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

Name of Strategy, Policy or Plan

Protocol For Identifying And Responding to Domestic Abuse In Pregnancy

Please tick box to indicate if this is a: Current Strategy, Policy or Plan ☐ New Strategy, Policy or Plan ☐

Brief description of the above: (Please include if this is part of a Board-wide Strategy, Policy or Plan or is locally determined).

The Protocol has been developed to assist all midwifery staff in NHS Greater Glasgow and Clyde to know and understand how to identify and respond to domestic abuse in pregnancy. The working group that developed the protocol have taken cognisance of the NHS Greater Glasgow and Clyde Gender Based Violence Policy.

Who is the lead reviewer and where based?

Julie McCorkell. Gender Based Violence Advisor based at Queen Mothers Hospital Glasgow

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):

Three Gender Based Violence Advisers, Child Protection Adviser, Inequalities Sensitive Practice Development Lead, Clinical Head Special Needs in Pregnancy-Clyde, Royal Alexandria Hospital Paisley
## Impact Assessment – Equality Categories

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<thead>
<tr>
<th>Equality Category</th>
<th>Positive Impact</th>
<th>Negative Impact</th>
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</table>
| **Gender**        | • The Domestic Abuse Protocol clearly relates to all women. It describes the processes identified through the Service Patient Pathway which addresses the specific needs of all women suffering with/affected by domestic abuse.  
• Earlier work to highlight the issues and patient needs relating to domestic abuse in pregnancy has ensured that good practice guidance information is available within “Resource Boxes” available for all Midwifery staff situated in wards and clinics. | • There is no reference as to gender issues relating to male staff for example Male Midwives or male Consultants. Chaperoning for women is also not discussed. |
| **Ethnicity**     | • Ethnicity is recorded for all women attending service.  
• The referral pathway to other agencies, for minority ethnic women suffering domestic abuse has two options available. They can use the option open to all women or they can use an option which is specifically culturally sensitive to help address any issues relating to culture, religion or language. These two options are available as the service is aware there are particular safety issues that may arise within certain minority ethnic communities. Staff will be made aware of these options through the patient pathway  
• The Domestic Abuse Team offer different levels of training which also includes cultural awareness and Equality and Diversity issues.  
The Domestic Abuse Protocol contains clear guidance relating to interpreting and advocacy needs of patients who do not speak English and will require this support. | • Ethnic monitoring data is not analysed  
• The protocol needs to describe the referral process to refer women to agencies like Women’s Aid.  
• There is no mention of the patient pathway within the Domestic Abuse Protocol.  
• The training on offer needs to be explained in more detail. Information relating to equality and diversity training needs expanded.  
• There is a lack of research data/evidence relating to ethnicity. |
| **Disability** | • The Domestic Abuse Protocol contains clear guidance relating to interpreting and advocacy needs of patients who and will require advocacy and sign language support.  
• There are learning disability packs available in all maternity units which can be used with patients referred to regular/routine maternity services.  
• The patient pathway identifies and address any issues relating to disability  
• The learning disability pack could be adapted to include women attending the Domestic Abuse in Pregnancy Service.  
• There is no reference to the patient pathway. |
| **Sexual Orientation** | • The patient pathway identifies and address any issues relating sexual orientation  
• There is no reference to the patient pathway. |
| **Religion and belief** | • There is a specific leaflet which was designed by AMINA and is used by staff in the clinic waiting area. It relates to the Muslim Faith and was designed in partnership with an Imam. It highlights that the Midwives are aware of specific issues influenced by particular religious beliefs  
• The staff training offered by the Domestic Abuse Team addresses issues relating to religion, culture and spiritual beliefs.  
• There is no reference to this leaflet in the Domestic Abuse Protocol  
• There is no mention of this training in the Domestic Abuse Protocol. |
| **Age (Children/Young People/Older People)** | • The Domestic Abuse Protocol relates to all women of all ages.  
• There is no mention of Age in the Domestic Abuse Protocol. |
| **Social Class/ Socio-Economic Status** | • Poverty and marginalisation issues are identified through the patient pathway  
• There is no mention of the patient pathway in the Domestic Abuse Protocol. |
### Additional marginalisation

- Homeless patients and prisoners are identified through the patient pathway
- There is no mention of the pathway addressing these issues within the Domestic Abuse Protocol

### Actions to address negative impacts

<table>
<thead>
<tr>
<th>Cross Cutting Actions</th>
<th>Date for Completion</th>
<th>Who is responsible? (initials)</th>
</tr>
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<tbody>
<tr>
<td>Monitoring Equality and Diversity data.</td>
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### Specific Actions

- Although there is reference within the Domestic Abuse Protocol of the NHS Greater Glasgow and Clyde’s Equality Scheme there needs to be an extended Equality statement which highlights what the protocol takes cognisance of and prevents discrimination and prejudice relating to all Equality Strands.
- The last paragraph on page one of the Domestic Abuse protocol needs to be expanded and mentioned within the main text of the protocol to capture some of the issues raised. For example “child sexual abuse, rape & sexual assault sexual harassment female genital mutilation & forced marriage and commercial sexual exploitation through prostitution and pornography”.
- The Patient Pathway needs discussed within the Domestic Abuse Protocol and a link or reference to the actual patient pathway is essential to the protocol.
- There needs to be a statement within the Domestic Abuse Protocol that relates to monitoring equality data, to be able to understand the extent of domestic abuse in NHS Greater Glasgow and Clyde.
- The Domestic Abuse Protocol requires a statement which addresses gender. Information highlighting same gender practitioners in particular the procedure relating to male Midwives, Consultants, and other healthcare practitioners. Chaperones also need incorporated into this section.
- A statement describing the referral of minority ethnic women to different agencies needs to be explained within the protocol.
- A statement which offers research/evidence relating to Ethnicity For example User Engagement Study also needs to be within the protocol.
• More detailed information relating to what strands /levels of training can be offered by the Domestic Abuse Team needs to be expanded. For example, highlight the equality and diversity training covers issues such as cultural awareness and disability issues.

• Reference to the religious leaflet should be listed as a resource under section 5 within the protocol.

• Add a statement relating to age to the protocol.

• Add statement explaining to highlight where the Domestic Abuse Protocol will be available for staff for example Intranet, protocol folders and resource boxes.

**Ongoing Review.** Please write the date when the policy and EQIA will be reviewed.

**May 2011**

**Lead Reviewer:** Name: Julie McCorkell  
**Sign Off:**  Job Title  GBV Advisor Women & Children’s Directorate  
**Eleanor Stenhouse**  Signature  Julie McCorkell  
**Date:**  July 2009

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.