

NHS Greater Glasgow and Clyde Equality Impact Assessment Tool

Equality Impact Assessment is a legal requirement as set out in 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:
NHSGGC HSCPs Community Bed Rails Policy
Is this a: Current Service Service Development Service Redesign New Service New Policy X
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).
What does the service or policy do/aim to achieve? Please give as much information as you can, remembering that this
document will be published in the public domain and should promote transparency.
This is the Community HSCPs policy on the use of bed safety rails, grab sticks and lateral turners. There is an acute version of
this policy, specifically written with inpatient sites in mind. This includes inpatient beds within mental health, ADRS and Learning
disability services. The policy has been written to ensure that all staff that work with patients who use the equipment understand
how this equipment is assessed for, prescribed, fitted, reviewed and risk assessed. Even where the staff member is not directly
involved in the assessment, prescription or review of the equipment.
Why was this service or policy selected for EQIA? Where does it link to organisational priorities? (If no link, please
provide evidence of proportionality, relevance, potential legal risk etc.). Consider any locally identified Specific
Outcomes noted in your Equality Outcomes Report. The primary aim of this EQIA is to ensure the policy underpins the safe
and equitable provision of bed rails and other related equipment in a way that does not exclude potential users on the grounds of
any protected characteristic they may have.
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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)

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	Name: Samantha Flower	Date of Lead Reviewer Training: 15 08 2024

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):

Thomas Gahagan - Equipu Manager

Laura Halcrow - Falls Lead

Kirsty Nicholson - Local Authority Equipment and Adaptations Lead

Diana McCrone - Staff side representative

		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.	Services collect information on all protected characteristics as part of assessment process.	If review information is held on ELMs this will require additions to the data collection fields
		Example	Service Evidence Provided	Possible negative impact and Additional Mitigating Action Required
2.	Please provide details of how data captured has been/will be used to inform policy content or service design. Your evidence should show which of the 3 parts of the General Duty	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	Data will be reviewed at regular intervals to ensure that the population equipment is provided to is representative of our local communities	We may identify under represented communities and need to raise awareness of our services.

	have been considered (tick relevant boxes). 1) Remove discrimination, harassment and victimisation 2) Promote equality of opportunity 3) Foster good relatior between protected characteristics.	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)		
		Example	Service Evidence Provided	Possible negative impact and Additional Mitigating Action Required
3.	How have you applied learning from research evidence about the experience of equality groups to the service or Policy? Your evidence should show which of the 3 parts of the General Duty have been considered (tick relevant boxes).	Looked after and accommodated care services reviewed a range of research evidence to help promote a more inclusive care environment. Research suggested that young LGBT+ people had a disproportionately difficult time through exposure to bullying	Medicines and Healthcare Products Agency (MHRA) Safety Alert August 2023 covers the whole population. National Equipment Provision Guidance is applicable to all groups. The alert pays specific attention to children and adults under BMI of 17 and less than 1.46m in height.	•

	1) Remove discrimination, harassment and victimisation 2) Promote equality of opportunity 3) Foster good relations between protected characteristics 4) Not applicable	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).		
		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	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	There are a range of case studies on the MHRA alert and guidance. The patient information leaflet has been shared with a number of service user and carer groups to request feedback. Case Study 1 A bed rail intended for use on a domestic divan bed was used on a hospital type	

what matters to people	visit and telephone	bed. This produced a large	
and can offer support.	service which	gap between the bottom of	
	significantly increased	the bed rail and the bed	
Your evidence should	uptake.	when the mattress was	
show which of the 3	aptane.	compressed.	
parts of the General Duty	(Due regard to	compressed.	
	1,		
have been considered	promoting equality of	A child slipped feet first	
(tick relevant boxes).	opportunity)	between the bed rail and	
		the bed. The gap was not	
1) Remove	* The Child Poverty	large enough for the child	
discrimination,	(Scotland) Act 2017	to pass completely	
harassment and	requires	through and the child was	
victimisation	organisations to take	trapped at chest level and	
	actions to reduce	died from postural	
2) Promote equality of	poverty for children in	asphyxiation.	
opportunity =	households at risk of	aspriyxiation.	
	low incomes.		
3) Foster good relations	low incomes.		
between protected		Case Study 2 Bed rails	
characteristics		in poor condition from	
Characteristics		lack of maintenance	
A N			
4) Not applicable		A care home had fitted	
		third-party bed rails to a	
		resident's divan bed. One	
		of the bed rails moved	
		away from the side of the	
		bed, creating a gap in	
		which the resident became	
		trapped and died as a	
		result.	

