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NHS Greater Glasgow and Clyde  
Equality Impact Assessment Tool

Equality Impact Assessment is a legal requirement as set out in the Equality Act (2010) and the Equality Act 2010 (Specific Duties)(Scotland) regulations 2012 and may be used as evidence for cases referred for further investigation for compliance issues. Please refer to the EQIA Guidance Document while completing this form. Please note that prior to starting an EQIA all Lead Reviewers are required to attend a Lead Reviewer training session or arrange to meet with a member of the Equality and Human Rights Team to discuss the process. Please contact [CITAdminTeam@ggc.scot.nhs.uk](mailto:CITAdminTeam@ggc.scot.nhs.uk) for further details or call 0141 2014560.

Name of Policy/Service Review/Service Development/Service Redesign/New Service:

Supported Living – Service Review

Is this a: Current Service  Service Development  Service Redesign  New Service  New Policy  Policy Review

Description of the service & rationale for selection for EQIA: (Please state if this is part of a Board-wide service or is locally driven).

**What does the service or policy do/aim to achieve? Please give as much information as you can, remembering that this document will be published in the public domain and should promote transparency.**

*Supported Living Service was set up in November 2016 and its aim is:*

- *To provide a more flexible person-centred home care service to vulnerable older adults in the community. As well as addressing personal care needs it promotes physical and mental health wellbeing through social inclusion and continuity of care. Uniquely it provides options for social activities in the community.*
- *To support service users to remain in their own homes and prevent admission to hospital or Long-Term Care*
- *To reduce unpaid carer stress.*
- *It has a group of highly skilled Care at Home staff who are specifically trained to support our most vulnerable Supported Living Service Users (71% have a diagnosis of dementia).*
- *Support referral pathways including, Intermediate care, complex hospital discharge, complex mainstream and personalisation routes.*

*Individuals will receive support to meet their personal care, housing and social support needs.*

*The service uses a range of smart technology such as community alarms, fall detectors and door alarms to offer peace of mind to the tenant and their family and allow staff to respond quickly to any emergency situation.*

**Why was this service or policy selected for EQIA? Where does it link to organisational priorities? (If no link, please provide evidence of proportionality, relevance, potential legal risk etc.)**

The proposed plan is to cap the provision in Care at Home in order to achieve a proposed saving. The cap would apply to the number of new service users who could access the Supported Living Service, new users would only be able to access the service when vacancies exist. Service provision would continue for those service users (circa 90 service users) currently receiving a service within Supported Living.

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**Who is the lead reviewer and when did they attend Lead reviewer Training? (Please note the lead reviewer must be someone in a position to authorise any actions identified as a result of the EQIA)**

<b>Name:</b> Frances McMeeking Assistant Chief Officer	<b>Date of Lead Reviewer Training:</b> NA
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**Please list the staff involved in carrying out this EQIA**

**(Where non-NHS staff are involved e.g. third sector reps or patients, please record their organisation or reason for inclusion):**

Frances McMeeking, Assistant Chief Officer for Operational Care Services Gordon Bryan, Head of Care Services Gareth Williams, Planning Manager
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	<i>Example</i>	<b>Service Evidence Provided</b>	<b>Possible negative impact and Additional Mitigating Action Required</b>
<p>1.</p>	<p><b>What equalities information is routinely collected from people currently using the service or affected by the policy? If this is a new service proposal what data do you have on proposed service user groups. Please note any barriers to collecting this data in your submitted evidence and an explanation for any protected characteristic data omitted.</b></p>	<p><b><i>A sexual health service collects service user data covering all 9 protected characteristics to enable them to monitor patterns of use.</i></b></p> <p>Information is collected for Supported Living Service Users within the systems used by Care Services for data capture, monitoring, reporting and scheduling. This information can potentially identify the 9 protected characteristics in the Equality Act 2010:</p> <ul style="list-style-type: none"> <li>• Age (Date of Birth)</li> <li>• Sex / Gender Reassignment (Names could identify if not given)</li> <li>• If Married / in a relationship (which could indicate sexuality) &amp; / or family contacts</li> <li>• Religion</li> <li>• Ethnicity / Race – and if translation services / materials are needed. This would link in with Refugees’ supported by the service.</li> <li>• Gypsies and Travellers / captured under data supporting homeless / no fixed abode individuals, which could include the former.</li> <li>• Disability – captured within the system to enable the correct support.</li> </ul> <p>This service and the information captured is already monitored and used by staff for the purpose of delivering a quality service that is respectful of the 9m characteristics where identified.</p>	<p>The systems do not directly capture all 9 characteristics, however they could be identified via interaction with the service user.</p> <p>Mitigating Action would consider including optional equalities feedback for the purpose of planning the service, engagement and communication. It would give insight into the protected demographics of the Supported Living Service.</p>

