

OFFICIAL NHS Greater Glasgow and Clyde Equality Impact Assessment Tool

Equality Impact Assessment is a legal requirement as set out in the Equality Act (2010) and the Equality Act 2010 (Specific Duties)(Scotland) regulations 2012 and may be used as evidence for cases referred for further investigation for compliance issues. Evidence returned should also align to Specific Outcomes as stated in your local Equality Outcomes Report. Please note that prior to starting an EQIA all Lead Reviewers are required to attend a Lead Reviewer training session or arrange to meet with a member of the Equality and Human Rights Team to discuss the process. Please contact Equality@ggc.scot.nhs.uk for further details or call 0141 2014560.

Name of Policy/Service Review/Service Development/Service Redesign/New Service:

Provision of I	n-House Re	pairs & Maintenance Serv	/ice		
Is this a: Curre	nt Service 🗌	Service Development	Service Redesign 🗌	New Service 🗌 New Policy 🗌	Policy Review 🗌

Description of the service & rationale for selection for EQIA: (Please state if this is part of a Board-wide service or is locally driven).

This EQIA aligns with the IJB Financial Allocations and Budgets paper, being presented to IJB members in November 2024

Since the Community Equipment Store who provide a service to the Equipu Partnership transferred back to the HSCP there has been a service review undertaken which included undertaking a procurement exercise to tender for purchase of equipment and also, following a review of service and maintenance schedules, for undertaking servicing and thorough examination schedules. This review has included a range of stakeholders including legal, procurement and health and safety colleagues.

As a result, the Partnership has agreed that additional thorough examinations will be carried out, and market scanning has concluded that sourcing a contractor to undertake this for bath lifts would prove challenging. Current arrangements mean that the service user may be subject to visits from multiple contractors, and it was acknowledged that the process could be streamlined.

It is proposed to bring inhouse the repairs and maintenance service. Out of hours repairs would still be contracted for. This will result in the recruitment of 8 Occupational Therapist Technicians, and one admin support role. This will be managed within the existing Store Management Structure. This represents an increase of 6 FTE.

Once implemented the impact of the new approach on Service Users will be subject to ongoing review. Currently any applicable equipment, outlined in the table below is subject to servicing and maintenance, the new approach may bring additional pieces of equipment they have into scope, this will be managed and streamlined to ensure the number of visits they require to have is kept to a minimum.

Equipment	Servici	ing	Thorough Examination (LOLER)	
	Current	New	Current	New
Mobile Hoist's	6 monthly, same visit as Thorough Examination	6 monthly on own schedule	6 monthly, same visit as Service	6 monthly on own schedule
Stand Aid's	6 monthly, same visit as Thorough Examination	6 monthly on own schedule	6 monthly, same visit as Service	6 monthly on own schedule
Sling's	-		Only when presented to engineer when carrying out hoist Thorough Examination	6 monthly on own schedule
Bathlift's	Annually	Annually	-	6 monthly on own schedule
Electric Profiling Bed's	Annually	safety inspection when assembled -Annually	+	-
Dynamic Mattresses	Annually	Annually	-	-
Adult Electric Powered Seating	Annually	Annually	-	-
Children Electric Powered Seating	Annually	Annually	-	-
SI Equipment	Annually	Annually	-	-
Standing Transfer Aid's	Annually (Not community)	Annually	-	-
Recliner Bath's	6 monthly	Annually	-	-
Pillow Riser's	Annually	Annually		-
Mattress Elevator's	Annually	Annually	-	-
Lifting Cushion's	Annually	Annually	-	-
Stairclimber's	6 monthly	2 Yearly		6 monthly on own schedule

The current contractual arrangement with the external provider has lapsed, therefore no early termination is required. However, it is noted that this may have potential TUPE implication for staff currently employed for the company providing the current repairs and servicing. Discussions underway with Procurement, Legal and HR in preparation for communicating with the incumbent provider in terms of TUPE. With the exception of management oversight, there is no impact on the existing staff cohort within the Store in relation to bringing this work in house as the posts will be filled either through the TUPE exercise or additional recruitment.

