicity	<ul style="list-style-type: none"> • Flexible appointment times can be given during the week. • Interpreting can be arranged on request • Staff offer cultural sensitivity when dealing with patients. • All podiatry staff have received Equality and Diversity information either through drama workshops, information sessions and / or training 	<ul style="list-style-type: none"> • Staff could be better aware of how Diabetes is managed in different cultures as this has an impact on Podiatry service. • At present the service does not collect information on ethnicity of patients • Currently there is no translated information about the team but this is currently being pursued.
	<ul style="list-style-type: none"> • The service does record on individual disability as 	<ul style="list-style-type: none"> • Currently no loop system available at

<p>Disability</p>	<p>part of casenotes.</p> <ul style="list-style-type: none"> • Podiatry venues have wheelchair access. • A separate accommodation report has been completed as part of the service re-design process. • Within treatment areas, the design and layout has taken Disability into account e.g. different types of chairs. • The service is able to access British Sign Language Interpreters (BSL) • There is nearby accessible car parking in all clinical locations • Guide Dogs are welcome • Many patients have visual impairment and a member of staff has attended visual awareness training to help develop service. • Flexible appointment times can be given during the week. • There is an accessible toilet at the venues • Member of staff has attended deaf awareness training provided within organisation. • Referral form includes section which assesses mobility of patients • All podiatry staff have received Equality and Diversity information either through drama workshops, information sessions and / or training 	<p>venues</p> <ul style="list-style-type: none"> • Disability status is not collected due to a lack of an IM&T system. Statistics are not available
<p>Sexual Orientation</p>	<ul style="list-style-type: none"> • All podiatry staff have received Equality and Diversity information either through drama workshops, information sessions and / or training 	<ul style="list-style-type: none"> • At present the service does not collate information on sexual orientation of patients

Religion and belief	<ul style="list-style-type: none"> All podiatry staff have received Equality and Diversity information either through drama workshops, information sessions and / or training 	<ul style="list-style-type: none"> At present the service does not collate information on religion/belief of patients
Age (Children/Young People/Older People)	<ul style="list-style-type: none"> Age is collected on the referral form Information about service has been written in plain English and is jargon free Majority of service users are older people All podiatry staff have received Equality and Diversity information either through drama workshops, information sessions and / or training <p>The average age of the caseload is getting younger.</p>	<ul style="list-style-type: none"> It is felt that the working population has difficulty accessing the service during office hours Anecdotally the number of younger patients accessing the service has increased due to the implementation of a new assessment tool. Accurate figures cannot be provided due to the lack of an IM&T system.
Social Class/ Socio-Economic Status	<ul style="list-style-type: none"> All podiatry staff have received Equality and Diversity information either through drama workshops, information sessions and / or training. 	<ul style="list-style-type: none"> Anecdotally it appears that people from lower social class are less likely to attend podiatry appointments despite having a higher podiatric/medical need The socio-economic status of individuals has an impact on the service e.g. changing patients appointments at short notice is difficult due to people not having a telephone number. There have been requests for out of hours appointments from people who work 9-5pm and require treatment or they bring less able dependants to an out of hours service or an after 6pm/ weekend service.

Additional marginalisation	<ul style="list-style-type: none"> • Every clinical location has a carers notice board displaying posters and information leaflets in waiting areas 	<ul style="list-style-type: none"> • The review of podiatry service has highlighted the lack of podiatry provision to residents in care homes within Renfrewshire.
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Actions	Date for completion	Who is responsible?(initials)
<p>Cross Cutting Actions</p> <ul style="list-style-type: none"> • Check availability of loop systems across different venues. • Ensure that IMT system for booking appointments, data collection includes and allows analysis of uptake of service by Diversity Strand to help identify gaps in service. • Explore the possibility of collecting equality and diversity information, for all new patients at first point of contact. 	<p>March 2010 Unknown March 2010</p>	<p>MMcC Keith Redpath, AHP Waiting times group MMcC, Equality & Diversity team</p>
<p>Specific Actions</p> <ul style="list-style-type: none"> • Identified training gaps around management of diabetes in other cultures. • Explore gap around communication and identify ways of sourcing health education leaflets in different languages. • In relation to the gap in podiatry provision, conduct a scoping exercise and present to Podiatry Review and Redesign Steering Group • Explore the option of introducing an out of hours service • Short life working group exploring DNA (Did Not Attend) rates and patterns, with a view to improve patient access and support attendance. 	<p>March 2010 October 09 completed June 2010 April 2010</p>	<p>Renfrewshire Diabetes Service, MMcC MMcC, PJ MMcC MMcC, HC, PJ, NL, ED</p>

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

EQIA review date : June 2010

Lead Reviewer: **Name:** Mary McCulloch
Sign Off: **Job Title:** Podiatry Manager
 Signature
 Date: 18 December 2009

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.