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	<i>Example</i>	<b>Service Evidence Provided</b>	<b>Possible negative impact and Additional Mitigating Action Required</b>
<p><b>2.</b> Please provide details of how data captured has been/will be used to inform policy content or service design.</p> <p>Your evidence should show which of the 3 parts of the General Duty have been considered (tick relevant boxes).</p> <p>1) Remove discrimination, harassment and victimisation <input type="checkbox"/></p> <p>2) Promote equality of opportunity <input checked="" type="checkbox"/></p> <p>3) Foster good relations between protected characteristics <input type="checkbox"/></p> <p>4) Not applicable <input type="checkbox"/></p>	<p><i>A physical activity programme for people with long term conditions reviewed service user data and found very low uptake by BME (Black and Minority Ethnic) people. Engagement activity found promotional material for the interventions was not representative. As a result an adapted range of materials were introduced with ongoing monitoring of uptake. (Due regard promoting equality of opportunity)</i></p>	<p>The service captures protected characteristic data within Care First 6 and Care Safe which can be used to identify and proactively plan / accommodate service users.</p> <p>Individuals receive tailored support regardless of their characteristics, which fosters inclusive and accessible support.</p> <p>Supported Living is Independently reviewed by the Learning and Development network which gives access to wider training for staff regarding characteristics and interaction with service users.</p> <p>The Supported Living Service requires data captured through Hospital Risk Assessments along with independent Risk Assessments by Social Workers. Whilst both differ in the data captured the process of risk and referral to service adheres to the equality policies of the HSCP.</p>	<p>Care First 6 does not capture all characteristics. These can be captured further through tailored care plans.</p> <p>This data could be used for further developing the service by ensuring referral pathways and processes are inclusive of protected characteristics and any requirements. This could also allow modelling and forecasting based off individual characteristics if legislation changed.</p>

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	<i>Example</i>	<b>Service Evidence Provided</b>	<b>Possible negative impact and Additional Mitigating Action Required</b>
<p><b>3. How have you applied learning from research evidence about the experience of equality groups to the service or Policy?</b></p> <p>Your evidence should show which of the 3 parts of the General Duty have been considered (tick relevant boxes).</p> <p>1) Remove discrimination, harassment and victimisation <input type="checkbox"/></p> <p>2) Promote equality of opportunity <input checked="" type="checkbox"/></p> <p>3) Foster good relations between protected characteristics <input type="checkbox"/></p> <p>4) Not applicable <input type="checkbox"/></p>	<p><i>Looked after and accommodated care services reviewed a range of research evidence to help promote a more inclusive care environment. Research suggested that young LGBT+ people had a disproportionately difficult time through exposure to bullying and harassment. As a result staff were trained in LGBT+ issues and were more confident in asking related questions to young people. (Due regard to removing discrimination, harassment and victimisation and fostering good relations).</i></p>	<p>HSCP: discrimination &amp; harassment SSSC codes, care standards – good relations Staff trained. LGBTQ awareness – promoted materials, communications.</p> <p>GCHSCP Care Services have undertaken 9 reviews of the Supported Living Service for budget savings in line with the legislation of the SSSC and Care Inspectorate as a benchmark to plan against, given they both demand inclusive planning for equalities.</p> <p>As this is a review and proposed change of the service relating to budget savings, analysis of service user data allowed the service to consider the barriers individuals with protected characteristics could face alongside the standard planning and development for our service users.</p> <p>Staff received updated training ahead of the new service developments which included protected characteristics.</p> <p>Promoted materials and communications were developed for LGBTQ awareness and shared throughout the wider body of Care Services.</p> <p>Information gathered and considered during the review and planning is the same as question 1:</p> <ul style="list-style-type: none"> <li>• Age (Date of Birth)</li> <li>• Sex / Gender Reassignment (Names could identify if not given)</li> <li>• If Married / in a relationship (which could indicate</li> </ul>	<p>An inclusive and standardised approach across the service may take focus from areas with service users who have specific characteristics (e.g. Race – BAME areas within localities).</p> <p>Whilst the service may not be considered approachable if seen as not representing individuals due to a standard approach – it can be mitigated through communication and engagement – and with staff and services being approachable.</p> <p>The data captured in the day to day activity is used to understand the demographic spread of our service users and was used to consider how service users experience the service, potential changes and to adjust plans accordingly if required based on feedback.</p>