	Example	Service Evidence Provided	Possible negative impact and Additional Mitigating Action Required
5. Is your service placessible to ever if this is a policy impacts on move service users three areas are there probarriers that need addressed? Your evidence shall show which of the parts of the General have been considered (tick relevant box 1) Remove discrimination, harassment and victimisation 2) Promote equal opportunity 3) Foster good rebetween protecte characteristics. 4) Not applicable	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). Ity of Ity of	Yes. All equipment is fitted by trained installers from equipment services. The Bed safety rails would only be used by the persons carer and the carer is educated on how to safely use bed safety rails. Before provision individuals are assessed for their physical and mental ability to use a grab stick safely. If the assessment concludes the person cannot use safely the grab stick will not be provided. Grab sticks are specifically designed to increase independent transfer on and off a bed.	

		Example	Service Evidence	Possible negative impact and
		Example	Provided	Additional Mitigating Action Required
6.	How will the service	Following a service	All information leaflets will	•
	change or policy	review, an	be translated into the most	
	development ensure it	information video to	commonly used	
	does not discriminate in	explain new	languages. They will be	
	the way it communicates	procedures was	available in brail and if	
	with service users and	hosted on the	required BSL and	
	staff?	organisation's	interpreters will be	
	Various della sea a la social	YouTube site. This	provided to share relevant	
	Your evidence should show which of the 3	was accompanied by	information. The	
		a BSL signer to explain service	information will also be available on websites and	
	parts of the General Duty have been considered	changes to Deaf	accessible via a QR code.	
	(tick relevant boxes).	service users.	The patient information	
	(tiok relevant boxes).	Service asers.	leaflet will be assessed for	
	1) Remove	Written materials	readability to ensure	
	discrimination,	were offered in other	compliance with Clear to	
	harassment and	languages and	All Standards. The leaflet	
	victimisation	formats.	will be reviewed annually	
			and updates as equipment	
	2) Promote equality of	(Due regard to	changes are made or	
	opportunity	remove	MHRA advise changes to	
		discrimination,	the provision of the	
		harassment and	equipment covered by this	
1		victimisation and	alert.	

	3) Foster good relations between protected characteristics 4) Not applicabl 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.	promote equality of opportunity).		
7	Protected Characteristic		Service Evidence Provided	Possible negative impact and Additional Mitigating Action Required
(a	Age			•
)		lieu e e ute ut le eure e	This policy impacts on	
	Could the service design o disproportionate impact or		people of all ages and specifically mentions	
	differences in age? (Consi		children and people of	
	that exist in the service des		small stature. Equipment	
	You will need to objectively	• •	which meets these	
	evidence section any segre		individuals needs is	
	of age promoted by the pol		provided. This is assessed	
	service design).		for by following using a	
			clear standard clear British	

If this decision is likely to impact on children and	Standards for bed rails
young people (below the age of 18) you will need	and a risk assessment for
to evidence how you have considered the	both adults and children
General Principles of the United Nations	/people of small stature",
Convention on the Rights of the Child. Please	
include this in Section 10 of the form.	This equipment is
	designed to increase a
Your evidence should show which of the 3 parts	persons safety. This
of the General Duty have been considered (tick	equipment is only
relevant boxes).	prescribed where there is
, , , , , , , , , , , , , , , , , , , ,	a risk the person could fall
1) Remove discrimination, harassment and	out of bed if it wasn't in
victimisation	place. Grab sticks are
	designed to increase
2) Promote equality of opportunity	independent transfers on
	and off a bed.
3) Foster good relations between protected	and on a bod.
characteristics.	
4) Not applicable	