The Equipu partnership consists of 7 partners including Local Authorities and NHS Greater Glasgow and Clyde. The Equipu Steering Group has approved and signed off on this proposal. The savings proposal relating to this EQIA relates only to Glasgow City.

Given the stage of this programme of work, this EQIA can only provide a general overview. Where specific service redesign proposals emerge from the programme, a more tailored EQIA will be produced.

Who is the lead reviewer and when did they attend Lead reviewer Training? (Please note the lead reviewer must be someone in a position to authorise any actions identified as a result of the EQIA)

Name: Gillian Hennon, Head of Finance	Date of Lead Reviewer Training:

Please list the staff involved in carrying out this EQIA

(Where non-NHS staff are involved e.g. third sector reps or patients, please record their organisation or reason for inclusion):

William Darroch, Technical Operations Manager

	Example	Service Evidence Provided	Possible negative impact and Additional Mitigating Action Required
1. What equalities information is routinely collected from people currently using the service or affected by the policy? If this is a new service proposal what data do you have on proposed service user groups. Please note any barriers to collecting this data in your submitted evidence and an explanation for any protected characteristic data omitted.	A sexual health service collects service user data covering all 9 protected characteristics to enable them to monitor patterns of use.	All equalities information relating to the Service User would not be routinely gathered by the Store Service. Only pertinent data in relation to the service user and the products provided to them is held on the Store IT system to enable delivery and visits to be arranged by the staff. The Equipu partnership provides and maintains assistive technologies for vulnerable service users including delivery, installation, maintenance, removal and recycling of a whole range of equipment to allow users to live as independently as possible. This service is available to anyone with mobility problems following an assessment from health or social work staff. There is no charge for this service to the Service User.	
	Example	Service Evidence Provided	Possible negative impact and

				Additional Mitigating Action Required
2.	Please provide details of how data captured has been/will be used to inform policy content or service design. Your evidence should show which of the 3 parts of the General Duty have been considered (tick relevant boxes). 1) Remove discrimination, harassment and victimisation 2) Promote equality of opportunity 3) Foster good relations between protected characteristics. 4) Not applicable	A physical activity programme for people with long term conditions reviewed service user data and found very low uptake by BME (Black and Minority Ethnic) people. Engagement activity found promotional material for the interventions was not representative. As a result an adapted range of materials were introduced with ongoing monitoring of uptake. (Due regard promoting equality of opportunity)	Analysis of assets and maintenance scheduling has been undertaken by the Store staff to inform the decision taken. The review has included Health and Safety colleagues to ensure all standards and governance is applied correctly. Pertinent data relating to the Service User and the products issued is used by the Store to enable delivery and visits by staff.	
		Example	Service Evidence Provided	Possible negative impact and Additional Mitigating Action Required
3.	How have you applied learning from research evidence about the experience of equality groups to the service or Policy?	Looked after and accommodated care services reviewed a range of research evidence to help promote a more inclusive care	Review of the frequency and scheduling of visits to undertake servicing and testing was undertaken, and this proposal recognises that where possible arrangements to streamline and reduce visits to service users will be introduced.	

OFFICIAL environment. Research Your evidence should show suggested that young which of the 3 parts of the LGBT+ people had a General Duty have been disproportionately considered (tick relevant difficult time through exposure to bullying and boxes). harassment. As a result 1) Remove discrimination, staff were trained in harassment and LGBT+ issues and were victimisation more confident in asking related questions to 2) Promote equality of young people. opportunity (Due regard to removing discrimination. 3) Foster good relations harassment and between protected victimisation and characteristics fostering good relations). 4) Not applicable Example Service Evidence Provided Possible negative impact and Additional Mitigating Action Required Can you give details of how A money advice service Additional information required -4. you have engaged with spoke to lone parents equality groups with regard (predominantly women) Engagement has been undertaken with all the Equipu Partners to the service review or to better understand who have approved this proposal. policy development? What barriers to accessing the did this engagement tell you service. Feedback The existing contract has currently lapsed therefore no early about user experience and included concerns about termination is required. However, it is noted that this may have how was this information waiting times at the drop potential TUPE implication for staff currently employed for the used? The Patient in service, made more company providing the current repairs and servicing. difficult due to child care Discussions underway with Procurement, Legal and HR in **Experience and Public** preparation for communicating with the incumbent provider in Involvement team (PEPI) issues. As a result the support NHSGGC to listen service introduced a terms of TUPE.

