



# **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:

Glasgov	v Dementia Resource Centre			
ls this a:	Current 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 2025-26 paper, being presented to IJB members in March 2025.

The Alzheimer Scotland Glasgow day service is a building-based service designed specifically for people with a diagnosis of dementia. It is registered to provide a support service to a maximum of 8 adults living with dementia per day, at the Glasgow Dementia Resource Centre which is owned by Alzheimer Scotland. The service is delivered 5 days per week. Just prior to lockdown in March 2020, 16 individuals living with dementia were being supported at this service, attending 1-3 building based sessions each per week. Since covid the numbers attending the centre have dropped significantly and it is the view of Alzheimers senior management that the service is no longer sustainable, they are currently supporting an average of five service users per week. Restrictions were eased following Covid, however the number of referrals remained low.

For some time, the current over 65's day care service has been both underutilised and financially unviable. Alzheimers Scotland proposed to develop a funded Community Connections Programme in partnership with Glasgow City (HSCP), the proposed model comprises an outreach service and community groups, with a request for additional funding. Consideration was given to the proposal and options explored but it was deemed as not feasible. Alzheimers have indicated that should this proposal not be endorsed then they will proceed and give notice to close the Day Centre.

On consideration of the proposal to redesign provision, it was acknowledged that alternatives are available for this client group through the existing Framework providers and or directly provided Building Based Day Services (HSCP) and there were concerns around low occupancy at the service.

The proposal is to support the planned closure of the BB Day Service and end the contract. The contract has been extended until April 2026 and transition arrangements will take place during this time. There are no TUPE implications.

Given the stage of this programme of work, the EQIA will be reviewed and updated in line with the 6 month review process.

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)

# 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):

		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.	Limited equality information is currently available, although noted that this is an Older People's service and for people with alzheimers. Current data collected refers to service user numbers, feedback and to inform service design	Service users will access alternative provision, through existing framework providers or directly provided Older Adult building based Day Services. Equality data monitoring has been built into commissioning contract management and reported on a 6 monthly basis.
	1	Example	Service Evidence Provided	Possible negative impact and Additional

_				Mitigating Action Required
2.	<ul> <li>how data captured has been/will be used to inform policy content or service design.</li> <li>Your evidence should show which of the 3 parts of the General Duty have been considered (tick relevant boxes).</li> <li>1) Remove discrimination, harassment and victimisation</li> </ul>	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)	Data is used to "redesign" services where appropriate e.g. Alzheimers Scotland tailored their service to meet service user needs following the covid pandemic where there was a need for smaller groups and social distancing. This was to ensure that services continued to meet service users needs.	Service users will access alternative provision, through existing framework providers or directly provided building based Day Services for older adults. Equality data monitoring has been built into commissioning contract management and reported on a 6 monthly basis.
	_	Example	Service Evidence Provided	Possible negative impact and Additional Mitigating Action Required
3.	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 environment. Research suggested that young	Alzheimers Scotland submitted a proposal to reconfigure the service as they highlighted for some time, the current over 65's day care service has been both underutilised and financially unviable. Following this the commissioning team undertook a scoping exercise to consider their proposal,	

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which of the 3 parts of the	LGBT+ people had a	alternative provision and the needs of the service	
General Duty have been	disproportionately	users and if these needs could be met by existing	
considered (tick relevant	difficult time through	in house day care provision or via other	
boxes).	exposure to bullying and	framework providers that there are contracts with.	
	harassment. As a result		
1) Remove discrimination,	staff were trained in	The proposed model comprised an outreach	
harassment and	LGBT+ issues and were	service and community groups. The focus on	
victimisation	more confident in asking	the Outreach service is to identify outcomes	
	related questions to	that the individual would like to achieve and	
2) Promote equality of	young people.	helping co-produce a personal plan to work	
opportunity 🔤	(Due regard to removing	towards this, including; Increase in social	
	discrimination,	interaction and identifying new meaningful	
3) Foster good relations	harassment and	activities and increasing involvement in local	
between protected	victimisation and	community.	
characteristics	fostering good relations).		
	i octoring good rolationoji	Community Groups are a support provision for	
4) Not applicable		people living with dementia and their loved	
		ones. It was highlighted that there should be a	
		variety and hosted within community locations to ensure the service is as accessible and	
		inclusive as possible. This includes; Activity,	
		exercise, socializing, peer support and Carer's	
		support	
		ouppoint	
		It was felt that this was in place via a number of	
		Older People providers on the framework as well	
		as our directly provided Building based Day Services across the HSCP. Our service spec for	
		day services includes:	
		Building based day care	
		<ul> <li>Building based day opportunities</li> </ul>	
		Group work programmes	
		Drop-in support	
		Vocational Support Services	
		Community based day opportunities	
		Employability support	

