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| **General Manager:**  **Denise Everett** | | | **Service Area:**  **Integrated Nursing and Conditions Service** | | **Date: 19/04/21** |
| **Brief description of proposal / policy / service being assessed:**  Pathway redesign for all patients over the age of 18 with a Lower Limb Ulceration following the NWCSP Lower Limb recommendations and the successful CHCP / HUTH joint partnership bid to become 1st Tranche implementation site.  The pathway encourages patients to attend a Treatment Room for a comprehensive assessment and rapid referral to vascular team if appropriate. Self- care will be encouraged and the use of digital / remote consultations may be used as the project progresses | | | | | |
| **Information used to analyse the effects on equality:**  Experienced clinicians from CHCP and HUTH have designed the pathway to ensure there is equality for all patients who have a lower limb ulceration. Clinicians involved have been:  HUTH- vascular consultant / vascular specialist nurse/ Tissue Viability Nurse  CHCP – Tissue Viability Nurse / District Nurse / Lead Treatment Room Nurse | | | | | |
| **Will this change have a negative adverse impact on anyone from a protected group as outlined in the Equality Act 2010** | **YES** | **NO** | **Briefly describe how any groups may be affected by the changes:**  Age / disability - attendance at a Lower Limb clinic may be problematic for those patients who are housebound or unable to attend a clinic  Age / disability - may impact on the digital maturity of an individual and their ability to engage with remote consultations  Age / disability - may impact on ability to physically self –care or to access online / or written information to support this  Other disadvantaged – hard to reach / those in prison may not be able to attend the clinics on offer | | |
| AGE |  |  |
| DISABILITY |  |  |
| GENDER |  |  |
| GENDER REASSIGNMENT |  |  |
| MARRIAGE & CIVIL PARTNERSHIP |  |  |
| PREGNANCY & MATERNITY |  |  |
| RACE |  |  |
| RELIGION OR BELIEF |  |  |
| SEXUAL ORIENTATION |  |  |
| ANY OTHER DISADVANTAGED GROUPS |  |  |
| **Where an adverse impact has been identified, what measures have been put in place to mitigate any potential risk**  **Age / disability – for those unable to attend a clinic setting a housebound service will be offered by the Lower Limb Team – CHCP**  **Age / disability – for those who lack digital maturity support will be offered on an individual basis to support where necessary. Plus – if patients are unable to engage with remote consultations, for example, traditional face to face appointments / visits will be arranged**  **Age / disability – individual support will be offered and multiple modes of information will be provided e.g. large type to support self-care. Supported home visits may also be included and to be provided by a skill mixed team as part of the newly formed ‘lower limb care team’**  **In reach visits /specialist drop in clinics will be offered for those in prison or those ‘hard to reach’ groups** | | | | | |
| **Does the change identify a positive impact in relation to any of the groups above?**  Yes  No | | | | | |
| **Outcome (s) of equality impact assessment:**  Adverse impact justifiable?  Yes - continue with change  No, review changes and adjust | | | | | |
| **Arrangements for future monitoring of this change/policy review:**  **As part of the project a ‘Communication and Patient engagement work stream’ has been created to explore and understand further all aspects of the pathway from the patient perspective and adjustments will be made dynamically as risks / problems, thus far unidentified, become apparent.** | | | | | |
| **Approved: (General Manager Signature)** | | | | **Date: 26/04/2021** | |

**Please send to Equality Diversity and Inclusion Lead (via chcp.**[**equalitydiversityandinclusion@nhs.net**](mailto:equalitydiversityandinclusion@nhs.net)**) for quality assurance and or publishing where required**