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	 and understand what matters to people and can offer support. Your evidence should show which of the 3 parts of the General Duty have been considered (tick relevant boxes). 1) Remove discrimination, harassment and victimisation 2) Promote equality of opportunity 3) Foster good relations between protected characteristics 4) Not applicable 	home visit and telephone service which significantly increased uptake. (Due regard to promoting equality of opportunity) * The Child Poverty (Scotland) Act 2017 requires organisations to take actions to reduce poverty for children in households at risk of low incomes.		
		Example	Service Evidence Provided	Possible negative impact and Additional Mitigating Action Required
5.	Is your service physically accessible to everyone? If this is a policy that impacts on movement of service users through areas are there potential barriers that need to be addressed?	An access audit of an outpatient physiotherapy department found that users were required to negotiate 2 sets of heavy manual pull doors to access the service. A	Service will take place in service users own home, with an aim of repairing and maintaining equipment to improve their ability to live as independently as possible.	

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	Your evidence should show which of the 3 parts of the General Duty have been considered (tick relevant boxes). 1) Remove discrimination, harassment and victimisation 2) Promote equality of opportunity 3) Foster good relations between protected characteristics. 4) Not applicable	request was placed to have the doors retained by magnets that could deactivate in the event of a fire. (Due regard to remove discrimination, harassment and victimisation).		
	1	Example	Service Evidence Provided	Possible negative impact and Additional Mitigating Action Required
6.	How will the service change or policy development ensure it does not discriminate in the way it communicates with service users and staff? Your evidence should show which of the 3 parts of the General Duty have been considered (tick relevant boxes).	Following a service review, an information video to explain new procedures was hosted on the organisation's YouTube site. This was accompanied by a BSL signer to explain service changes to Deaf service users. Written materials were	 All relevant communications will be made through Partners and prescribers, and where necessary direct to service users. It is noted that service users will continue to receive a service with an aim of streamlined and consolidated appointments, with minimal change management required. Access to interpreters, translations and alternative formats will be available on request, in line with business as usual. 	

OFFICIAL 1) Remove discrimination, offered in other harassment and languages and formats. victimisation (Due regard to remove 2) Promote equality of discrimination, opportunity harassment and victimisation and 3) Foster good relations promote equality of between protected opportunity). characteristics 4) Not applicable The British Sign Language (Scotland) Act 2017 aims to raise awareness of British Sign Language and improve access to services for those using the language. Specific attention should be paid in your evidence to show how the service review or policy has taken note of this. **Protected Characteristic** Service Evidence Provided Possible negative impact and 7 **Additional Mitigating Action** Required The service is provided in line with referral from the related care Ongoing review of the impact on the (a) Age group and can cover a wide range of individuals across all age service user will be undertaken as groups, who have a mobility issue and who can benefit from Could the service design or policy content have a business as usual. disproportionate impact on people due to differences in provision of equipment to ensure the can live independently. age? (Consider any age cut-offs that exist in the service design or policy content. You will need to objectively justify in the evidence section any

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	segregation on the grounds of age promoted by the policy or included in the service design).		
	Your evidence should show which of the 3 parts of the General Duty have been considered (tick relevant boxes).		
	1) Remove discrimination, harassment and victimisation		
	2) Promote equality of opportunity		
	3) Foster good relations between protected characteristics.		
	4) Not applicable		
(b)	Disability Could the service design or policy content have a disproportionate impact on people due to the protected characteristic of disability? Your evidence should show which of the 3 parts of the General Duty have been considered (tick relevant boxes). 1) Remove discrimination, harassment and victimisation 2) Promote equality of opportunity 3) Foster good relations between protected	All pertinent information relating to the Store contacting and visiting the service user is provided by the prescriber and noted on the Store System, and allowance for any adjustments or additional support required will be made. For example, if there needs to be a phonecall made ahead of delivery to advise the Service User that the visit is imminent to enable them to have assistance to allow access. It is noted that service users will continue to receive a service with an aim of streamlined and consolidated appointments, with minimal change management required.	Ongoing review of the impact on the service user will be undertaken as business as usual.
	3) Foster good relations between protected characteristics.		