(b	Disability	Formal and informal	
(D	Disability	carers are regularly	
'	Could the service design or policy content have a	trained in the use of this	
	disproportionate impact on people due to the	equipment. Where an	
	protected characteristic of disability?	informal carer (who may	
	processes on an accountry.	be a relative or the	
	Your evidence should show which of the 3 parts	patients representative)	
	of the General Duty have been considered (tick	has visible or hidden	
	relevant boxes).	disabilities these will be	
	,	taken into consideration as	
	1) Remove discrimination, harassment and	part of the assessment	
	victimisation	process. Where it is	
		identified that use of	
	2) Promote equality of opportunity	equipment by the carer to	
		support the patient would	
	3) Foster good relations between protected	be unsafe, the patient will	
	characteristics.	be referred onto the	
	4) Net emplicable	relevant service for a care	
	4) Not applicable	package assessment.	
	Protected Characteristic	Service Evidence	Possible negative impact and
	Trotected Gharacteristic	Provided	Additional Mitigating Action Required
(c	Gender Reassignment		•
)		NA	
	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
(d)	Marriage and Civil Partnership 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).	NA	

	1) Remove discrimination, harassment and victimisation		
	2) Promote equality of opportunity		
	3) Foster good relations between protected characteristics		
	4) Not applicable		
10	Pregnancy and Maternity	NA	
(e)	Fregnancy and maternity	INA	
•	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		
	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	Language barriers have been addressed above.	
	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	Bed rails can be moved to allow people to get out of bed to carry out any activity important to the individual.	
	2) Promote equality of opportunity 3) Foster good relations between protected		
	4) Not applicable		
(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?	No, the equipment will not prevent individuals from observing religious practices.	

	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.		
	Protected Characteristic	Service Evidence Provided	Possible negative impact and Additional Mitigating Action Required
(h)	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.	Bed safety rails could be compromised to act as a restraint. As such there is a potential risk of domestic abuse.	The risk assessment will make specific reference to this risk. This may result in the decision not to provide the equipment. This will also be specifically referenced within the training developed for all staff who come into contact directly or indirectly.

	4) Not applicable		
(i)	Sexual Orientation	NA	
	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).		
	Remove discrimination, harassment and victimisation		
	2) Promote equality of opportunity		
	3) Foster good relations between protected characteristics.		
	4) Not applicable		
	Protected Characteristic	Service Evidence Provided	Possible negative impact and Additional Mitigating Action Required

(j)	Socio – Economic Status & Social Class 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? In addition to the above, if this constitutes a 'strategic decision' you should evidence due regard to meeting the requirements of the Fairer Scotland Duty (2018). Public bodies in Scotland must actively consider how they can reduce	There may be situations where the existing bed frame does not safely allow the provision of equipment. As such a patient may be advised to purchase a suitable bed. This could impact unfairly on someone who is financially unable to do this.	Suitable beds can be accessed utilising the Welfare Fund to release funding to provide a suitable bed.
/l-	inequalities of outcome caused by socioeconomic disadvantage when making strategic decisions and complete a separate assessment. Additional information available here: Fairer Scotland Duty: guidance for public bodies - gov.scot (www.gov.scot)	Casia conomia issues	Malfore fund would explic here
(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?	Socio economic issues may impact on a number of groups as described. There may be particular issues where someone is roofless as they may not have a bed. Homeless people may be in temporary/hostel accommodation and may not have a bed that is suitable for the equipment.	Welfare fund would apply here
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	NA	

	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		
		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.	This information is recorded and reported on via Learn Pro for healthcare staff. HSCP should have a method of recording statutory and mandatory training. Staff will receive mandatory training in safe use of bed safety rails and bed grab sticks. This will improve human rights	Bed Safety Rails could be used as a restraint. Assessment and education of individual and carer will aim to minimise this. Equipment is also reviewed regularly in line with MHRA advice.

	increasing safety and	
	independence	

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.

