

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:

SmokeFree Services – Community, North Glasgow Community Healthcare Partnership (CHCP)

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).

To deliver a comprehensive smoking cessation programme for the adult population of North Glasgow. Service is provided to clients via groups, drop-ins, 1 to 1 support and telephone support.

Who is the lead reviewer and where based?

Robbie Preece Health Improvement Senior – Tobacco

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):

Smoking Cessation Coordinator \*2  
 Health Improvement Lead

Evaluation Feedback of service considered as part of EQIA and also informed through GGC wide evaluation.

Impact Assessment – Equality Categories

Equality Category	Existing Good Practice	Remaining Negative Impact
All	<ul style="list-style-type: none"> <li>All group clients offered private space to discuss issues.</li> </ul>	<ul style="list-style-type: none"> <li>No staff on GG&amp;C’s Equality and Diversity Training as yet.</li> </ul>

	<ul style="list-style-type: none"> <li>• Currently expanding service provision into more community based venues</li> <li>• Groups held in evenings.</li> </ul>	<ul style="list-style-type: none"> <li>• Also need to look at creating public transport information for clients attending venues.</li> <li>• No training needs analysis of sessional staff.</li> <li>• Consider ways of improving rates of attendance, e.g. age/ gender specific groups</li> <li>• Unsure of how staff can raise issues of concern.</li> </ul>
Gender	<ul style="list-style-type: none"> <li>• Gender data is recorded and analysed</li> </ul>	<ul style="list-style-type: none"> <li>• Men underrepresented at groups</li> </ul>
Ethnicity	<ul style="list-style-type: none"> <li>• Ethnicity is recorded and analysed</li> <li>• List of multi-lingual pharmacists distributed to smoking cessation facilitators.</li> <li>• Coordinators aware of interpreting services and service would be offered routinely as 1 to 1.</li> </ul>	<ul style="list-style-type: none"> <li>• Translated information a gap at present.</li> <li>• Need to check if language needs are identified as part of referral before client attends week.</li> </ul>
Disability	<ul style="list-style-type: none"> <li>• Some staff have undertaken individual courses such as Deaf Awareness.</li> <li>• Venues hired/borrowed visited by coordinators for physical disability access. All venues are wheelchair accessible</li> <li>• Advisers can access British Sign Language (BSL) Interpreters</li> <li>• Guide dogs welcome</li> <li>• Cares welcome to come with smoker to attend groups.</li> <li>• Accessible toilet available in most current venues</li> </ul>	<ul style="list-style-type: none"> <li>• Disability not recorded</li> <li>• No screening tool used to assess accessibility of venues.</li> <li>• Need to check if language needs are identified as part of referral before client attends week 1.</li> <li>• Only one of three Health Centres have loop system in place.</li> <li>• No service after 7.30pm at present. Could negotiate if required</li> <li>• Accessible toilets to be considered as part of new venue assessment</li> <li>• Need to investigate other formats for information.</li> </ul>

Sexual Orientation	<ul style="list-style-type: none"> <li>Staff are aware that LGBT community has higher smoking rates.</li> </ul>	<ul style="list-style-type: none"> <li>Sexual orientation is not recorded/ analysed.</li> </ul>
Religion and belief	<ul style="list-style-type: none"> <li>No good practice identified</li> </ul>	<ul style="list-style-type: none"> <li>Religion is not recorded</li> <li>No staff on GG&amp;C's Equality and Diversity Training as yet.</li> </ul>
Age (Children/Young People/Older People)	<ul style="list-style-type: none"> <li>Age is recorded and analysed</li> <li>Expanded provision to include younger people through existing Youth Health Services</li> <li>Toolkit for cessation with young people currently being developed – lead role for GG&amp;C</li> </ul>	<ul style="list-style-type: none"> <li>Need to investigate need for age specific groups such as in care homes</li> </ul>
Social Class/ Socio-Economic Status	<ul style="list-style-type: none"> <li>Postcode – SIMD is recorded</li> </ul>	<ul style="list-style-type: none"> <li>No negative impact.</li> </ul>
Additional marginalisation	<ul style="list-style-type: none"> <li>One to ones offered.</li> <li>Timing for group work is rotated from day/ evening.</li> </ul>	<ul style="list-style-type: none"> <li>Need to identify gaps with a scoping exercise</li> </ul>

Actions	Date for completion	Who is responsible?(initials)
<b>Cross Cutting Actions</b> <ul style="list-style-type: none"> <li>Men under represented at group's needs investigation.</li> <li>Age/ Gender specific groups to be explored as part of service review.</li> <li>Need to create system for self referrers to be identified in relation to communication support needs</li> <li>Need to identify staff training and support services for GBV</li> <li>Need to raise awareness of complaint procedures with staff.</li> </ul>	Dec 2010 Dec 2010 Oct 2010  Aug 2010 Sept 2010	Enter leads

<ul style="list-style-type: none"> <li>• Need to look at ways of improving diversity data collection.</li> </ul>	Dec 2010	
<b>Specific Actions</b> <ul style="list-style-type: none"> <li>• Need to look at crating a checklist for assessing accessibility of venue including physical access/ loop system availability.</li> <li>• Crate public transport guides for supporting clients to access venues.</li> <li>• Training needs of facilitators should be identified through new KSF/PDP system</li> <li>• Need to look at ways of evaluating those who do not engage in service.</li> <li>• Review what information is available to staff whose first language is not English</li> </ul>	Oct 2010  Mar 2011 Ongoing Ongoing Dec 2010	

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

30 <sup>th</sup> September 2010
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Lead Reviewer: Name: Robbie Preece  
Sign Off: Job Title: Health Improvement Senior – Tobacco (North CHCP)  
Signature  
Date:

Please email copy of the completed EQIA form to [irene.mackenzie@ggc.scot.nhs.uk](mailto:irene.mackenzie@ggc.scot.nhs.uk)

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