

Why

are we asking staff to tackle discrimination?

These real examples illustrate how discrimination can stop patients and their families getting the NHS services they need.

For this reason NHSGGC has made a commitment to ensure our services are delivered in a way which recognises the different needs of patients and does not discriminate.

The examples only cover some of the ways in which people can experience discrimination and we all need to be aware that people can be discriminated against on the basis of gender, age, social class, sexual orientation, race, faith & belief and disability.

All NHSGGC staff need to be aware of this commitment to tackle discrimination. Please reflect on these examples and think about what they might mean for your area of work, support your colleagues to do the same and make tackling discrimination everyone's job.

It is also important that staff are aware that by law we must not discriminate either against patients or other NHSGGC staff.

How

can I find out more?

For more information about how you can challenge discrimination go to www.equality.scot.nhs.uk

To get advice via our Question and Answer section of the website go to...
www.equalitiesinhealth.org/tell_us_what_you_think.html

Speak to your line manager or supervisor.



This leaflet is available in large print format.
Contact the Corporate Inequalities Team on:
0141 201 4560

Treating People Fairly

everyone's responsibility to tackle discrimination



This leaflet has been put together to help NHS Greater Glasgow and Clyde staff tackle discrimination and make sure we treat all patients fairly.



What do we mean by discrimination?

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Discrimination can take two forms.

Firstly, we discriminate when we treat people as if they are all the same even when they have different needs. We need to recognise these needs to help people use our services on an equal basis.

Two real examples of this, which have happened in NHSGGC, are described below.

Martin's experience

Martin is a Deaf man whose first language is British Sign Language. A smoker for many years, Martin finally decided to take the plunge and quit. After looking at the various options available to help him, he decided that he would like the support of a group. On enquiring, however, Martin was told that he could not attend a smoking cessation group because there was no budget for an interpreter.

What should have happened?

A BSL interpreter should have been made available for Martin. As well as meeting our commitment to patients, it is also the law. The responsibility was on our staff to ensure that Martin received the help he needed to use this service.

Jelina's experience

Jelina is an Pakistani woman who cannot speak English or read in any language. Jelina was admitted to hospital for a stay of several weeks. During this time, staff did not communicate with her and she was left completely isolated in her already vulnerable state. Jelina's family had to draw pictures for her to use to make very simple requests.

What should have happened?

Jelina's communication needs should have been assessed immediately so that support could have been provided for both her and the staff. This support may have taken the form of an interpreter and/or language assistance materials.

The second form discrimination can take is treating people differently from other patients in a negative way which is not about them having different needs.

Two real examples of this, which have happened in NHSGGC, are described below.

Julie's experience

Julie is a gay woman whose partner is terminally ill. During a hospital visit, Julie was asked not to show affection to her partner because it was making the other patients feel uncomfortable.

What should have happened?

It was wrong to discriminate against this couple on the basis of their sexual orientation. Julie and her partner obviously wanted to be able to comfort each other at this sad time in their lives and should have been treated as any other couple.

Tina's experience

Tina Watson is a transgender woman. She visited an NHS clinic, and when called from the waiting room was referred to as Stephen Watson – her former name. Tina approached the desk and explained that her name was not Stephen and that she should be referred to as Tina or Ms. Watson. The receptionist stated that they would continue to use the name on his records until he presented a new passport.

What should have happened?

Tina should have been treated in the same way as any other patient amending their personal details. For transgender people this is particularly sensitive and it is our responsibility to ensure records are amended. In this case, where there had clearly been a breakdown in communication, the receptionist should have apologised for the mistake, addressed the patient as requested and ensured that the paperwork was updated.

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