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	4) Not applicable		
	Protected Characteristic	Service Evidence Provided	Possible negative impact and Additional Mitigating Action Required
(c)	Gender Reassignment	No impacts identified at this stage.	·
	Could the service change or policy have a disproportionate impact on people with the protected characteristic of Gender Reassignment?		
	Your evidence should show which of the 3 parts of the General Duty have been considered (tick relevant boxes).		
	1) Remove discrimination, harassment and victimisation		
	2) Promote equality of opportunity		
	3) Foster good relations between protected		
	characteristics		
	4) Not applicable		
	Protected Characteristic	Service Evidence Provided	Possible negative impact and Additional Mitigating Action
(d)	Marriage and Civil Partnership	No impacts identified at this stage.	Required
	Could the service change or policy have a disproportionate impact on the people with the		

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	protected characteristics of Marriage and Civil Partnership?		
	Your evidence should show which of the 3 parts of the General Duty have been considered (tick relevant boxes).		
	1) Remove discrimination, harassment and victimisation		
	2) Promote equality of opportunity		
	3) Foster good relations between protected characteristics		
	4) Not applicable		
e)	Pregnancy and Maternity	No impacts identified at this stage.	
	Could the service change or policy have a disproportionate impact on the people with the protected characteristics of Pregnancy and Maternity?		
	Your evidence should show which of the 3 parts of the General Duty have been considered (tick relevant boxes).		
	1) Remove discrimination, harassment 📑 victimisation		
	2) Promote equality of opportunity		
	3) Foster good relations between protected characteristics.		

	4) Not applicable			
	Protected Characteristic	Service Evidence Provided	Possible negative impact and Additional Mitigating Action Required	
(f)	Race Could the service change or policy have a disproportionate impact on people with the protected characteristics of Race? Your evidence should show which of the 3 parts of the General Duty have been considered (tick relevant boxes). 1) Remove discrimination, harassment and victimisation 2) Promote equality of opportunity 3) Foster good relations between protected characteristics 4) Not applicable	In conjunction with the advice and direction from the prescriber, I translation and interpreter resources will be accessed if required to support visits or communications.	Ongoing review of the impact on the service user will be undertaken as business as usual.	
(g)	Religion and BeliefCould the service change or policy have a disproportionate impact on the people with the protected characteristic of Religion and Belief?Your evidence should show which of the 3 parts of the General Duty have been considered (tick relevant boxes).1) Remove discrimination, harassment and	As directed by the Prescriber the store staff will respond to any requests to accommodate requirements, on entering the service users home in relation to Religion and Belief as part of the day to day operation of the service. This service change should have no impact on people with this protected characteristic.	Ongoing review of the impact on the service user will be undertaken as business as usual.	

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	victimisation		
	2) Promote equality of opportunity		
	3) Foster good relations between protected characteristics.		
	4) Not applicable		
	Protected Characteristic	Service Evidence Provided	Possible negative impact and Additional Mitigating Action Required
(h)	Sex Could the service change or policy have a disproportionate impact on the people with the protected characteristic of Sex? Your evidence should show which of the 3 parts of the General Duty have been considered (tick relevant boxes). 1) Remove discrimination, harassment and victimisation 2) Promote equality of opportunity 3) Foster good relations between protected characteristics. 4) Not applicable	As directed by the Prescriber the store staff will respond to any requests to accommodate requirements in relation to Sex as part of the day to day operation of the service. This service change should have no impact on people with this protected characteristic. It is recognised that some service users may have been victims of gender based violence and as a result have concerns with someone of the opposite sex entering the home. This will be highlighted by the Prescriber and steps taken to accommodate any requests including for the Prescriber to be present or sending female store member to undertake the visit.	Ongoing review of the impact on the service user will be undertaken as business as usual.
(i)	Sexual Orientation	No impacts identified at this stage.	

