It is essential to follow the EQIA Guidance in completing this form

Name of Current Service/Service Development/Service Redesign:
Renfrewshire CHP District Nursing Services

Please tick box to indicate if this is a: Current Service √ Service Development □ Service Redesign □

Brief description of the above: (Please include if this is part of a Board-wide service or is locally determined).
The service is part of a range of domiciliary services available to the residents of the RCHP area and it provides nursing care in the patients home/care home, and occasionally in the clinic setting, to adults over 16 years of age with a wide range of conditions, illnesses and health needs.

Who is the lead reviewer and where based?
Dorothy Duffy, Senior Nurse, Adult Services, RCHP

Please list the staff groupings of all those involved in carrying out this EQIA (when non-NHS staff are involved please record their organisation or reason for inclusion):
Clinical team leader, Intensive Care Manager-Community Nursing, Senior Nurse-Adult services RCHP, Community Sister (Homelessness), Project Lead Community Nursing, Charge Nurse (Community)

Impact Assessment – Equality Categories

<table>
<thead>
<tr>
<th>Equality Category</th>
<th>Existing Good Practice</th>
<th>Remaining Negative Impact</th>
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<tbody>
<tr>
<td>All</td>
<td>• Service users can be visited in own home</td>
<td>•</td>
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- Working collaboratively with fire service in identifying vulnerable adults
- Service users routinely advised of complaints procedure. If any incidents occur they would be dealt with through IR1.
- Staff have access to Scottish patient at risk re-admission information.

### Gender
- Gender data is collected.
- Balance of male to female differs by disease
- Service users can access male or female staff if preferred
- Homeless nurse involved in group work which is gender/age specific.
- In relation to Transgender patients, service would attempt to meet requirements for individuals.
- Staff have accessed gender based learning and education and are developing service as a result.

### Ethnicity
- Ethnicity data collected
- Communication and language assessment undertaken on each new referral.
- Referral made for support to service users from minority ethnic backgrounds
- Staff are aware of the protocol for booking interpreters
- Cultural assessment mainly in relation to end of life issues
- All staff have accessed training on ethnicity

- Gender data not analysed.
- Gender based violence routine enquiry not currently used in service.
- More men access homeless nurse service
- Data not analysed
and used this to inform service development

- Care plan would reflect needs relating to ethnic group, e.g. diet.

| Disability | Disability noted in assessment and care plan for individual patients and there is no difference in uptake by Disability.  
|            | Service can arrange modifications of patients physical environment.  
|            | Communication and language support needs assessed routinely.  
|            | Programme available for learning and education on Disability related issues and staff have accessed this.  
|            | Alternative information formats accessed from other services.  
|            | Home visits made to improve communication with deaf/hard of hearing parents  
|            | Staff can access British sign Language interpreters |
|            | Service wide data not available  
|            | Text phone not available for deaf people. |

| Sexual Orientation | Referrals made as appropriate based on individual need. |
|                   | Sexual Orientation data not collected not analysed |

| Religion and belief | Religion and Belief Data collected  
|                    | Learning and education training provided to staff particularly in relation to palliative and end of life care.  
|                    | Staff can access spiritual support routinely from local religious groups/services and has information about religious backgrounds of |
|                    | Data not analysed |
| Age (Children/Young People/Older People) | | No negative impact |
|-----------------------------------------|--------------------------------|
| Date of Birth routinely collected and age data analysed. | | |
| Mainly older adults based service, patients referred from 18+ | | |
| Patient specific information available for older adults with long term conditions and for carers | | |
| Frequently adapt the physical environment – equipment includes Tele-health; Home adaptations; mobility aids | | |
| Communication and language needs are assessed routinely | | |
| Learning and education includes vulnerable adults training | | |
| Two gerontology nurses in post to support people in older age in a variety of environments | | |
| Appointment times can be adjusted | | |
| Service has access to information for all age groups | | |

| Social Class/ Socio-Economic Status | | No negative impact |
|-------------------------------------|--------------------------------|
| Staff can access support services for people/carers and their families to address social financial issues. | | |
Additional marginalisation

- Homeless nurse in post, Older adults have access to community mental health. Nurses promote service which can be accessed.
- Communication and language service provided
- Referrals made proactively across all services and disciplines.
- Programme of learning and education – ongoing mandatory programme.
- Not everyone is registered with GP/health services - so there is a potential for inequalities (primary source of referrals).

Actions

Cross Cutting Actions

- Opportunity to analyse data to inform service development.

Specific Actions

- GBV enquiry to be introduced as part of assessment process.
- Examine disparities in access to homeless services.
- Ensure development of webpages to promote services to staff teams and patients.
- Consider use of textphone or alternative forms of communication with Deaf people.

Ongoing 6 Monthly Review

Please write your 6 monthly EQIA review date:

Lead Reviewer: Name:
Sign Off: Job Title
Signature
Date:

Please email copy of the completed EQIA form to irene.mackenzie@ggc.scot.nhs.uk

Irene Mackenzie, Corporate Information and Development Manager, Corporate Inequalities Team, NHS Greater Glasgow and Clyde, Dalian House, 350 St Vincent Street, Glasgow, G3 8YZ. Tel: 0141-201-4970.