

MID CHESHIRE HOSPITALS NHS FOUNDATION TRUST
EQUALITY IMPACT ASSESSMENT OF SERVICES 2010/11 - ACTIONS

Entries in blue font are complete.

Division/No	Area	Lead	Actions	Due date	Progress	RAG
EF1	Residences	Ros Bratherton Accommodation Manager	The Accommodation Request form to be amended to advise the applicant that Translation facilities are available on request.	April 2011	COMPLETE SUGGEST CLOSURE	GREEN
EF2	Residences	Ros Bratherton Accommodation Manager	Consideration to be given as to what reasonable alterations to accommodation can be made to accommodate Sensory disabilities.	April 2011	COMPLETE Consideration has been given . Amendments to accommodation provision will be made on request as and when required and after discussion with prospective resident SUGGEST CLOSURE	GREEN
EF3	Residences	Ros Bratherton Accommodation Manager	Before making a recommendation the Residencies Officer will ascertain that the Hotels have an Equality and Diversity Policy/Statement	April 2011	COMPLETE The Travel INN is part of Travel Lodge Ltd Uk which has an EIA in place SUGGEST CLOSURE	GREEN
E&F4	Non Emergency Transport	Assistant Facilities Manager (Transport)	Escort Policy. The availability of alternative transport must be explored and advice given to those staff responsible for booking PTS.	July 2011	COMPLETE The new specification requires that ambulance staff taking the booking advise on alternative transport if the patient is not eligible for PTS SUGGEST CLOSURE	GREEN
E&F5	Non Emergency Transport	Assistant Facilities Manager (Transport)	Complaints relating to access to PTS should be investigated and monitored to identify where the system is failing to meet the Equality and Diversity policy. A system for recording and reporting such	July 2011	COMPLETE Information regarding service failure is gathered via MCHFT IR1, NWS IR1, SRCL incident reports	GREEN

			incidents will be developed and used as part of the service compliance monitoring system.		and PALS. Data is reviewed and actions discussed at PTS meetings SUGGEST CLOSURE	
E&F6	Non Emergency Transport	Tricia Edwards Acting Assistant Services Manager	Review training/awareness materials on criteria for non emergency transport.	July 2011	Complete Training material has been reviewed and revised SUGGEST CLOSURE	GREEN
E&F7	Site Services	Miriam Hickman Head of Facilities	A mechanism for the inclusion of Patients with physical impairment and mental health issues in the development and monitoring process should be developed.	August 2011 TBC	The issue of inclusion of Patients with physical impairment and mental health issues in the development and monitoring process is a Trust wide issue that has been discussed at the patient experience committee. Action was deferred pending the election of the Governors. Head of Facilities to raise at next meeting.	AMBER
E&F8	Site Services	Miriam Hickman Head of Facilities	A recorded process for the development of individual training needs analysis must be incorporated into the KSF framework	April 2011	COMPLETE Documentation has been amended SUGGEST CLOSURE	GREEN
E&F9	Site Services	Miriam Hickman Head of Facilities	The process for the management of capability must be recorded and regularly audited	Ongoing	SUGGEST CLOSURE	GREEN
E&F10	Security	David Robinson LSMS	Actively canvass trainees as to the requirement for alternative literature at the commencement of CRT course.	April 2011	COMPLETE additional slide included in the training material SUGGEST CLOSURE	GREEN
E&F11	Security	David Robinson LSMS	Post incident reviews should be carried out.	Ongoing	COMPLETE All incidents recorded and	GREEN

			Complaints and concerns reviewed. Actions taken assessed against Equality and diversity policy and procedures		reviewed SUGGEST CLOSURE	
E&F12	Security	David Robinson LSMS	Advice to be assessed against Equality and diversity policy and procedures	Ongoing	SUGGEST CLOSURE	GREEN
E&F13	Security	David Robinson LSMS	Additional training and guidance is required to cover the right to deny freedom and dealing with mental health issues	June 2011 Revised date September 2011	Additional training material included in CRT. Security SOP and training has been revised. System of Review of IR1 in place. SUGGEST CLOSURE	GREEN
E&F14	Security	David Robinson LSMS	Audits of CCTV use should be carried out. Complaints and concerns reviewed. Actions taken assessed against Equality and diversity policy and procedures and Statutory requirements	Ongoing	COMPLETE Training on the use of CCTV completed for all Security staff. Regular quarterly audits of the use of CCTV undertaken SUGGEST CLOSURE	GREEN
E&F15	Waste	Head of Facilities	Modify the waste stream to comply with national guidance (colour blindness issue)	November 2011		
E&F 16	Waste	Acting Assistant Facilities Manager	Review the design, colour and location of the sack holders at ward/departmental level	Sept 2011	Review completed SUGGEST CLOSURE	GREEN
E&F 17	Waste	Head of Facilities	Introduce pictorial signage, labelling and training materials	Sept 2011	Pictorial training material and signage developed and being rolled out. SUGGEST CLOSURE	GREEN
E&F 18	Waste	Head of Department	The requirement for manual handling aids to be included in departmental waste risk assessments	Ongoing	The requirement for manual handling aids has been included in departmental waste risk assessments SUGGEST CLOSURE	GREEN