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			<p>sexuality) &amp; / or family contacts</p> <ul style="list-style-type: none"><li>• Religion</li><li>• Ethnicity / Race – and if translation services / materials are needed. This would link in with Refugees' supported by the service.</li><li>• Gypsies and Travellers / captured under data supporting homeless / no fixed abode individuals, which could include the former.</li><li>• Disability – captured within the system to enable the correct support.</li></ul>	
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	<i>Example</i>	<b>Service Evidence Provided</b>	<b>Possible negative impact and Additional Mitigating Action Required</b>
<p><b>4. Can you give details of how you have engaged with equality groups with regard to the service review or policy development? What did this engagement tell you about user experience and how was this information used?</b></p> <p>Your evidence should show which of the 3 parts of the General Duty have been considered (tick relevant boxes).</p> <p>1) Remove discrimination, harassment and victimisation <input type="checkbox"/></p> <p>2) Promote equality of opportunity <input checked="" type="checkbox"/></p> <p>3) Foster good relations between protected characteristics <input type="checkbox"/></p> <p>4) Not applicable <input type="checkbox"/></p>	<p><b><i>A money advice service spoke to lone parents (predominantly women) to better understand barriers to accessing the service. Feedback included concerns about waiting times at the drop in service, made more difficult due to child care issues. As a result the service introduced a home visit and telephone service which significantly increased uptake.</i></b></p> <p><b><i>(Due regard to promoting equality of opportunity)</i></b></p> <p><b><i>* The Child Poverty (Scotland) Act 2017 requires organisations to take actions to reduce poverty for children in households at risk of low incomes.</i></b></p>	<p>The Supported Living Service conducts annual focus groups and the service users are able to feedback their issues with the service, equalities are covered within that session. Care Services also undertook wider engagement across the partnership with service users and equality groups to ensure the service was planned and developed in January 2022 to be accessible.</p> <p>Tasks undertaken to support the development of service relating to this were:</p> <p>Updating the Care Services communications plan to include the service, which covers equalities.</p> <p>Ensuring the service is accessible to everyone across all protected characteristics (this is standard across all of Care Services).</p> <p>Planning the new developments around the Adult Support and Protection Act, Incapacity Act &amp; Mental Healthcare and Treatment Act.</p>	<p>Public engagement committee for scrutiny.</p> <p>Locality teams engagement strategy per locality across all services.</p>

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	<i>Example</i>	Service Evidence Provided	<b>Possible negative impact and Additional Mitigating Action Required</b>
<p>5. <b>Is your service physically accessible to everyone? If this is a policy that impacts on movement of service users through areas are there potential barriers that need to be addressed?</b></p> <p>Your evidence should show which of the 3 parts of the General Duty have been considered (tick relevant boxes).</p> <p>1) Remove discrimination, harassment and victimisation <input type="checkbox"/></p> <p>2) Promote equality of opportunity <input type="checkbox"/></p> <p>3) Foster good relations between protected characteristics. <input type="checkbox"/></p> <p>4) Not applicable <input checked="" type="checkbox"/></p>	<p><i>An access audit of an outpatient physiotherapy department found that users were required to negotiate 2 sets of heavy manual pull doors to access the service. A request was placed to have the doors retained by magnets that could deactivate in the event of a fire. (Due regard to remove discrimination, harassment and victimisation).</i></p>	<p>Not applicable – services delivered service users homes.</p>	<p>Equipment is made available to make their own home even more accessible and improve quality of life.</p>



