

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. Please refer to the EQIA Guidance Document while completing this form. 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 CITAdminTeam@ggc.scot.nhs.uk for further details or call 0141 2014560.

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

Adult Services Transformational Change Programme 2018-21 Progress Report: Integration of Learning Disability Services

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).

LD services in GCHSCP provide a range of health and social care services to support those people with a diagnosed learning disability. In January 2018, IJB members noted the content of the Adult Services Transformational Change Programme 2018-21 which set out the service reform programme for LD services. The proposals set out in the new paper to the IJB, which this EQIA accompanies, are consistent with the service reform programme set out in the aforementioned paper.

Pursuing a more integrated service model is in line with the aspirations of Public Bodies (Joint Working) Act 2014 which aims to “improve the quality and consistency of services for patients, carers, service users and their families; to provide seamless, joined up quality health and social care services in order to care for people in their homes or a homely setting where it is safe to do so.” (Scottish Parliament briefing 2016). By working in a more integrated way, service user outcomes should be improved through quicker access to multi-disciplinary care planning, more joined up care pathways within and out with specialist LD services, and underpinned by more efficient and effective operational processes.

The introduction of a more integrated service delivery model within GCHSCP’s LD services will contribute to the delivery of strategic priorities and actions relevant to people with a learning disability set out in the IJB’s strategic plan 2019-22. In particular, the priorities of ‘early intervention, prevention and harm reduction’, ‘enabling independent living for longer’ and ‘providing greater self-determination and choice’.

This EQIA accompanies a paper to the IJB setting out the actions that will be taken to progress the integration of LD services and to assure IJB members, service users, carers and the wider public that the work will be informed by an EQIA as part of the ongoing commitment to delivering inequalities sensitive practice.

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: Katrina Phillips, Head of Adult Services, NE Glasgow

Date of Lead Reviewer Training: October 2017

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):

LD Operational Management Team Meeting : Katrina Phillips, Head of Adult Services NE, Gareth Greenaway, Planning Manager, NW
 LD Service Managers: Maggie Hart, Linda MacKay, Lynn MacPherson, Angela McHendry, Marion Rooney, Debbie Miller, Commissioning Manager (Personalisation), Yvonne Johnstone, Service Manager

	Lead Reviewer Question	Service Evidence Provided	Future Actions
1.	<p>What equalities information is routinely collected from people using the service or affected by the policy? Please note any barriers to collecting this data in your submitted evidence and an explanation for any protected characteristic data omitted.</p>	<p>Equalities information across all 9 protected characteristics is collected as part of an individual service user's assessment and outcome based support plan. This information is then captured on GCHSCP's Carefirst system. There is an annual return to the Scottish Government that provides a snap-shot of GCHSCP learning disability services users at a point in time. This includes some equalities information, including sex and ethnicity. The 2018 return identified a total of 2154 service users on Carefirst within Glasgow City at the time of the return. Of these, 58% were male and 42% female*. 91% of those service users identified their ethnicity as 'white Scottish', 3% as 'Asian, Pakistani'**, 4.5% are shared across other ethnic groups**, and 1.5% 'not known'. *in line with national averages ** higher than national averages</p>	<p>Presently, it is a very resource intensive exercise to extract and evaluate equalities information collected on Carefirst, beyond that which is extractable for the annual return. Most equalities related information is not routinely available electronically. It is understood the modifications to the Carefirst system are being explored that may address this deficit. Clarity on the expected timescales for this will be sought.</p>
	Lead Reviewer Question	Service Evidence Provided	Future Actions
2.	<p>Please provide details of changes to the service or Policy or how they have been informed as a result of collecting routine data.</p> <p>Your evidence should show due regard to meeting the 3 parts of the General Duty. Tick all that have been included in your evidence (at least one required).</p> <p>1) Remove discrimination, harassment and victimisation <input type="checkbox"/></p>	<p>Not applicable at this stage for above reason. However, the test for change work around moving to a more integrated service delivery model will be informed by an analysis of equalities information routinely collected.</p>	<p>Given the current limitations in readily extracting the full range of equalities information electronically, the service will look to undertake a sample audit of equalities information to guide the test for change work programme. Completion of this will provide evidence of compliance towards meeting the General Duty.</p>