E&F 19	Car Parking	Security/Green Travel Manager	Review, complaint, feedback and incidents to ensure that the current provision of disabled parking meets the needs of service users	March 2012		
DCSS1	Ward 19	Sue Forrester-O'Neill. Clinical nurse Manager	Signage is not fully compliant with visual disability.ie Braille. Liaise with the privacy and dignity matron, re issue of supporting patients with visual impairment.	June 2011	COMPLETE Signage now compliant for the facilities on the ward SUGGEST CLOSURE	GREEN
DCSS2	OPD VIN	Sue Wylie. OPD Manager	1 nurse is due to start a fundamental skills for children for non children's nurses in February 2010, which will fill the gap of a registered children's nurse.	Sept 11– Oct 11	Course due to start 24 May 2011. Due to complete placement in October.	GREEN
DCSS3	Breast Imaging	Ruth Crichton, Superintendent Radiographer	Change the reception desk and install automatic opening doors to the unit to improve access for wheel chair users.	Jan 2011 2012	Changes to reception desk Jan 2011. The change to the doors has been delayed and will be updated to automatic when the unit is checked for asbestos, as part of ongoing work within the Trust. This is due in 2012.	AMBER
DCSS4	Breast Cancer Family History	Tracey Hale. Breast Care Unit Family History Service	Audit of the referral patterns of women attending the clinic over 9 months. Results to the departmental audit meeting within three months of completion of the audit.	Aug 2011	All data has been gathered and is currently being evaluated.	GREEN
DCSS5	Leighton OPD	Aly Berman. Manager	Main reception desk not at wheelchair height. Only one disabled toilet. To be assessed as part of disability access audit, to be commissioned by the Trust.	Mar 2011 Action in line with DAA report.	Report completed. 2nd accessible toilet within easy reach. Awaiting refurb of department.	AMBER
DCSS6	OT Inpatients/ Outpatients	Nicola Walker. OT Team Leader	Equal provision of equipment on prescription. Limited equipment available, may have to purchase some equipment.	TBC	Occupational Therapy at Leighton work with the guidelines set by Choicequip, the Cheshire	GREEN

					<p>Community Equipment Service. This service, using the Retail Model, operates across the whole of Cheshire, covering both Health (acute and community) and Social Services. At Leighton, patients receive, through a free prescription system, essential equipment for safe discharge, including moving and handling, bed and toileting equipment. They are advised that they have to self purchase trolleys, bathing equipment, dressing and feeding aids, urinals and bedpans. Chair raisers are provided free if they fit the standard raisers, otherwise patients are required to self purchase special raisers or new chairs.</p> <p>SUGGEST CLOSURE</p>	
DCSS7	Dispensary	Dispensary Manager	No hearing loop system. Awaiting quotation from Estates & Facilities for hearing loop to be installed. Link to access audit.	Linked to access audit	Report completed. Hearing loop in place. SUGGEST CLOSURE	GREEN
DCSS8	Dispensary	Dispensary Manager	Wheel chair access in pharmacy outpatients- hatch very high. Work benches not at appropriate height if we were to recruit a wheelchair user. No disabled access to department toilets,	Linked to access audit	Report completed. Sign has been put up for wheelchair users to use staff hatch, which is on lower level. Outpatients are given the	GREEN

			however, wheelchair users would be able to use disabled toilet facilities in the main entrance. Link to access audit.		choice to use if necessary. If we were to recruit wheelchair user this would be discussed with the individual MF. SUGGEST CLOSURE	GREEN
DCSS9	Mortuary	Helen Done Deputy Service Lead for Cellular Pathology	Write an internal standard operating procedure to produce a document detailing how to treat and perform a transgender post mortem examination.	Jan 2011	COMPLETE SUGGEST CLOSURE	GREEN
DCSS10	Medical Records	Dawn Walker	Written standard operating procedure to be developed to assist staff and to enable them to identify patients with a disability.	March 2011 TBC July 2011 December 2011	Article produced for GP link. Possible process discussed at July E&D Committee. Agreed to introduce process to identify patients with visual impairment and to contact them by telephone or other means to confirm their appointment. Process to be trialled until December 2012. Process to be documented.	AMBER
Corp1	L&D	Helen Davies Head of L&D	Education Governance Committee (now Executive Workforce Committee) to receive and consider E&D annual report access figures for training	Jul 2011 September 2011		AMBER
Corp2	ICT	Dave Rooke Head of ICT	Intranet and Intranet sites to meet good practice access standards	TBC	Project to review all aspects of internet to be commenced in November 2011.	AMBER
Corp3	Information	Steve Lacey Information Services	Review with Head of Equality, Diversity and Human Rights implications of specific public duty on the production and publication of information.	Ongoing	Discussion taken place. Available data included in annual report. SUGGEST CLOSURE	GREEN

