

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:

Glasgow Dementia Resource Centre

Is 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.

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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: Brian Lithgow, Principal Officer, Older Adults Commissioning.	Date of Lead Reviewer Training:
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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):

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		<i>Example</i>	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.	<i>A sexual health service collects service user data covering all 9 protected characteristics to enable them to monitor patterns of use.</i>	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.
		<i>Example</i>	Service Evidence Provided	Possible negative impact and Additional

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				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 ☐	<i>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)</i>	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.
		<i>Example</i>	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? Your evidence should show	<i>Looked after and accommodated care services reviewed a range of research evidence to help promote a more inclusive care environment. Research suggested that young</i>	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 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 ☐	<i>LGBT+ people had a disproportionately difficult time through exposure to bullying and harassment. As a result staff were trained in LGBT+ issues and were more confident in asking related questions to young people. (Due regard to removing discrimination, harassment and victimisation and fostering good relations).</i>	alternative provision and the needs of the service users and if these needs could be met by existing in house day care provision or via other framework providers that there are contracts with. The proposed model comprised an outreach service and community groups. The focus on the Outreach service is to identify outcomes that the individual would like to achieve and helping co-produce a personal plan to work towards this, including; Increase in social interaction and identifying new meaningful activities and increasing involvement in local community. Community Groups are a support provision for 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 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 • Building based day opportunities • Group work programmes • Drop-in support • Vocational Support Services • Community based day opportunities • Employability support	
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		<i>Example</i>	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 ☐	<i>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.</i> <i>(Due regard to promoting equality of opportunity)</i> <i>* The Child Poverty (Scotland) Act 2017 requires organisations to take actions to reduce poverty for children in households at risk of low incomes.</i>	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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		<i>Example</i>	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 ☐	<i>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).</i>	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.
		<i>Example</i>	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	<i>Following a service review, an information video to explain new procedures was hosted</i>	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,	

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	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). 1) Remove discrimination, harassment and victimisation ☐ 2) Promote equality of opportunity ☐ 3) Foster good relations between protected 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.	<i>on the organisation's YouTube site. This was accompanied by a BSL signer to explain service changes to Deaf service users.</i> <i>Written materials were offered in other languages and formats.</i> <i>(Due regard to remove discrimination, harassment and victimisation and promote equality of opportunity).</i>	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.	
7	Protected Characteristic	Service Evidence Provided	Possible negative impact and Additional	

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			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.	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. 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 Work eligibility criteria. Current day services available include: • Building based day care • Building based day opportunities • Group work programmes • Drop-in support • Vocational Support Services • Community based day opportunities • Employability support
(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).	This proposal is more likely to impact on people with a disability, due to the nature of the service that is being provided, the service is targeted at people with an Alzheimers diagnosis. Services users may also have other disabilities, which will be considered through their social work needs analysis to identify appropriate alternative services.	As above 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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	1) Remove discrimination, harassment and victimisation ☐ 2) Promote equality of opportunity ☐ 3) Foster good relations between protected characteristics. ☐ 4) Not applicable ☐	A variety of building based and community based services are available to support accessibility needs.	support, where needed.
	Protected Characteristic	Service Evidence Provided	Possible negative impact and Additional Mitigating Action Required
(c)	Gender Reassignment 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 ☐	No specific impacts identified at this time	As above
	Protected Characteristic	Service Evidence Provided	Possible negative impact and Additional Mitigating Action Required
(d)	Marriage and Civil Partnership	No specific impacts identified at this time	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 ☐ 2) Promote equality of opportunity ☐ 3) Foster good relations between protected characteristics ☐ 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 and victimisation ☐ 2) Promote equality of opportunity ☐	No specific impacts identified at this time	As above

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	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 ☐	No specific impacts identified at this time None of the current service users require interpreter or translation support, however this would be a consideration as part of identifying alternative provision as and when needed.	As above
(g)	Religion and Belief Could 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).	No specific impacts identified at this time Cultural needs would also be a consideration and discussed with the individual in line with Social work review and assessment and reflected in the service users care plan.	As above

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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

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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 ☐	It is recognised that Older LGBTI+ people may be isolated from family and social networks.	Currently no service users have identified a need for support related to their sexual orientation, however personal preferences and needs would continue to be considered through the review process.
	Protected Characteristic	Service Evidence Provided	Possible negative impact and Additional Mitigating Action Required
(j)	Socio – Economic Status & Social Class 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 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	No anticipated impact on those living in poverty. The current day care services are chargeable and alternative services will also be chargeable in line with the Social Work Charging Policy. The Charging Policy has a number of mitigations and exceptions in place and is subject to an annual equality impact assessment, in line with the Policy review. This eqia can be accessed here. Some service users are supported with transport to and from the day care service. This will continue to be available for alternative services.	As above

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- 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 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.	
		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.

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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
- **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.

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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)

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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.

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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 approval by IJB Brian Lithgow

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

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Lead Reviewer:

EQIA Sign Off:

Name

Job Title

Signature

Date

Liam Herbert

Head of Planning and Strategy
Older People Services & South Locality

21/02/2025

Quality Assurance Sign Off:

Name

Job Title

Signature

Date

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Planning Manager

A Low

10/03/25

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**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:

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

		Completed	
		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 Completed by	
		Date	Initials
Action:			
Reason:			
Action:			
Reason:			

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

		To be completed 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

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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

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