	<p>2) Promote equality of opportunity <input type="checkbox"/></p> <p>3) Foster good relations between protected characteristics. <input type="checkbox"/></p>		
	Lead Reviewer Question	Service Evidence Provided	Future Actions
3.	<p>How have you applied learning from research evidence about the experience of equality groups to the service or Policy?</p> <p>Your evidence should show due regard to meeting the 3 parts of the General Duty. Tick all that have been included in your evidence (at least one required).</p> <p>1) Remove discrimination, harassment and victimisation <input checked="" type="checkbox"/></p> <p>2) Promote equality of opportunity <input checked="" type="checkbox"/></p> <p>3) Foster good relations between protected characteristics <input checked="" type="checkbox"/></p>	<p>Research from the Learning Disabilities Observatory suggests that a disproportionate proportion of people with a learning disability face health inequalities which start early in life and result from barriers they face in accessing timely, appropriate and effective healthcare. It suggests people with a learning disability have a shorter life expectancy and increased risk of early death; higher levels of physical and mental health needs; proportionally higher rates of some cancers and coronary heart disease; and experience rates of respiratory disease as the leading cause of death at a level twice as high as others. It also suggests that, as older adults, people with learning disability experience higher rates of dementia. Over 50% of women with learning disabilities are classed as obese. (Health Inequalities & People with Learning Disabilities in the UK (2010), Learning Disabilities Observatory)</p> <p>This above research has reinforced the need to improve pathways and joint protocols between GCHSCP learning disability services and wider specialist and mainstream services. As referred to in the accompanying IJB paper, the test for change work will consider:</p> <ul style="list-style-type: none"> • Ensuring eligibility criteria remains fit for purpose and is applied consistently • The introduction of joint integrated protocols, operating procedures and governance arrangements. • Ways in which access can be improved for service users, both in terms of the ability to access specialist support and in terms of the ability to then have quicker access to other levels of support out with LD services as necessary. • The status of existing joint protocols and care pathways with non-LD services, particularly for those conditions where people with a learning disability experience a higher prevalence or risk, with a view to recommending improvements as necessary. 	<p>Evaluation framework to be developed to include evidence of progress against meeting the 3 parts of the General Duty.</p>

		<ul style="list-style-type: none"> • Looking to extend the range of health clinics offered at day centres. • Improving access to health checks. • Considering alternative and more timeous responses to service users or carers in times of 'social or care crisis'. • Supporting consideration of an alternative to hospital care by providing a coordinated approach between learning disability and specialist learning disability services to provide "respite" or increased support for short periods within a structured environment. 	
	Lead Reviewer Question	Service Evidence Provided	Future Actions
4.	<p>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?</p> <p>Your evidence should show due regard to meeting the 3 parts of the General Duty. Tick all that have been included in your evidence (at least one required).</p> <p>1) Remove discrimination, harassment and victimisation <input checked="" type="checkbox"/></p> <p>2) Promote equality of opportunity <input checked="" type="checkbox"/></p> <p>3) Foster good relations <input checked="" type="checkbox"/></p>	<p>GCHSCP has contributed to system-wide work led by ERHSCP to review assessment and treatment inpatient provision. This has included consideration of links to local HSCP community services and teams and included qualitative and quantitative research from practitioners and service users. The process was led by the National Development Team for Inclusion. Findings specific to the service redesign within GCHSCP include:</p> <ul style="list-style-type: none"> • "People who worked in a fully integrated team thought that this approach worked extremely well and could be a good model for other parts of Greater Glasgow and Clyde: "As an integrated team, we can all act for each other, go to meetings for each other, and know what's going on with all the clients on our caseload." • The importance of an overall pathway with all partners, not just about Assessment & Treatment services (Designing and Effective Assessment and Treatment Model NDTi 2018) <p>The current model for day services in Glasgow City was informed by previous day service redesign work in the City, itself informed by a consultation exercise and feedback from service users, carers and community groups. The findings from which were reported to Glasgow City Council in March 2013 and included the aim of ensuring that all adults with learning disabilities are as integrated as possible into the everyday life of their local communities. This was in line with 'The Same As You' national strategy that promoted that day centres to become more community focused by helping people with learning disabilities to access continuing education and development, real jobs, achieve their desired outcomes and become more involved in their communities.</p>	<p>GCHSCP learning disability services have held engagement events in September 2018 with learning disability service users, carers and community groups regarding recent policy and service work. Future engagement events planned for summer 2019 will be extended to include discussion on integrated working.</p> <p>GCHSCP's LD services will seek to develop, in collaboration with service users, carers and representative community organisations, a framework to gather and assess service user and carer feedback of their care experience. This should include people's experiences of inequalities sensitive practice, as part of the HSCP's commitment to meeting the requirements of Equality legislation and addressing health inequalities.</p>