Corp4	Occupational Health	Keith Williamson Clinical Lead	Review emergency egress from OH department for disabled people with Fire Officer.	March 2011 June 2011 TBC Sep 2011	Discussion with Fire Officer take place. In the absence of funding for physical alteration, internal procedure to be drafted.	AMBER
Corp5	Occupational Health	Keith Williamson Clinical Lead	Assess risk associated with lack of disabled toilet in OH Department.	Link with DAA report timetable	Report completed SUGGEST CLOSURE	GREEN
Corp6	Leadership & Management Development	Rachael Hooker Asst L&MD Manager	Analysis of 2010/11 staff survey by equality characteristics.	June 2011	COMPLETE SUGGEST CLOSURE	GREEN
Corp7	Leadership & Management Development	Rachael Hooker Asst L&MD Manager	Monitoring of future cohorts of management programme participants by equality characteristics.	On selection	In place. SUGGEST CLOSURE	GREEN
Corp8	H&S/Human Resources Management	Wendy Astle Rowe Head of Safety	Discuss with Head of Human Resources Management equality monitoring for health and safety representatives.	September 2011	Initial discussion being arranged	GREEN
Corp9	Trust Membership	Mel Steele Acting Trust Secretary	Review Trust constitution including consideration of current minimum age of 16 for membership.	May 2011 October 11 2012/13	Decision not to change in 2011/12. Consider practicalities and review in 2012/13.	AMBER
Corp10	Trust Membership	Mel Steele Acting Trust Secretary	Monitor Trust membership by agreed protected characteristics.	Annually	First collection date to be agreed.	AMBER
Corp11	Procurement	Clive Mosby Head of Procurement	Review tender documentation.	December 2011	Heads of Procurement and E&D agreed initial actions on E&D in procurement, ethical procurement, sustainability in procurement and supporting local suppliers. To be discussed at October meeting of Sustainability	GREEN

					Committee.	
Corp 12	Human Resources Management	Jon Workman Head of ED&HR	Complete Equal Pay Audit work.	September 2011	Include in annual report.	GREEN
Corp 13	Human Resources Management	Melissa Ellis Head of HRM	Monitor outcome (dismissal, down-grading) of change management programmes.	During 2011/12	System in place. Numbers too small at present to allow for meaningful analysis. Summary to be presented at March HR Performance Committee if appropriate.	GREEN
Corp 14	Information Governance	Jessica Pickup IG Manager	To protect the Human Right to Privacy the IG Manager will liaise with the Information Communication Technology Department to ensure that arrangements are made for the Trust's email policy to reflect what information can be released.	July 2011 Policies in progress, estimated Oct 2011		AMBER
Corp 15	Clinical Audit	Hilary Hall Clinical Audit Lead	Patient questionnaires will be offered in other languages. This will be communicated in the documentation sent to participants by the inclusion of a statement to that effect in English and in the three most commonly used other languages within the local population,	June 2011	COMPLETE Leaflet for PROMS questionnaires (5 languages + easy read/large print) – Complete & In Place SUGGEST CLOSURE	GREEN
Corp 16	Clinical Audit	Hilary Hall Clinical Audit Lead	Where feasible and appropriate patient interviews will be conducted with interpreters.	June 2011	COMPLETE In Place SUGGEST CLOSURE	GREEN
Corp 17	Clinical Audit	Hilary Hall Clinical Audit Lead	The statement in the documentation referred to in Corp 15 will also include a reference to availability in other formats such as large print, easy read, etc	June 2011	COMPLETE See Corp15 – Complete & In Place SUGGEST CLOSURE	GREEN
Corp 18	Payroll/Pensions	Janet Batin Deputy payroll Manager	The service will review its arrangements for confidential discussions, including issues for disabled people.	June 2011	A booking system for confidential discussions is now in place. The requirements of a disabled	GREEN