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	Could the service change or policy have a disproportionate impact on the people with the protected characteristic of Sexual Orientation? Your evidence should show which of the 3 parts of the General Duty have been considered (tick relevant boxes).		
	1) Remove discrimination, harassment and victimisation		
	2) Promote equality of opportunity		
	3) Foster good relations between protected characteristics.		
	4) Not applicable		
	Protected Characteristic	Service Evidence Provided	Possible negative impact and
			Additional Mitigating Action Required
j)	Socio – Economic Status & Social Class	There will be no cost to the service user. No impacts on socio economic status have been identified.	
	Could the proposed service change or policy have a disproportionate impact on people because of their social class or experience of poverty and what mitigating action have you taken/planned?		
	The Fairer Scotland Duty (2018) places a duty on public bodies in Scotland to actively consider how they can reduce inequalities of outcome caused by		
	socioeconomic disadvantage when making <u>strategic</u> decisions. If relevant, you should evidence here what		

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steps have been taken to assess and mitigate risk of exacerbating inequality on the ground of socio- economic status. Additional information available		
here: Fairer Scotland Duty: guidance for public bodies		
- gov.scot (www.gov.scot)		
Seven useful questions to consider when seeking to		
demonstrate 'due regard' in relation to the Duty:		
1. What evidence has been considered in preparing		
for the decision, and are there any gaps in the		
evidence?		
2. What are the voices of people and communities		
telling us, and how has this been determined		
(particularly those with lived experience of socio-		
economic disadvantage)?		
3. What does the evidence suggest about the actual or		
likely impacts of different options or measures on		
inequalities of outcome that are associated with socio-		
economic disadvantage?		
4. Are some communities of interest or communities		
of place more affected by disadvantage in this case		
than others?		
5. What does our Duty assessment tell us about socio-		
economic disadvantage experienced		
disproportionately according to sex, race, disability		
and other protected characteristics that we may need		
to factor into our decisions?		
6. How has the evidence been weighed up in reaching		
our final decision?		
7. What plans are in place to monitor or evaluate the		
impact of the proposals on inequalities of outcome		
that are associated with socio-economic		
disadvantage? 'Making Fair Financial Decisions'		
(EHRC, 2019)21 provides useful information about		
the 'Brown Principles' which can be used to		

engaging with communities the National Standards for Community Engagement22 should be followed. Those engaged with should also be advised subsequently on how their contributions were factored into the final decision. No impacts identified at this stage. (k) Other marginalised groups No impacts identified at this stage. How have you considered the specific impact on other groups including homeless people, prisoners and ex- offenders, ex-service personnel, people with addictions, people involved in prostitution, asylum seekers & refugees and traveliers? No impacts identified at this stage. 8. Does the service change or policy development include an element of cost savings? How have you managed this in a way that will not disproportionately impact on protected characteristic groups? This EQIA aligns with the IJB Financial Allocations and Budgets paper, being presented to IJB members in November 2024. Your evidence should show which of the 3 parts of the General Duty have been considered (tick relevant boxes). This EQIA aligns with the IJB Financial Allocations and Budgets paper, being presented to IJB members in November 2024. 1) Remove discrimination, harassment and victimisation Current arrangements mean that the service user may be subject to visits from multiple contractors, and it was acknowledged that the process could be streamlined. As a result, it is proposed to bring inhouse the repairs and maintenance service. Out of hours repairs would still be contracted for. This is anticipated to generate a saving.		Service Evidence Provided	Possible negative impact and Additional Mitigating Action
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for Community Engagement22 should be followed. Those engaged with should also be advised subsequently on how their contributions were factored) Other marginalised groups	No impacts identified at this stage.	
determine whether due regard has been given. When	engaging with communities the National Standards for Community Engagement22 should be followed. Those engaged with should also be advised subsequently on how their contributions were factored		

		Required
9. What investment in learning has been made to prevent discrimination, promote equality of opportunity and foster good relations between protected characteristic groups? As a minimum include recorded completion rates of statutory and mandatory learning programmes (or local equivalent) covering equality, diversity and human rights.	All HSCP staff are encouraged to complete the equality GOLD module. Equality is also included in induction training.	