	between protected characteristics	That redesign process still informs the current thinking that day services, provided by GCHSCP, should continue to play a vital role in supporting individuals to live safely and as independently as possible in the community. It is recognised that for people with more complex needs and people with more profound and multiple learning disabilities, day centres will continue to play an important part of their overall support arrangements. The new redesign work will build upon this and look for wider health and social care services, along with the 3 rd sector, to be better integrated with the work of day services – promoting opportunities for prevention and early intervention, as well as better access to other specialist and mainstream services.	
	Lead Reviewer Question	Service Evidence Provided	Future Actions
5.	<p>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?</p> <p>Your evidence should show due regard to meeting the 3 parts of the General Duty. Tick all that have been included in your evidence (at least one required).</p> <p>1) Remove discrimination, harassment and victimisation <input checked="" type="checkbox"/></p> <p>2) Promote equality of opportunity <input checked="" type="checkbox"/></p> <p>3) Foster good relations between protected characteristics. <input checked="" type="checkbox"/></p>	<p>The 2 existing LD services within Glasgow have recently undergone significant upgrade and meet legislative requirements regarding physical accessibility. However, going forward, it is recognised that both buildings have a limited life-span and are compromised by a lack of physical space to fully meet the needs of people attending.</p> <p>Community Learning Disability Teams are in place in each of the 3 GCHSCP Localities, providing a good level of local access for service users.</p>	Undertake an EQIA as part of the planned option appraisal process into the future location and environment for LD day services in Glasgow City, including physical access.
	Lead Reviewer Questions	Service Evidence Provided	Future Actions
6.	How will the service review	All learning disability staff have completed mandatory Equalities training and are aware of the	The governance process around the

<p>or policy development ensure it does not discriminate in the way communicates with service users and staff?</p> <p>Your evidence should show due regard to meeting the 3 parts of the General Duty. Tick all that have been included in your evidence (at least one required).</p> <p>1) Remove discrimination, harassment and victimisation <input checked="" type="checkbox"/></p> <p>2) Promote equality of opportunity <input checked="" type="checkbox"/></p> <p>3) Foster good relations between protected characteristics <input checked="" type="checkbox"/></p> <p>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.</p>	<p>expectation and requirements to ensure communications are undertaken in an exclusive and non-discriminatory way and in line with established guidance (e.g. NHSGGC's Clear to All strategy, including protocols for accessing communication supports).</p> <p>This EQIA will be dynamic and evolve to guide and support the integration work.</p>	<p>integration work will include measures to evidence that communications are reviewed and adapted as necessary to comply with requirements.</p>
---	--	--