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	<i>Example</i>	<b>Service Evidence Provided</b>	<b>Possible negative impact and Additional Mitigating Action Required</b>
<p><b>6. How will the service change or policy development ensure it does not discriminate in the way it communicates with service users and staff?</b></p> <p>Your evidence should show which of the 3 parts of the General Duty have been considered (tick relevant boxes).</p> <p>1) Remove discrimination, harassment and victimisation <input type="checkbox"/></p> <p>2) Promote equality of opportunity <input checked="" type="checkbox"/></p> <p>3) Foster good relations between protected characteristics <input type="checkbox"/></p> <p>4) Not applicable <input type="checkbox"/></p> <p>The British Sign Language (Scotland) Act 2017 aims to raise awareness of British Sign Language and improve access to services for those using the language.</p>	<p><i>Following a service review, an information video to explain new procedures was hosted on the organisation's YouTube site. This was accompanied by a BSL signer to explain service changes to Deaf service users.</i></p> <p><i>Written materials were offered in other languages and formats.</i></p> <p><i>(Due regard to remove discrimination, harassment and victimisation and promote equality of opportunity).</i></p>	<p>Care Services has a robust communication plan that is accessible across a variety of mediums.</p> <p>Where Supported Living may not be able to give additional support to service users, sign posting to third sector organisations is done, with materials and information provided.</p> <p>Supported Living managers have an open door policy for all staff and likewise a complaints process as per the HSCP procedures.</p> <p>Supported Living frequently reviews training and updates policies in line with legislative bodies. There is also service specific training available on the councils Gold digital training platform.</p> <p>Physical copies of training / in-person training is available for individuals that have difficulties with the internet / require further, individual support.</p>	<p>There is no negative impact for this. Service Users interests are monitored by regulating bodies and internal reviews and audits to ensure standards and policies are met.</p> <p>Trade Unions are engaged with regularly and ensure that the service is providing the right support for staff.</p>

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	<p><b>Specific attention should be paid in your evidence to show how the service review or policy has taken note of this.</b></p>			
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7	Protected Characteristic	Service Evidence Provided	Possible negative impact and Additional Mitigating Action Required
(a)	<p><b>Age</b></p> <p><b>Could the service design or policy content have a disproportionate impact on people due to differences in age? (Consider any age cut-offs that exist in the service design or policy content. You will need to objectively justify in the evidence section any segregation on the grounds of age promoted by the policy or included in the service design).</b></p> <p><b>Your evidence should show which of the 3 parts of the General Duty have been considered (tick relevant boxes).</b></p> <p>1) Remove discrimination, harassment and victimisation <input type="checkbox"/></p> <p>2) Promote equality of opportunity <input checked="" type="checkbox"/></p> <p>3) Foster good relations between protected characteristics. <input type="checkbox"/></p> <p>4) Not applicable <input type="checkbox"/></p>	<p>The review of the Supported Living Service has an age cut off for 65+. This is due to the services on offer that are either additional to mainstream care services or required due to an individual's age and vulnerabilities.</p>	<p>No negative implications as the service caters to provide support to the elderly who struggle with essential living tasks.</p> <p>There are services provided within the HSCP for individuals under 65.</p>
(b)	<p><b>Disability</b></p> <p><b>Could the service design or policy content have a disproportionate impact on people due to the protected characteristic of disability?</b></p> <p><b>Your evidence should show which of the 3 parts of the</b></p>	<p>The service is available to individuals with complex needs and disabilities.</p> <p>Where additional services are needed such as sign / interpretation or audio descriptive materials, the service users can request additional support.</p>	<p>No negative implications.</p>

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	<p><b>General Duty have been considered (tick relevant boxes).</b></p> <p>1) Remove discrimination, harassment and victimisation <input type="checkbox"/></p> <p>2) Promote equality of opportunity <input checked="" type="checkbox"/></p> <p>3) Foster good relations between protected characteristics. <input type="checkbox"/></p> <p>4) Not applicable <input type="checkbox"/></p>		
	<p><b>Protected Characteristic</b></p>	<p><b>Service Evidence Provided</b></p>	<p><b>Possible negative impact and Additional Mitigating Action Required</b></p>
<p>(c)</p>	<p><b>Gender Reassignment</b></p> <p><b>Could the service change or policy have a disproportionate impact on people with the protected characteristic of Gender Reassignment?</b></p> <p><b>Your evidence should show which of the 3 parts of the General Duty have been considered (tick relevant boxes).</b></p> <p>1) Remove discrimination, harassment and victimisation <input type="checkbox"/></p> <p>2) Promote equality of opportunity <input checked="" type="checkbox"/></p> <p>3) Foster good relations between protected characteristics <input type="checkbox"/></p> <p>4) Not applicable <input type="checkbox"/></p>	<p>The service is respectful of individuals who have had or are undergoing gender reassignment. This further links in with training and awareness around LGBTQ+ and individuals transitioning.</p> <p>How service users identify with their gender or pronouns will be recorded and used as requested by the individuals.</p>	<p>Potential negative impact would be staff using incorrect pronouns / or if information is accidentally recorded wrong.</p> <p>This can be mitigated through awareness and training, promotional materials for staff and service users and through learning from case studies / individuals as part of a qualitative review.</p>

