Equality Impact Assessment Tool For Frontline Patient Services

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

Name of Current Service/Service Development/Service Redesign:
Eriskay in Patient 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).

Eriskay House is a custom built 15 bedded in patient unit providing a detoxification and assessment service for people with substance misuse issues. The service is provided to the population from the North and East area of Glasgow and part of East Dunbartonshire. Services are delivered in a hospital ward within an acute hospital setting. Patients are referred to the unit primarily from Community Addiction Teams, Acute Services, GP and Homeless Addiction Team. The service is provided 7 days a week 24 hours a day. This is a short term unit usually 7-14 days, sometimes shorter. Patients may be transferred from here to the partial service.

Who is the lead reviewer and where based?
Patricia Graham Ward Manager.
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):

Eriskay Ward Manager
Manager Equality and Diversity Team
Senior Officer Glasgow Addiction Service

Service user evaluation information has also been utilised in the Equality Impact Assessment (EQIA) Process.

Impact Assessment – Equality Categories

<table>
<thead>
<tr>
<th>Equality Category</th>
<th>Existing Good Practice</th>
<th>Remaining Negative Impact</th>
</tr>
</thead>
<tbody>
<tr>
<td>Gender</td>
<td>• On admission, patients have an opportunity to have a male/female nurse.&lt;br&gt;• There is a female only sitting area as per Scottish Government guidelines.</td>
<td>• Further support to support gender specific work and women in prostitution.</td>
</tr>
<tr>
<td>Ethnicity</td>
<td>• There is recording of ethnicity of patients&lt;br&gt;• Use of interpreters where required.</td>
<td>• There are no Black and Minority Ethnic (BME) who are currently using the service&lt;br&gt;• The service is aware substance abuse crosses into different cultures but people do not universally access the service&lt;br&gt;• Service has identified that staff require cultural awareness training.</td>
</tr>
<tr>
<td></td>
<td>• One staff member is able to use British Sign</td>
<td>• Improved signage is required within the unit</td>
</tr>
<tr>
<td>Category</td>
<td>Details</td>
<td></td>
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<td>----------------------------------</td>
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</tbody>
</table>
| Disability                       | • Language (BSL) when necessary to assist with communication support  
• The venue is wheelchair accessible  
• There is nearby car parking  
• Guide dogs are allowed into the building  
• Disability is recorded on admission sheets  
• There is no loop system available  
• Service has identified that staff require equalities training including Deaf awareness.  
• As standard staff should use BSL interpreters as per GG&C NHS BSL interpreting protocol. |
| Sexual Orientation               | • Initial assessment records sexual orientation of patients  
• There is no identifiable negative impact in relation to sexual orientation.                                                                                                 |
| Religion and belief               | • Chaplaincy service visits once a week to the ward to speak to patients/staff.  
• Meals can be ordered to suit various faith requirements.  
• Initial assessment records religion/belief of patients  
• There are no ablution facilities within the service  
• There are no identified area for private prayer needs |
| Age (Children/Young People/Older People) | • Initial assessment records age of patients  
• Most patients are between 25-63 although the service will support clients of all ages over 16 years of age. However if necessary age specific services may be more appropriate for some clients e.g. Ar Caladh for 16-25 year olds.  
• There is no identifiable negative impact in relation to age |
| Social Class/ Socio-Economic Status | • The Community Addiction Team are responsible for the clients care management and managing the social care needs and interventions for clients. If a client has particular social welfare needs inpatient staff  
• Social Class / socio-economic status is not normally recorded during the assessment process but would be captured in the baseline assessment at CAT level. |
would contact the care manager to highlight these needs or directly contact agencies to support clients e.g. money advice services etc.

### Additional marginalisation

- Carers of patients are offered advice and support as required.
- Discrimination is reported via staff supervision, senior nurse meetings or via Incident Reporting 1 (IR1).
- Staff have gone to various areas and given presentations to promote the service.
- Consultation with service users is via ward meetings, one to one sessions with named nurse and weekly multi-disciplinary meeting (MDT) meeting’s questionnaires and audits.

- Patients are contacted via 1) phone and 2) letter to attend. This may impact on people who don’t have access to a phone and/or have poor literacy.

### Actions

<table>
<thead>
<tr>
<th>Cross Cutting Actions</th>
<th>Date for completion</th>
<th>Who is responsible? (initials)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Ensure that admission sheet identifies diversity backgrounds of patients and correct Information and Statistics Division (ISD) codes are being utilised.</td>
<td>March 2006</td>
<td>Ward Manager.</td>
</tr>
<tr>
<td>Ensure leaflets about the service are available in accessible formats and investigate</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
Specific Action

- Investigate training opportunities for staff on equality and diversity issues and gender specific awareness training.
- Investigate the use of other forms of support/help for service users who have poor literacy.
- Identify through referral if there are particular communication requirements e.g. is the client deaf or visually impaired?
- Further external support/training to support development of gender specific work.
- Identify areas where ablution (washing for religious requirements) can take place and quiet space for prayers.

| March 2006 | Ward Manager |

Ongoing 6 Monthly Review  Please write your 6 monthly EQIA review date: March 2010

Lead Reviewer: Name: Patricia Graham
Sign Off: Job Title Ward Manager
Signature
Date: 04/04/09

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: 0141-2