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		Example	Service Evidence Provided	Possible negative impact and Additional Mitigating Action Required		
4.	Can you give details of how you have engaged with equality groups with regard to the service review or policy development? What did this engagement tell you about user experience and how was this information used? The Patient Experience and Public Involvement team (PEPI) support NHSGGC to listen 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	A money advice service spoke to lone parents (predominantly women) to better understand barriers to accessing the service. Feedback included concerns about waiting times at the drop in service, made more difficult due to child care issues. As a result the service introduced a 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.	Initial conversations with Alzheimers Scotland have taken place around their proposal. They have a preference to redesign the service and have advised they are likely to serve notice if this is not possible. Further engagement will be required following decision making. Due to the sensitivity around budget proposals, there has not yet been engagement with service users and their families, this will be required during the notice period of the contract to support people through transition and ensure their voices are heard as part of considerations of alternative provision. Alzheimers Scotland regularly engage with service users and their families and carers and this is reported back via contract management. Feedback is generally positive	The 2019 Framework contract has been extended until April 2026 and transition arrangements will take place during this time. This will include ongoing engagement with Alzheimers Scotland and with service users to support transition. Engagement with service users will be on an individual basis, with their families and carers to identifying alternative day services would be supported via the relevant Social Work Locality Team and would include an individual review to ensure their needs continue to be met via the Social Work eligibility criteria.		

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		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?         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	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 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).	The current provision is Disability Compliant	Alternative provision options include a range of building based or outreach services. Transition will include matching alternative provision with service users needs.	
		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	Following a service review, an information video to explain new procedures was hosted	Communication with the service users, their families and carers will be undertaken by the provider who has been working closely with the individuals. This will include advocacy support,		

communicates with service			
Your evidence should show which of the 3 parts of the General Duty have been considered (tick relevant boxes). 1) Remove discrin_ation, harassment and victimisation 2) Promote equality of opportunity	on the organisation's YouTube site. This was accompanied by a BSL signer to explain service changes to Deaf service users. Written materials were offered in other languages and formats. (Due regard to remove discrimination, harassment and victimisation and	as needed. Clear messaging is required with service users, their families and carers on the reviews that will be undertaken and that alternative provision will be sought to meet individual needs. Service users will have access to interpreters, translations and alternative formats, in line with business as usual.	
<ul> <li>3) Foster good relations between protected characteristics</li> <li>4) Not applicable</li> <li>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.</li> <li>Specific attention should be paid in your evidence to show how the service review or policy has taken note of this.</li> </ul>	promote equality of opportunity).		
Protected Characteristic		Service Evidence Provided	Possible negative impact and Additional

			Mitigating Action Required
(a)	Age         Could the service design or policy content have a disproportionate impact on people due to differences in 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 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	This proposal is more likely to impact on older people, due to the nature of the service that is being provided. The service is open to adults over 18, but is mainly attended by Older People.	Mitigating Action RequiredSince covid the numbers attending the centre have dropped significantly and it is the view of Alzheimers senior management that the service is no longer sustainable, they are currently supporting an average of five service users per week.The contract has been extended until April 2026 and transition arrangements will take place during this time.Identifying alternative day services would be supported via the relevant Social Work Locality Team and would include an individual review to ensure their needs continue to be met via the Social 
(b)	Disability	This proposal is more likely to impact on people	Employability support     As above
	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).	<ul><li>with a disability, due to the nature of the service that is being provided, the service is targeted at people with an Alzheimers diagnosis.</li><li>Services users may also have other disabilities, which will be considered through their social work needs analysis to identify appropriate alternative services.</li></ul>	It is recognised that due to the vulnerability of this service user group that there may be increased anxiety over moving to alternative provision for the service user, their family and carers. Service users will be supported through the transition process in partnership with Alzheimers Scotland and with advocacy
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### **OFFICIAL** A variety of building based and community based support, where needed. 1) Remove discrimination, harassment d services are available to support accessibility victimisation needs. 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 (c) Gender Reassignment No specific impacts identified at this time As above 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 Required No specific impacts identified at this time (d) Marriage and Civil Partnership As above

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	Could the service change or policy have a disproportionate impact on the people with the 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		
	4) Not applicable		
e)	Pregnancy and Maternity 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	No specific impacts identified at this time	As above
	2) Promote equality of opportunity		