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	Protected Characteristic	Service Evidence Provided	Possible negative impact and Additional Mitigating Action Required
(d)	<p><b>Marriage and Civil Partnership</b></p> <p><b>Could the service change or policy have a disproportionate impact on the people with the protected characteristics of Marriage and Civil Partnership?</b></p> <p><b>Your evidence should show which of the 3 parts of the General Duty have been considered (tick relevant boxes).</b></p> <p>1) Remove discrimination, harassment and victimisation <input type="checkbox"/></p> <p>2) Promote equality of opportunity <input type="checkbox"/></p> <p>3) Foster good relations between protected characteristics <input type="checkbox"/></p> <p>4) Not applicable <input checked="" type="checkbox"/></p>	<p>N/a – the service is available regardless of marriage / civil partnership status</p>	<p>No negative impacts</p>
(e)	<p><b>Pregnancy and Maternity</b></p> <p><b>Could the service change or policy have a disproportionate impact on the people with the protected characteristics of Pregnancy and Maternity?</b></p> <p><b>Your evidence should show which of the 3 parts of the General Duty have been considered (tick relevant boxes).</b></p> <p>1) Remove discrimination, harassment and victimisation <input type="checkbox"/></p>	<p>Policies around pregnancy and maternity leave are followed according to guidance from HR. There should be no further issue for staff.</p> <p>If service users are pregnant a risk assessment would be carried out due to the 65+ eligibility for the service. This would lead to additional support if needed and Supported Living would still be accessible for individuals without restriction.</p>	<p><b><u>No negative impacts as HR policies will be followed.</u></b></p>

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	<p>2) Promote equality of opportunity <input checked="" type="checkbox"/></p> <p>3) Foster good relations between protected characteristics. <input type="checkbox"/></p> <p>4) Not applicable <input type="checkbox"/></p>		
	<p><b>Protected Characteristic</b></p>	<p><b>Service Evidence Provided</b></p>	<p><b>Possible negative impact and Additional Mitigating Action Required</b></p>
<p>(f)</p>	<p><b>Race</b></p> <p><b>Could the service change or policy have a disproportionate impact on people with the protected characteristics of Race?</b></p> <p><b>Your evidence should show which of the 3 parts of the General Duty have been considered (tick relevant boxes).</b></p> <p>1) Remove discrimination, harassment and victimisation <input type="checkbox"/></p> <p>2) Promote equality of opportunity <input checked="" type="checkbox"/></p> <p>3) Foster good relations between protected characteristics <input type="checkbox"/></p> <p>4) Not applicable <input type="checkbox"/></p>	<p>Supported Living is available to everyone regardless of race or ethnicity. If there are barriers around language a translation service / support can be requested to meet service user needs.</p> <p>The request could provide interpreters and translated documents if required by service users.</p> <p>Visits can be requested to be scheduled when family members are present / English speaking relatives. Where possible the Service will plan for and accommodate this need.</p>	<p>Negative impact would be translation / interpreters' services not being available at times requested.</p> <p>This could be mitigated through monitoring service user data / reports and identifying this need in advance for booking.</p> <p>These Service Users could also be prioritised / escalated within the service to coordinate with and meet the availability of interpreters.</p>
<p>(g)</p>	<p><b>Religion and Belief</b></p> <p><b>Could the service change or policy have a disproportionate impact on the people with the protected characteristic of Religion and Belief?</b></p>	<p>Religion is captured within the data systems and the Supported Living Service review has taken any appropriate measures to ensure there is no disproportionate impact on Religion / Beliefs.</p>	<p>No Negative Implications.</p>

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	<p><b>Your evidence should show which of the 3 parts of the General Duty have been considered (tick relevant boxes).</b></p> <p>1) Remove discrimination, harassment and victimisation <input type="checkbox"/></p> <p>2) Promote equality of opportunity <input checked="" type="checkbox"/></p> <p>3) Foster good relations between protected characteristics. <input type="checkbox"/></p> <p>4) Not applicable <input type="checkbox"/></p>	<p>Any requests to accommodate Religious Beliefs can be made to the service and will be met / accommodated where possible e.g. If requested due to these characteristics, service visits can be planned around specific times / days to ensure individuals are given protected time for worship.</p>	
	<p><b>Protected Characteristic</b></p>	<p><b>Service Evidence Provided</b></p>	<p><b>Possible negative impact and Additional Mitigating Action Required</b></p>
<p>(h)</p>	<p><b>Sex</b></p> <p><b>Could the service change or policy have a disproportionate impact on the people with the protected characteristic of Sex?</b></p> <p><b>Your evidence should show which of the 3 parts of the General Duty have been considered (tick relevant boxes).</b></p> <p>1) Remove discrimination, harassment and victimisation <input type="checkbox"/></p> <p>2) Promote equality of opportunity <input checked="" type="checkbox"/></p> <p>3) Foster good relations between protected characteristics. <input type="checkbox"/></p> <p>4) Not applicable <input type="checkbox"/></p>	<p>The sex of individuals receiving Supported Living will not be disproportionately impacted through the service review and proposed budget savings.</p> <p>The recruitment to the Supported Living is open to both sexes, however it is primarily staffed by females. If there is a request for staff conducting visits to be a certain sex, the service will accommodate where possible.</p>	<p>It is possible that there may not be enough Male staff within Supported Living, if there is a high number of requests for Male only visits.</p> <p>Mitigating actions would include providing cover for these appointments from within Care Services to meet this need. Alternatively, agency staff could be utilised for these visits.</p>

