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

Name of Current Service/Service Development/Service Redesign:
Trauma and Homelessness Team

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 Trauma and Homelessness Team is a city wide specialist trauma service for people who have a history of complex trauma and who are homeless/have a risk of homelessness. The Trauma and Homelessness Team are part of GGC Mental Health partnership and is linked to Homeless Health Services and other GGC Trauma Services. Referrals are received from statutory and non-statutory services and the team offers training, consultation as well as individual and group interventions. The service is being developed to link directly with Leaving Care Services and women at risk of sexual exploitation through prostitution.

Who is the lead reviewer and where based?
Dr Lisa Reynolds. Consultant Clinical Psychologist / Team Lead Trauma and Homelessness Team

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):
Team Lead, Clinical Psychology (x1), AHP staff (x1), Mental Health Practitioner (x1) and admin staff (x1). Whole Team involvement in EQIA process and consultation

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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</table>
| **Gender**        | • Awareness of impact of gender on psychological difficulties associated with trauma.  
                 | • Routine enquiry, electronic/ casenotes recording and audit of gender and gender based violence.  
                 | • Accessible service to meet the child care needs of service user including the timing of appointments and the availability of crèches  
                 | • Option of gender of interpreter given to client  
                 | • Within trauma service users have only ever requested specifically a female worker and therefore the gender configuration of the team has been carefully considered and informed by research.  
                 | • Anti-discrimination code of practice | • No choice of male worker. |
| **Ethnicity**     | • Assessment of language, communication and support needs completed with client.  
                 | • Ethnicity information requested on referral forms.  
                 | • Ethnicity information recorded routinely on PIMS (Patient Information Management System) and CORE (Clinical Outcomes Routine Evaluation)  
                 | • Information of political, social and economic situation of clients' homeland gathered before first appointment to raise awareness.  
                 | • Leaflets/ Letters (appointment) and information sent to clients in their own language routinely.  
                 | • Maps/ journey plans are routinely sent to clients | • No ethnicity information gathered if not completed by referrer / never seen by service.  
                 | • Training for staff on ethnicity issues. |
| Disability   | • Assessment of physical, learning, language and communication needs completed  
|             | • Learning / communication difficulties routinely recorded on the Glasgow Risk Assessment  
|             | • Will phone client and referrer to advise of appointment if there are literacy difficulties.  
|             | • Disability needs including communication and literacy needs considered at every point in clients’ journey and treatment / assessment adapted in line with needs.  
|             | • Awareness of literacy needs of population when preparing materials  
|             | • Accessible / outreach service where clients are seen for appointments at safe locations which meets their needs including disability provision  
|             | • Consideration of Disability needs prior to arranging appointment including environmental needs as well as whether someone requires to be accompanied  
|             | • Anti-discrimination code of practice  
| Sexual Orientation | • Anti-discrimination code of practice  
|             | • Equalities awareness training available to staff  
|             | • No routine enquiry / recording of information  

who may not have knowledge of the area

- Strong links with COMPASS Team for resources / training
- Access to interpreters if required which is recorded in casenotes for future reference.
- Anti-discrimination code of practice
<table>
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<tr>
<th>Religion and belief</th>
<th>Age (Children/Young People/Older People)</th>
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</table>
| • Awareness of the importance of faith at each stage of client’s journey.  
  • Information on clients faith / beliefs gathered before 1st appointment to increase knowledge and awareness  
  • Routine assessment of faith  
  • Links with COMPASS Team for resources  
  • Dietary requirements in line with different faiths available at training  
  • Anti-discrimination code of practice | • Team reduced lower referral age to 16 years to ensure young people who require service can have access.  
  • No upper age limit for referrals  
  • Age routinely assessed, recorded and utilised in service reports / audits and informs service changes  
  • Whether clients have young dependents is assessed and considered throughout client journey  
  • Appointments are arranged across the city at a time to meet with childcare requirements or with physical environmental needs e.g. if client has to bring child then a child friendly area available  
  • Venue for appointments matched to physical/mobility needs of client  
  • Liaison with children and older people services  
  • Awareness of impact of trauma at different ages and this age –awareness is communicated | • No routine recording of faith / belief in casenotes  
  • No negative impact |
through our training
- Service has specifically targeted young people who are at risk of trauma and homelessness.
- Service has an early intervention priority aiming to access clients as early as possible in their trauma / homelessness journey
- Anti-discrimination code of practice

| Social Class/ Socio-Economic Status | • Awareness of impact of social class / social economic class on presenting difficulties  
• Accessible service to minimise expense of travelling to maximise treatment opportunities for all  
• Consideration of social class and social economic class throughout treatment journey  
• Anti-discrimination code of practice | • No negative impact |
### Additional marginalisation

- Homelessness dedicated service due to awareness of relationship between trauma and homelessness
- Training remit of team to increase capacity to maximise treatment/support opportunities for homeless patients
- Links through training programme with substance misuse services to ensure consistency and continuity of care
- Assertive Outreach service with proactive response to non-attendance
- Awareness of engagement/treatment/support needs of homeless/addiction/mental health clients
- Appointments often arranged within CMHT/Mental Health services which improves communication between services
- Anti-discrimination code of practice

- No negative impact

### Actions

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<thead>
<tr>
<th>Cross Cutting Actions</th>
<th>Date for completion</th>
<th>Who is responsible? (initials)</th>
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<tbody>
<tr>
<td>Audit of Equalities training uptake for all staff groups</td>
<td>June 10</td>
<td>LR</td>
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<tr>
<td>Equalities knowledge to be integrated into training materials</td>
<td>Ongoing</td>
<td>ALL Staff</td>
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<tr>
<td>More consideration of ethnicity within training programme/materials required e.g. case studies</td>
<td>Ongoing</td>
<td>All Staff</td>
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- Equalities information will be included in assessment, recorded in casenotes / electronically and regularly audited to ensure we are meeting needs
- Staff will complete equalities training

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<tr>
<th>Specific Actions</th>
<th>Dec 10</th>
<th>Ongoing</th>
<th>Ongoing</th>
<th>Ongoing</th>
<th>ALL STAFF</th>
<th>All staff</th>
<th>All staff</th>
<th>LR</th>
<th>All training staff</th>
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<tbody>
<tr>
<td>• Ethnicity information will be recorded</td>
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<td>• Physical Disability will be recorded in casenotes</td>
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<td>• Religious Belief and Faith information will be recorded</td>
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<td>• Sexual orientation will be recorded</td>
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<td>• Team Lead will gather information on equalities training</td>
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<td>• All training materials will be reviewed and make equality aware</td>
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**Ongoing 6 Monthly Review** Please write your 6 monthly EQIA review date:

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<tr>
<th>Dec 2010</th>
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**Lead Reviewer:** Name: Dr Lisa Reynolds
**Sign Off:** Job Title: Consultant Clinical Psychologist
Signature
Date: 1/06/2010

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.