All patients or designated carer/named individual with POA will be asked to provide consent to the assessment and prescription of equipment. This is documented as part of the assessment process.

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*.

This policy supports people's right to independent living.

*

- 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.

United Nations Convention on the Rights of the Child

The United Nations Convention on the Rights of the Child (Incorporation) (Scotland) Act 2024 came into force on the 16th July 2024. All public bodies may choose to evidence consideration of the possible impact of decisions on the rights of children (up to the age of 18). Evidence should be included below in relation to the General Principles of the Act. The full list of articles to be considered is available here for information.

No Discrimination: Where the decision may have an impact, explain how the EQIA has considered discrimination on the grounds of protected characteristics for children. You may have considered children in each of the EQIA sections and returned relevant evidence.

No discrimination - Completion of the EQIA process has allowed for full consideration of the protected characteristics and how to ensure that we are compliant with these.

Best Interests of the child: Where the decision may have an impact, explain how the EQIA has evaluated possible negative, positive or neutral impacts on children. You may find that options considered need to be reframed against the best possible outcome for children.

Yes this equipment would be provided in the best interests of the child. The assessment process that underpins all assessments for treatment, equipment or adaptations will take into account the child's physical, emotional and psychological wellbeing as well as the child's and parent's wishes. Any equipment prescribed will be regularly reviewed to ensure it still meets the needs of the child.

Life, survival and development: Where the decision may have an impact, explain how the EQIA has considered a child's right to health and more holistic development opportunities.

The reason equipment is provided is to maximise a child's health and wellbeing. Equipment provided to children is regularly reviewed to ensure that it meets developmental needs, as it is recognised these will change over time as the child grows and their condition may change as well – this could be that the child's health needs either increase or decrease dependent on the trajectory of their condition.

Respect of children's views: Where the decision may have an impact, explain how the views of children have been sought and responded to. You need to consider what steps were taken in Q4 in relation to this.

As part of the assessment process the views of the child are sought and their opinion is respected wherever possible, as long as it is in the best interest of the child's health and wellbeing.

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: Full mitigation of identified risk not made, decision to continue without objective justification (Lead Reviewer to provide explanatory note here):
 Option 5: 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)

Having completed the EQIA template, please tick which option you (Lead Reviewer) perceive best reflects the findings of the

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 responsible?(initial s)

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

22.05.2025

Lead Reviewer: Name Samantha Flower

EQIA Sign Off: Job Title Occupational Therapy Professional Lead for Partnerships

Signature

Date 21 11 24

Quality Assurance Sign Off: Name Alastair Low

(NHSGGC Assessments) Job Title Planning Manager

Signature A Low Date 21/11/24

Where unmitigated risk has been identified in this assessment, responsibility for appropriate follow-up actions sits with the Lead Reviewer and the associated delivery partner.

IJAN.



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

	ons highlighted in the original EQIA for this Service/Policy Con	Completed	
	Date	Initial	
Action:			
Status:			
Action:			
Status:			
Action:			
Status:			
Action:			
Status:			
ease detail any outstanding activity with regard to		ompleted by	
ease detail any outstanding activity with regard to ervice/Policy and reason for non-completion			
ease detail any outstanding activity with regard to ervice/Policy and reason for non-completion	To be Co	ompleted by	
ease detail any outstanding activity with regard to ervice/Policy and reason for non-completion	To be Co	ompleted by	
lease detail any outstanding activity with regard to ervice/Policy and reason for non-completion Action: Reason:	To be Co	ompleted by	

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 originated Action:	nally planned and reasons:		
Reason:			
Action:			
Reason:			
Please write your next 6-month review date			
Name of completing officer: Date submitted:			
Date Submitted.			
If you would like to have your 6 month report reviewed	by a Quality Assuror please e-mail to: a	lastair.low@ggc.s	cot.nhs.uk

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