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<p>(i)</p>	<p><b>Sexual Orientation</b></p> <p><b>Could the service change or policy have a disproportionate impact on the people with the protected characteristic of Sexual Orientation?</b></p> <p><b>Your evidence should show which of the 3 parts of the General Duty have been considered (tick relevant boxes).</b></p> <p><b>1) Remove discrimination, harassment and victimisation</b> <input type="checkbox"/></p> <p><b>2) Promote equality of opportunity</b> <input checked="" type="checkbox"/></p> <p><b>3) Foster good relations between protected characteristics.</b> <input type="checkbox"/></p> <p><b>4) Not applicable</b> <input type="checkbox"/></p>	<p>Sexual Orientation of Service Users does not have a disproportionate impact and does not restrict access to the service.</p> <p>Staff receive LGBTQ+ awareness training internally and it is also covered within their registration (codes of conduct) with the Care Inspectorate.</p> <p>Internal communications from Care Services and within Supported Living promote awareness and the correct terminology to address individuals and refer to their 'partners' as partners.</p>	<p>No negative impact</p>
	<p><b>Protected Characteristic</b></p>	<p><b>Service Evidence Provided</b></p>	<p><b>Possible negative impact and Additional Mitigating Action Required</b></p>
<p>(j)</p>	<p><b>Socio – Economic Status &amp; Social Class</b></p> <p><b>Could the proposed service change or policy have a disproportionate impact on people because of their social class or experience of poverty and what mitigating action have you taken/planned?</b></p> <p><b>The Fairer Scotland Duty (2018) places a duty on public bodies in Scotland to actively consider how they can reduce inequalities of outcome caused by socioeconomic disadvantage when making <u>strategic</u> decisions. If relevant, you should evidence here what steps have been taken to assess and mitigate risk of</b></p>	<p>Socio – economic Status &amp; Social Class does not restrict nor disproportionately impact service users.</p> <p>Demographic data available from the wider HSCP is used when reviewing and planning service developments to ensure services are accessible and available across all areas of the city.</p> <p>The Supported Living Service also utilises third sector knowledge to refer individuals to services such as money advice and welfare rights to ensure they receive the correct benefits, which in turn may mitigate financial struggles or further support</p>	<p>Socio – Economic Status is considered during service reviews and planning.</p>