7	Protected Characteristic	Service Evidence Provided	Future Actions
(a)	<p>Age</p> <p>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.</p> <p>Your evidence should show due regard to meeting the 3 parts of the General Duty. Tick all that have been included in your evidence (at least one required).</p> <p>1) Remove discrimination, harassment and victimisation <input checked="" type="checkbox"/></p> <p>2) Promote equality of opportunity <input checked="" type="checkbox"/></p> <p>3) Foster good relations between protected characteristics. <input checked="" type="checkbox"/></p>	<p>CLDTs and learning disability day services provide care, support and treatment for adults over the age of 16 years who are assessed as requiring that service. This will not change as part of the move to a more integrated service delivery model. However, the redesign work will provide an opportunity consider whether improvements can be made in relation to the transition arrangements from children’s services. It will also provide an opportunity to consider whether older people with a learning disability are receiving appropriate access to other services for age-related healthcare conditions.</p> <p>The future location(s) of learning disability day services within the City may have implications for older service users or the age profile of carers, in terms of ease of accessibility. An EQIA will be undertaken in relation to the option appraisal process that will consider this factor.</p>	<p>To consider the potential for improving transition protocols and care pathways for age-related conditions.</p> <p>To be considered as part of the EQIA for the option appraisal.</p>
(b)	<p>Disability</p> <p>Could the service design or policy content have a disproportionate impact on people due to the protected characteristic of disability? What opportunities have been explored to make appropriate reasonable adjustments?</p> <p>Your evidence should show due regard to meeting the 3 parts of the General Duty. Tick all that have been included in your evidence (at least one required).</p> <p>1) Remove discrimination, harassment and victimisation <input checked="" type="checkbox"/></p>	<p>It is anticipated the proposals, as set out in the IJB paper, to move to a more integrated services delivery model will improve the quality of care for people with a learning disability. Through better care pathways and promoting inequalities sensitive practice, the service redesign will aim to improve the quality of care and outcomes for all disabilities</p> <p>The future location(s) of learning disability day services within the City may have implications for service users and carers, in terms of ease of accessibility. An EQIA will be undertaken in relation to the option appraisal process that will consider this factor.</p>	<p>To be considered as part of the EQIA for the option appraisal.</p>

	<p>2) Promote equality of opportunity <input checked="" type="checkbox"/></p> <p>3) Foster good relations between protected characteristics. <input checked="" type="checkbox"/></p>		
	Protected Characteristic	Service Evidence Provided	Future Actions
(c)	<p>Gender Identity</p> <p>Could the service change or policy have a disproportionate impact on people with the protected characteristic of gender identity?</p> <p>Your evidence should show due regard to meeting the 3 parts of the General Duty. Tick all that have been included in your evidence (at least one required).</p> <p>1) Remove discrimination, harassment and victimisation <input type="checkbox"/></p> <p>2) Promote equality of opportunity <input type="checkbox"/></p> <p>3) Foster good relations between protected characteristics <input type="checkbox"/></p>	<p>It is not anticipated the proposed service changes will have an impact on people with this protected characteristic.</p>	<p>Continue to ensure services are provided in a person-centred way that delivers inequalities sensitive practice</p>
	Protected Characteristic	Service Evidence Provided	Future Actions
(d)	<p>Marriage and Civil Partnership</p> <p>Could the service change or policy have a disproportionate impact on the people with the protected characteristics of Marriage and Civil Partnership?</p> <p>Your evidence should show due regard to meeting the 3 parts of the General Duty. Tick all that have been included in your evidence (at least one required).</p> <p>1) Remove discrimination, harassment and <input type="checkbox"/></p>	<p>It is not anticipated the proposed service changes will have an impact on people with this protected characteristic.</p>	<p>Continue to ensure services are provided in a person-centred way that delivers inequalities sensitive practice</p>

	<p>victimisation</p> <p>2) Promote equality of opportunity <input type="checkbox"/></p> <p>3) Foster good relations between protected characteristics <input type="checkbox"/></p>		
(e)	<p>Pregnancy and Maternity</p> <p>Could the service change or policy have a disproportionate impact on the people with the protected characteristics of Pregnancy and Maternity?</p> <p>Your evidence should show due regard to meeting the 3 parts of the General Duty. Tick all that have been included in your evidence (at least one required).</p> <p>1) Remove discrimination, harassment and victimisation <input type="checkbox"/></p> <p>2) Promote equality of opportunity <input type="checkbox"/></p> <p>3) Foster good relations between protected characteristics. <input type="checkbox"/></p>	<p>It is not anticipated the proposed service changes will have an impact on people with this protected characteristic.</p>	<p>Continue to ensure services are provided in a person-centred way that delivers inequalities sensitive practice</p>
	Protected Characteristic	Service Evidence Provided	Future Actions
(f)	<p>Race</p> <p>Could the service change or policy have a disproportionate impact on people with the protected characteristics of Race?</p> <p>Your evidence should show due regard to meeting the 3 parts of the General Duty. Tick all that have been included in your evidence (at least one required).</p>	<p>It is not anticipated the proposed service changes will have an impact on people with this protected characteristic.</p>	<p>Continue to ensure services are provided in a person-centred way that delivers inequalities sensitive practice</p>