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	3) Foster good relations between protected		
	characteristics.		
	4) Not applicable		
	Dura ta a ta di Ola ana ata alia ti a	Ormána Frádemas Descádad	Describle as wetting increased and Additional
	Protected Characteristic	Service Evidence Provided	Possible negative impact and Additional
			Mitigating Action Required
(f)	Race	No specific impacts identified at this time	As above
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	Could the service change or policy have a	None of the current service users require	
	disproportionate impact on people with the protected	interpreter or translation support, however this	
	characteristics of Race?	would be a consideration as part of identifying	
	characteristics of Race?	alternative provision as and when needed.	
	Your evidence should show which of the 3 parts of the		
	General Duty have been considered (tick relevant		
	boxes).		
	····)		
	1) Remove discrimination, harassment and		
	2) Promote equality of opportunity		
	2) Factor good valations between protected		
	3) Foster good relations between protected		
	characteristics		
	4) Not applicable		
(g)	Religion and Belief	No specific impacts identified at this time	As above
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	Could the service change or policy have a	Cultural needs would also be a consideration and	
	disproportionate impact on the people with the	discussed with the individual in line with Social	
		work review and assessment and reflected in the	
	protected characteristic of Religion and Belief?	service users care plan.	
	Your evidence should show which of the 3 parts of the		
	General Duty have been considered (tick relevant		
	boxes).		
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	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
(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	It is also recognised that a disproportionate number of carers are female, potentially on low incomes. There are currently four female service users and one male attending the service. Carers assessments will be available during the review process for each service user who is currently accessing the Centre.	A reduction in provision or increase in waiting list time will have an impact on service users as well as carers. Carer support will continue to be available. Considerations of Carer support would be identified through the review process and appropriate referrals made, in line with business as usual.
(i)	Sexual Orientation	No specific impacts identified at this time	As above

#### OFFICIAL It is recognised that Older LGBTI+ people may be Could the service change or policy have a Currently no service users have identified isolated from family and social networks. a need for support related to their sexual disproportionate impact on the people with the orientation, however personal protected characteristic of Sexual Orientation? preferences and needs would continue to be considered through the review Your evidence should show which of the 3 parts of the process. 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 Socio – Economic Status & Social Class No anticipated impact on those living in poverty. As above (i) The current day care services are chargeable and Could the proposed service change or policy have a alternative services will also be chargeable in line disproportionate impact on people because of their with the Social Work Charging Policy. The social class or experience of poverty and what Charging Policy has a number of mitigations and mitigating action have you taken/planned? exceptions in place and is subject to an annual equality impact assessment, in line with the Policv The Fairer Scotland Duty (2018) places a duty on public review. This eqia can be accessed here. bodies in Scotland to actively consider how they can reduce inequalities of outcome caused by Some service users are supported with transport socioeconomic disadvantage when making strategic to and from the day care service. This will decisions. If relevant, you should evidence here what continue to be available for alternative services. steps have been taken to assess and mitigate risk of exacerbating inequality on the ground of socioeconomic status. Additional information available here:Fairer Scotland Duty: guidance for public bodies

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<u>- gov.scot (www.gov.scot)</u>		
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		
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		

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	subsequently on how their contributions were factored into the final decision.		
(k)	Other marginalised groups 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 travellers?	No direct impacts identified at this time.	As above
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?         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	This EQIA aligns with the IJB Financial Allocations and Budgets 2025-26 paper, being presented to IJB members in March 2025. For some time, the current over 65's day care service has been both underutilised and financially unviable. Alzheimers Scotland proposed to develop a funded Community Connections Programme in partnership with Glasgow City (HSCP), the proposed model comprises an outreach service and community groups, with a request for additional funding. Consideration was given to the proposal and options explored but it was deemed as not feasible. Alzheimers Scotland have indicated that should this proposal not be endorsed then they will proceed and give notice to close the Day Centre. On consideration of the proposal to redesign provision, it was acknowledged that alternatives are available for this client group through the existing Framework providers and or directly provided BB Day Services (HSCP) and there were concerns around low occupancy at the service.	As above

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		The proposal is to support the planned closure of the BB Day Service and end the contract.	
	<u> </u>	Service Evidence Provided	Possible negative impact and Additional Mitigating Action 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.	Equality training is a requirement of contract management.	Equality training will continue to be a requirement of alternative service provision

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?
- Analyse rights: Develop an analysis of the human rights at stake

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- Identify responsibilities: Identify what needs to be done and who is responsible for doing it
- 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:

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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)
In partnership with Alzheimers Scotland engage with current service users and their families on the closure of the service and support accessing alternative provision.	Following approva Lithgow	al by IJB Brian

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

Lead Reviewer: EQIA Sign Off:	Name Job Title	Liam Herbert Head of Planning and Strategy Older People Services & South Locality
Quality Assurance Sign Off:	Signature Date Name	21/02/2025 A Low
	Job Title Signature Date	Planning Manager A Low 10/03/25



### 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 Cor	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 comp		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