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<p><b>exacerbating inequality on the ground of socio-economic status. Additional information available here: <a href="http://www.gov.scot">Fairer Scotland Duty: guidance for public bodies - gov.scot (www.gov.scot)</a></b></p> <p>Seven useful questions to consider when seeking to demonstrate 'due regard' in relation to the Duty:</p> <ol style="list-style-type: none"><li>1. What evidence has been considered in preparing for the decision, and are there any gaps in the evidence?</li><li>2. What are the voices of people and communities telling us, and how has this been determined (particularly those with lived experience of socio-economic disadvantage)?</li><li>3. What does the evidence suggest about the actual or likely impacts of different options or measures on inequalities of outcome that are associated with socio-economic disadvantage?</li><li>4. Are some communities of interest or communities of place more affected by disadvantage in this case than others?</li><li>5. What does our Duty assessment tell us about socio-economic disadvantage experienced disproportionately according to sex, race, disability and other protected characteristics that we may need to factor into our decisions?</li><li>6. How has the evidence been weighed up in reaching our final decision?</li><li>7. What plans are in place to monitor or evaluate the impact of the proposals on inequalities of outcome that are associated with socio-economic disadvantage? 'Making Fair Financial Decisions' (EHRC, 2019)<sup>21</sup> provides useful information about the 'Brown Principles' which can be used to determine whether due regard has been given. When engaging with communities the National Standards for Community Engagement<sup>22</sup> should be followed. Those engaged with should also be advised subsequently on how their contributions were factored into the final decision.</li></ol>	<p>individuals with wider concerns.</p> <p>The Lord Provost Fund and Loudon Fund are made available to Supported Living which supports the service in reaching as many individuals as possible.</p>	
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<p>(k)</p>	<p><b>Other marginalised groups</b></p> <p><b>How have you considered the specific impact on other groups including homeless people, prisoners and ex-offenders, ex-service personnel, people with addictions, people involved in prostitution, asylum seekers &amp; refugees and travellers?</b></p>	<p>Supported living is made available to individuals with limited access to services with no recourse to public funds. Such as individuals with refugee status, Asylum Seekers and Gypsies / Travellers.</p> <p>These individuals are supported throughout the process regarding their marginalised status and where no fixed address / no location is provided, care and support are still arranged to a convenient and safe location for the individual.</p> <p>Supported Living links in with the wider Homeless teams for referrals and support for marginalised individuals.</p>	<p>A potential negative impact is the funding and support available for partners helping to support these individuals and whom the service works with. This is due to the ongoing ramifications of Brexit, EU funding and Scottish versus UK government allocations.</p> <p>Mitigating actions are to learn from partners and service users (user data) who fall within this category to future proof the service and support on offer if funding is no longer available for these individuals.</p>
<p>8.</p>	<p><b>Does the service change or policy development include an element of cost savings? How have you managed this in a way that will not disproportionately impact on protected characteristic groups?</b></p> <p><b>Your evidence should show which of the 3 parts of the General Duty have been considered (tick relevant boxes).</b></p> <p>1) Remove discrimination, harassment and victimisation <input type="checkbox"/></p> <p>2) Promote equality of opportunity <input checked="" type="checkbox"/></p> <p>3) Foster good relations between protected characteristics. <input type="checkbox"/></p> <p>4) Not applicable <input type="checkbox"/></p>	<p>Cost / Budget savings are the driving factor behind the service review and proposed change, as such an initial business case and evaluation / forecast for the service was undertaken.</p>	<p>No Implication / Disproportionate Impact</p>

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		<b>Service Evidence Provided</b>	<b>Possible negative impact and Additional Mitigating Action Required</b>
9.	<b>What investment in learning has been made to prevent discrimination, promote equality of opportunity and foster good relations between protected characteristic groups? As a minimum include recorded completion rates of statutory and mandatory learning programmes (or local equivalent) covering equality, diversity and human rights.</b>	<p>Staff complete annual Gold equality training. This is made accessible offline for staff who struggle / can not access the internet.</p> <p>New staff coming into the service receive comprehensive training packages and staff that are longer serving have refresher training available to them.</p> <p>Staff are able to access materials, attend courses and are supported in validating their registration.</p> <p>All of the above link into preventing discrimination, promoting equality and fostering good relations through training packages and support available through Supported Living.</p> <p>Additionally, Supported Living provides materials and communications to inform wider teams, families and communities of the work undertaken and which encompass themes around characteristics.</p>	<p>Training and Support is reviewed regularly by senior management.</p> <p>No further action required.</p>

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10. In addition to understanding and responding to legal responsibilities set out in Equality Act (2010), services must pay due regard to ensure a person's human rights are protected in all aspects of health and social care provision. This may be more obvious in some areas than others. For instance, mental health inpatient care or older people's residential care may be considered higher risk in terms of potential human rights breach due to potential removal of liberty, seclusion or application of restraint. However risk may also involve fundamental gaps like not providing access to communication support, not involving patients/service users in decisions relating to their care, making decisions that infringe the rights of carers to participate in society or not respecting someone's right to dignity or privacy.

The Human Rights Act sets out rights in a series of articles – right to Life, right to freedom from torture and inhumane and degrading treatment, freedom from slavery and forced labour, right to liberty and security, right to a fair trial, no punishment without law, right to respect for private and family life, right to freedom of thought, belief and religion, right to freedom of expression, right to freedom of assembly and association, right to marry, right to protection from discrimination.

Please explain in the field below if any risks in relation to the service design or policy were identified which could impact on the human rights of patients, service users or staff.

N/a - no further risks to the service were identified that have not already been risk assessed in prior planning, reviews and learning for the service.