	<p>1) Remove discrimination, harassment and victimisation <input type="checkbox"/></p> <p>2) Promote equality of opportunity <input type="checkbox"/></p> <p>3) Foster good relations between protected characteristics <input type="checkbox"/></p>		
(g)	<p>Religion and Belief</p> <p>Could the service change or policy have a disproportionate impact on the people with the protected characteristic of Religion and Belief?</p> <p>Your evidence should show due regard to meeting the 3 parts of the General Duty. Tick all that have been included in your evidence (at least one required).</p> <p>1) Remove discrimination, harassment and victimisation <input type="checkbox"/></p> <p>2) Promote equality of opportunity <input type="checkbox"/></p> <p>3) Foster good relations between protected characteristics. <input type="checkbox"/></p>	<p>It is not anticipated the proposed service changes will have an impact on people with this protected characteristic.</p>	<p>Continue to ensure services are provided in a person-centred way that delivers inequalities sensitive practice</p>
	Protected Characteristic	Service Evidence Provided	Future Actions
(h)	<p>Sex</p> <p>Could the service change or policy have a disproportionate impact on the people with the protected characteristic of Sex?</p> <p>Your evidence should show due regard to meeting the 3 parts of the General Duty. Tick all that have been included in your evidence (at least one required).</p>	<p>It is not anticipated the proposed service changes will have an impact on people with this protected characteristic.</p>	<p>Continue to ensure services are provided in a person-centred way that delivers inequalities sensitive practice</p>

	<p>1) Remove discrimination, harassment and victimisation <input type="checkbox"/></p> <p>2) Promote equality of opportunity <input type="checkbox"/></p> <p>3) Foster good relations between protected characteristics. <input type="checkbox"/></p>		
(i)	<p>Sexual Orientation</p> <p>Could the service change or policy have a disproportionate impact on the people with the protected characteristic of Religion and Belief?</p> <p>Your evidence should show due regard to meeting the 3 parts of the General Duty. Tick all that have been included in your evidence (at least one required).</p> <p>1) Remove discrimination, harassment and victimisation <input type="checkbox"/></p> <p>2) Promote equality of opportunity <input type="checkbox"/></p> <p>3) Foster good relations between protected characteristics. <input type="checkbox"/></p>	<p>It is not anticipated the proposed service changes will have an impact on people with this protected characteristic.</p>	<p>Continue to ensure services are provided in a person-centred way that delivers inequalities sensitive practice</p>
	Protected Characteristic	Service Evidence Provided	Future Actions
(j)	<p>Socio – Economic Status & Social Class</p> <p>Could the service change or policy have a disproportionate impact on the people because of their social class or experience of poverty and what mitigating action have you taken/planned?</p>	<p>From national data across all council areas, the proportion of people with learning disabilities living in the most deprived quintile (SIMD 1) was highest in Glasgow City (62.8 per cent vs. 47.9% for people without learning disabilities).</p> <p>It is also known that people in the most disadvantaged or deprived areas are more likely to suffer ill-health and have a shorter life expectancy than those in more affluent areas.</p>	<p>Ensure LD services have good referral and signposting processes in place to financial inclusion and employability support services.</p>