					employee will be discussed individually and may include Payroll staff visiting them. SUGGEST CLOSURE	
Corp 19	General Office	Caroline Birch	Assess if there is a need to have basic information sheets in other languages.	September 2011	Review taken place. No requests for information and no difficulties encountered. No further action at present. SUGGEST CLOSURE	GREEN
Corp 20	Patient Information	TBC	Pregnancy/Maternity - Hand held notes have been developed to ensure information is given out consistently – information leaflets are provided contained in one pack not separately. To be available August 2011	August 2011	Notes currently being finalised by WCSH Division Governance group (Date tbc)	AMBER
Corp 21	Patient Information	TBC	Easy read information leaflets are available on consent, (pals leaflet in development – to be available September 2011)	September 2011	Ordered	GREEN
Corp 22	Voluntary Services	L Edwards Voluntary Services Manager	Monitor racial/ethnic origins etc. and seek to promote opportunities to under represented groups within the community.	June 2011 Ongoing – review in 2012 Volunteers Report	Application forms amended to enable monitoring of racial/ethnic origins. To work in conjunction with PPI to promote volunteering opportunities with under represented groups in the community. Review in 2012 Volunteers Report.	GREEN
Corp 23	Voluntary Services	L Edwards Voluntary Services Manager	Indicate on forms and publications that voluntary work can be arranged to suit the requirements of an individual's religion or beliefs.	June 2011 At next publication 2012	Application forms amended. Volunteering publications to be revised on reprint.	GREEN

EC1		Loraine Cornes Modern Matron	Achieve 95% known patient ethnicity.	Ongoing	Improved rate from March 2010 – March 2011.	AMBER
EC2		Loraine Cornes Modern Matron	Link with Privacy and Dignity Matron to ensure signage for Mecca is provided.	September 2011	To review with Liz Robinson.	AMBER
EC3		Loraine Cornes Modern Matron	Review needs for Trans patients following 8 March training event. Review arrangements for assessing accommodation arrangements.	June 2011 September 2011	To review with course participant.	AMBER
EC4		Loraine Cornes Modern Matron	Link with Privacy and Dignity Matron to review needs of patients with dementia. Develop Wards 6 (and 15) as centre of good practice for dementia.	June 2011 September 2011 Ongoing from October 2011	Meetings underway. Likely start October.	AMBER
EC5	EAU	Loraine Cornes Modern Matron	Relocate EAU		Completed SUGGEST CLOSURE	GREEN
EC6	Out Patients	Loraine Cornes Modern Matron	Link with Privacy and Dignity Matron for advice on appointment letters for patients with learning disabilities.	December 2011		AMBER
EC7	AE, EAU	Loraine Cornes Modern Matron	Consider improved signage in A/E and EAU following review of Disability Access Audit.	With refurbishment	EAU complete. Date for A&E being obtained.	AMBER
S&C1	H&N Outpatients/Audiology	Caroline Thompson OPD Manager	A bid for charitable funds to purchase Alert paging system to be used in clinic for patients with sensory impairment has been submitted to League of Friends	May 2011 September 2011	March bid rejected as end of year. Awaiting outcome from league of Friends though unlikely to be funded at present. Plan to submit bid to central Charitable funds	AMBER
S&C2	H&N Outpatients	Caroline Thompson OPD Manager	Examination chair has a weight limit of 21 stone. Risk assessment required for increasing volume of obese patients in the	September 2011		

			local health economy.			
S&C3	Theatres	Helen Nutkins Matron	Review need for range of heavy weight equipment at least annually	March 2012		
S&C4	Acute Pain Management	Helen Nutkins Modern Matron	Review need for information in alternative languages.	October 2011		
S&C5	Orthopaedic Outpatients	Carol Latham Sister Orthopaedic OPD	Refurbish Orthopaedic OPD include provision for wheelchair access and appropriate decoration / signage.	October 2011	Refurbishment of Orthopaedic OPD complete. SUGGEST CLOSURE	GREEN
S&C6	Ophthalmology Outpatients	Lisa Rudy-Fitzgerald Acting Eye Care Centre Manager	Availability of information leaflets in alternative languages to be reviewed	October 2011		
S&C7	Ophthalmology Outpatients	Denise Tokely-McNicholas, Service Manager	Confirm payment arrangements for Welsh patients	April 2011	Arrangements confirmed for new and follow up patients. SUGGEST CLOSURE	GREEN
S&C8	Ophthalmology Outpatients	Del Owen, Matron	Review 'passport' arrangements for Travellers.	June 2011 Dec 2011	Delayed due to other issues in department	RED
S&C9	Ophthalmology Outpatients	Denise Tokely-McNicholas, Service Manager	Clarify treatment options for Learning Disability patients requiring Intravitreal injection therapy.	July 2011	Learning Disability patients treated according to clinical needs and individual care plan would need to be agreed. SUGGEST CLOSURE	GREEN
S&C10	Ophthalmology Outpatients	Denise Tokely-McNicholas, Service Manager	Increased partnership working with IRIS to support patients attending Eye Care Centre.	Ongoing - March 2012	Del Owen met with IRIS and due to meet again in October 2011	GREEN
S&C11	Preoperative Assessment	Chris Reeves & Paula Young Preoperative Assessment Sister	The issue of confidentiality if a trans patient in transition needs to be highlighted across the Division.	TBC July 11 Nov 11	Done for POAC.	GREEN