Please explain in the field below any human rights based approaches undertaken to better understand rights and responsibilities resulting from the service or policy development and what measures have been taken as a result e.g. applying the PANEL Principles to maximise Participation, Accountability, Non-discrimination and Equality, Empowerment and Legality or FAIR\* .

The Supported Living Service has been designed with an equality-based approach that is considerate of human rights. As there are changes to laws with respect to protected characteristics, legislation or additional fundamental change to human rights, the service adapts policies and plans with all of this in mind. Supported Living was developed to be accessible and available to everyone. This approach ensures a fair approach that does not discriminate against: Age, Sex, Gender Status, Marital Status, Religion, Ethnicity / Race, Refugee Status, Gypsies and Travellers and Disabilities; furthermore, the service does not discriminate against socio-economic factors, political persuasions and / or languages spoken.

Supported Living operates with an inclusive engagement strategy that aims to consider feedback and learning from service users, families, stakeholders and staff, in order to deliver the best service we can to the highest possible standards. It is essential our staff and service users are included within the development of the service when considering a human rights approach. The PANEL human rights approach will become a part of our strategic engagement process for the service.

- Gypsies and Travellers / captured under data supporting homeless / no fixed abode individuals, which could include the former.
- Disability – captured within the system to enable the correct support.

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\*

- **Facts:** What is the experience of the individuals involved and what are the important facts to understand?
- **Analyse rights:** Develop an analysis of the human rights at stake
- **Identify responsibilities:** Identify what needs to be done and who is responsible for doing it
- **Review actions:** Make recommendations for action and later recall and evaluate what has happened as a result.

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Having completed the EQIA template, please tick which option you (Lead Reviewer) perceive best reflects the findings of the assessment. This can be cross-checked via the Quality Assurance process:

- Option 1: No major change (where no impact or potential for improvement is found, no action is required)
- Option 2: Adjust (where a potential or actual negative impact or potential for a more positive impact is found, make changes to mitigate risks or make improvements)
- Option 3: Continue (where a potential or actual negative impact or potential for a more positive impact is found but a decision not to make a change can be objectively justified, continue without making changes)
- Option 4: Stop and remove (where a serious risk of negative impact is found, the plans, policies etc. being assessed should be halted until these issues can be addressed)

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11. If you believe your service is doing something that 'stands out' as an example of good practice - for instance you are routinely collecting patient data on sexual orientation, faith etc. - please use the box below to describe the activity and the benefits this has brought to the service. This information will help others consider opportunities for developments in their own services.

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**Actions – from the additional mitigating action requirements boxes completed above, please summarise the actions this service will be taking forward.**

**Date for completion**

**Who is responsible?(initials)**

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**Ongoing 6 Monthly Review    please write your 6 monthly EQIA review date:**

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**Lead Reviewer EQIA Sign Off:**

<b>Name:</b>	
<b>Job Title:</b>	
<b>Signature:</b>	
<b>Date:</b>	

**Quality Assurance Sign Off:**

<b>Name:</b>	
<b>Job Title:</b>	
<b>Signature:</b>	
<b>Date:</b>	

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**NHS GREATER GLASGOW AND CLYDE EQUALITY IMPACT ASSESSMENT TOOL  
MEETING THE NEEDS OF DIVERSE COMMUNITIES  
6 MONTHLY REVIEW SHEET**

Name of Policy/Current Service/Service Development/Service Redesign:

--

Please detail activity undertaken with regard to actions highlighted in the original EQIA for this Service/Policy

		Completed	
		Date	Initials
<b>Action:</b>			
<b>Status:</b>			
<b>Action:</b>			
<b>Status:</b>			
<b>Action:</b>			
<b>Status:</b>			
<b>Action:</b>			
<b>Status:</b>			

Please detail any outstanding activity with regard to required actions highlighted in the original EQIA process for this Service/Policy and reason for non-completion

		To be Completed by	
		Date	Initials
<b>Action:</b>			
<b>Reason:</b>			
<b>Action:</b>			
<b>Reason:</b>			



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Please detail any new actions required since completing the original EQIA and reasons:

		To be completed by	
		Date	Initials
Action:			
Reason:			
Action:			
Reason:			

Please detail any discontinued actions that were originally planned and reasons:

Action:	
Reason:	
Action:	
Reason:	

Please write your next 6-month review date

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Name of completing officer:	
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Date submitted:	
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If you would like to have your 6 month report reviewed by a Quality Assuror please e-mail to: [alastair.low@ggc.scot.nhs.uk](mailto:alastair.low@ggc.scot.nhs.uk)

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