10. In addition to understanding and responding to legal responsibilities set out in Equality Act (2010), services must pay due regard to ensure a person's human rights are protected in all aspects of health and social care provision. This may be more obvious in some areas than others. For instance, mental health inpatient care or older people's residential care may be considered higher risk in terms of potential human rights breach due to potential removal of liberty, seclusion or application of restraint. However risk may also involve fundamental gaps like not providing access to communication support, not involving patients/service users in decisions relating to their care, making decisions that infringe the rights of carers to participate in society or not respecting someone's right to dignity or privacy.

The Human Rights Act sets out rights in a series of articles – right to Life, right to freedom from torture and inhumane and degrading treatment, freedom from slavery and forced labour, right to liberty and security, right to a fair trial, no punishment without law, right to respect for private and family life, right to freedom of thought, belief and religion, right to freedom of expression, right to freedom of assembly and association, right to marry, right to protection from discrimination.

Please explain in the field below if any risks in relation to the service design or policy were identified which could impact on the human rights of patients, service users or staff.

Please explain in the field below any human rights based approaches undertaken to better understand rights and responsibilities resulting from the service or policy development and what measures have been taken as a result e.g. applying the PANEL Principles to maximise Participation, Accountability, Non-discrimination and Equality, Empowerment and Legality or FAIR*.

- Facts: What is the experience of the individuals involved and what are the important facts to understand?
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- Analyse rights: Develop an analysis of the human rights at stake Identify responsibilities: Identify what needs to be done and who is responsible for doing it ٠
- Review actions: Make recommendations for action and later recall and evaluate what has happened as a result.

Having completed the EQIA template, please tick which option you (Lead Reviewer) perceive best reflects the findings of the assessment. This can be cross-checked via the Quality Assurance process:

Option 1: No major change (where no impact or potential for improvement is found, no action is required)

Option 2: Adjust (where a potential or actual negative impact or potential for a more positive impact is found, make changes to mitigate risks or make improvements)

Option 3: Continue (where a potential or actual negative impact or potential for a more positive impact is found but a decision not to make a change can be objectively justified, continue without making changes)

Option 4: Stop and remove (where a serious risk of negative impact is found, the plans, policies etc. being assessed should be halted until these issues can be addressed)

11. If you believe your service is doing something that 'stands out' as an example of good practice - for instance you are routinely collecting patient data on sexual orientation, faith etc. - please use the box below to describe the activity and the benefits this has brought to the service. This information will help others consider opportunities for developments in their own services.

Actions – from the additional mitigating action requirements boxes completed above, please summarise the actions this service will be taking forward.	Date for completion	Who is responsible?(initials)
Ongoing review of the impact on the service user will be undertaken as business as usual.	Initial reviews 6 and 1	12 month post change

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

Lead Reviewer: EQIA Sign Off:	Name Job Title Signature	Gillian Hennon Head of Finance
	Date	04/11/2024
Quality Assurance Sign Off:	Name Dr Noree Job Title Plann Signature Date 4/11/2024	en Shields ing and Development Manager



NHS GREATER GLASGOW AND CLYDE EQUALITY IMPACT ASSESSMENT TOOL MEETING THE NEEDS OF DIVERSE COMMUNITIES 6 MONTHLY REVIEW SHEET

Name of Policy/Current Service/Service Development/Service Redesign:

Please detail activity undertaken with regard to actions highlighted in the original EQIA for this Service/Policy

	Comp	leted
	Date	Initials
Action:		
Status:		
Action:		
Status:		
Action:		
Status:		
Action:		
Status:		

Please detail any outstanding activity with regard to required actions highlighted in the original EQIA process for this Service/Policy and reason for non-completion

	To be Co	To be Completed by	
	Date	Initials	
Action:			
Reason:			
Action:			
Reason:			

Please detail any new actions required since completing the original EQIA and reasons:

To be com		pleted by	
		Date	Initials
Action:			
Reason:			
Action:			
Reason:			

Please detail any discontinued actions that were originally planned and reasons:

Action:	
Reason:	
Action:	
Reason:	

Please write your next 6-month review date

Name of completing officer:

Date submitted:

If you would like to have your 6 month report reviewed by a Quality Assuror please e-mail to: alastair.low@ggc.scot.nhs.uk