		<p>Local data indicates that over half of the people with a learning disability who are in contact with GCHSCP services are not in employment.</p> <p>It is also recognised that carers are likely to experience significant financial challenges that may have a negative impact on their health and wellbeing.</p> <p>The future location(s) of learning disability day services within the City may have implications for service users and carers, in terms of ease of accessibility. An EQIA will be undertaken in relation to the option appraisal process that will consider this factor.</p>	To be considered as part of the EQIA for the option appraisal.
(j)	<p>Other marginalised groups</p> <p>How have you considered the impact on other groups including homeless people, prisoners and ex-offenders, ex-service personnel, people with addictions, asylum seekers & refugees and travellers?</p>	The nature of moving to a more integrated service model will necessitate ensuring there are integrated referral routes and pathways between LD services and those services that provide specialist care and support to marginalised groups.	Integration workstream to review current referral routes and pathways with services to marginalised groups.
8.	<p>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?</p> <p>Your evidence should show due regard to meeting the 3 parts of the General Duty. Tick all that have been included in your evidence (at least one required).</p> <p>1) Remove discrimination, harassment and victimisation <input type="checkbox"/></p> <p>2) Promote equality of opportunity <input type="checkbox"/></p> <p>3) Foster good relations between protected characteristics. <input type="checkbox"/></p>	<p>It is anticipated that a move to a more integrated service delivery model will result in more efficient and effective working practices. This will improve the service user and patient pathways and clinical and care outcomes.</p> <p>It remains to be determined whether this translates into further financial savings.</p> <p>Accordingly, no cost savings are identified at this point in time for consideration as part of the EQIA.</p>	

	*The Fairer Scotland Duty (2018) places a legal responsibility on public bodies in Scotland to actively consider how they can reduce inequalities of outcome caused by socioeconomic disadvantage in strategic planning.		
	Lead Reviewer Question	Service Evidence Provided	Future Actions
9.	What investment in learning has been made for staff to help prevent discrimination, promote equality of opportunity and foster good relations between protected characteristic groups? As a minimum this should include recorded completion rates of statutory and mandatory learning programmes covering equality, diversity and human rights.	All learning disability staff have completed mandatory Equalities training and are aware of the expectation and requirements to	Continue to monitor that mandatory training is completed for new staff and refreshed for all staff when necessary.

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.

While the service redesign to move to more integrated services is not considered to carry a risk that could impact on people's human rights, the fact that people with a learning disability experience a disproportionate risk of health inequalities means there is an ongoing requirement to take action to mitigate and address that risk.

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* .

Adoption of the PANEL principles will be advanced by the commitment, set out in the IJB paper to develop, in collaboration with service users, carers and representative community organisations, a framework to gather and assess service user and carer feedback of their care experience. This should include people's experiences of inequalities sensitive practice, as part of the HSCP's commitment to meeting the requirements of Equality legislation and addressing health inequalities.

- ***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.

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 requirements boxes completed above, please summarise the actions this service will be taking forward.	Date for completion	Who is responsible?(initials)
<ol style="list-style-type: none"> 1. Clarify if Carefirst can be adapted to improve routine electronic monitoring of equalities data 2. Undertake a sample audit of Carefirst data 3. Evaluation framework to be developed to include evidence of progress against meeting the 3 parts of the General Duty. 4. Process for gathering service user and carer views to be put in place as part of test for change to be established 5. Undertake an EQIA as part of the planned option appraisal process into the future location and environment for LD day services 6. Evidence that communications are reviewed and adapted as necessary to comply with requirements. 7. Consider the potential for improving transition protocols and care pathways for age-related conditions 8. Ensure LD services have good referral and signposting processes in place to financial inclusion and employability support services. 9. Continue to monitor that mandatory training is completed for new staff and refreshed for all staff when necessary. 	<p>By May 2019 By July 2019 By August 2019</p> <p>By August 2019</p> <p>To be determined</p> <p>By September 2019</p> <p>By September 2019</p> <p>By June 2019</p> <p>Ongoing</p>	<p>KP (for all actions)</p>

Ongoing 6 Monthly Review please write your 6 monthly EQIA review date: 21st September 2019

--

**Lead Reviewer:
EQIA Sign Off:**

Name Katrina Philips
Job Title Head of Adult Services, NE Glasgow
Signature
Date 6th March 2019

Quality Assurance Sign Off:

Name Alastair Low
Job Title Planning and Development Manager, Equality and Human Rights Team
Signature
Date 12th March 2019

**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

		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:			

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

--

Name of completing officer:

Date submitted:

Please email a copy of this EQIA review sheet to [CIT](#) or send to Corporate Inequalities Team, NHS Greater Glasgow and Clyde, JB Russell House, Gartnavel Royal Hospitals Site, 1055 Great Western Road, G12 0XH. Tel: 0141-201-4817.