NHS Greater Glasgow and Clyde
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:

Maxillofacial Prosthetics Department, Regional Services Directorate, NHS GGC

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 Maxillofacial Laboratory is situated at the Southern General Hospital is part of Regional services. Regional Services is responsible for the provision of: (i) Neurosciences inpatient, outpatient and day case services for patients in the West of Scotland (population) approx 2.75 million). Neurosciences incorporates the departments of Neurosurgery, Neurology, Neuroradiology, Neuropathology, Neurophysiology and Neuroanaesthetics. (ii) Oral Maxillofacial inpatient, outpatient and day case services for patients in Greater Glasgow & Clyde (population approx 1.34 million). (iii) Ear, Nose and Throat for the provision of inpatient, outpatient and day case services for patients in the South Side of Glasgow (population 400,000). The Prosthetics laboratory is a satellite laboratory situated at the Glasgow Royal Infirmary. In total there are 8 Maxillofacial Prosthetists employed within these laboratories. The laboratories are required to provide a full range of highly specialist technical and prosthetic services to the West of Scotland and Forth Valley and other referring authorities both nationally and internationally for the treatment of patients with deformities which will be congenital, acquired (trauma) or as a result of ablative surgery (cancer). The service is provided to Maxillofacial surgery, Plastic surgery, Opthalmic surgery, Neuro surgery, Ear Nose and Throat surgery for the West of Scotland and the Forth Valley. The service of the Maxillofacial and Prosthetics Laboratories are available to other surgical specialties as required.

The laboratories will be required to provide a 24 hour emergency on call service 7 days a week for the provision of custom made treatment appliances used to treat oral and facial fractures, excessive bleeding post surgery, avulsed teeth and any other appliances as required. 80% of patients of patients are referred into the service due to Alcohol related incidents.

Who is the lead reviewer and where based?

Mr Fraser Walker, Neurology Building, Southern General Hospital

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):

Principal Maxillofacial prosthetics (2), Patient Representative, Practising Maxillofacial Prosthetist (2), Trainee Maxillofacial prosthetist, Equality Programme Lead

Impact Assessment – Equality Categories

Equality Category	Existing Good Practice	Remaining Negative Impact
ALL	• Once a patient accesses the service they are supported by the service for life and therefore staff have a good rapport with their patients • Patients often share their experiences of using their prosthetics and with other patients • When initial bookings are made the patients are booked by the medical records team, who have access to the interpreting protocol • Staff have helped patients make travel arrangement if required as they may have overnight accommodation needs if travelling from	• No Equality Data is recorded except date of birth and gender. These are part of the patient case notes and referral information. • Staff do not have access to the medical portal to access any further patient information if required. • Follow up appointments are booked by the maxillofacial staff, they do not have access to the interpreting protocol. • Staff were unaware of the Equalities in

	a distance. • Staff provide a drop in facility for patients and will take the time out to see anyone if they drop in to the department.	Health website
Gender	• Same Sex staff can be accommodated if requested • Gender is recorded	• Staff are not aware of the transgender policy • Staff do not have access to Gender Based Violence policy and resources.
Ethnicity	• Staff see very few patients from a minority ethnic background due to the prevalence rate of BME with specific cancers. • Staff have access to and use the NHS GG&C interpreting protocols and booking system to ensure interpreters are booked as required.	• The service does not see representation from the BME communities. • Ethnicity is not recorded
Disability	• Information is provided in 12 font plain English, Large font available on request • If a patient has been identified as having Learning Disability then staff would work with the relative or carer and the option to be with the patient at all appointments can be provided • Web based information is being developed which will allow patients to log in to access information across the country and know where services are based should they move to a new locality. Information then will be more accessible, i.e font size to meet patient needs	• The external access path has unstable paving slabs • Disability is not recorded

	• Assistance Dogs can be accommodated • Staff would access an induction loop if required	
Sexual Orientation	• Staff are aware of being sensitive to individual needs and make no assumptions regardign relationships.	• No negative Impact Identified
Religion and belief	• Staff can work around appointment times to suit various calendar festivals. • Staff have access to a Faith and Belief Manual on Staffnet	• No negative Impact Identified
Age (Children/Young People/Older People)	• Patients of all ages can access the service through the appropriate referral systems • Staff ensure that the written information is appropriate for all groups and use the readability scoring system. • A children's campaign was also developed to raise awareness of the service and to breakdown stereotypes regarding facial disfigurement. • Age is recorded • All staff have attended Child Protection training	• No negative Impact Identified
Social Class/ Socio-Economic Status	• Staff work with patients to ensure that they can accommodate their needs. Staff develop a good rapport with patients as they tend to know them for the life time that they will require the prosthetic. • Staff have helped patients make travel	• No negative Impact Identified

	arrangement if required as they may have overnight accommodation needs if travelling from a distance.	
Additional marginalisation	• Staff have worked with prison services to ensure that patients can access the service.	• No negative Impact Identified

Actions	Date for completion	Who is responsible?(initials)
Cross Cutting Actions • Staff to have access to the Equalities in Health Web site information • Review and improve the recording of equality and diversity data	May 2011	PP/ND
Specific Actions • Staff to have access to the Transgender Policy • Staff to have access to Gender Based Violence Resources • The service to contact various BME agencies to inform them of their service such as the Scottish Refugee Council • To contact facilities regarding the potential risk at the entrance of the building for patients accessing the service. • To investigate access to the online clinical system which would allow staff to be aware of any ongoing issues with patients and allow to staff to note any equalities information. • Ensure staff have access to the interpreting protocol and the booking system reference guide .	May 2011	PP/ND PP/ND PP PP/ND FW

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

Lead Reviewer: Name: Mr Fraser Walker
Sign Off: Job Title Consultant MfP
Signature Date: 23 March 2011

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

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.