

## Equality Impact Assessment Tool for Frontline Patient Services

Equality Impact Assessment is a legal requirement and may be used as evidence for cases referred for further investigation for legislative 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. Please contact [CITAdminTeam@ggc.scot.nhs.uk](mailto:CITAdminTeam@ggc.scot.nhs.uk) for further details or call 0141 2014560.

1. Name of Current Service/Service Development/Service Redesign (please provide service details and location):

Reprovision of Older Peoples Day Services - West 'Locality' (Park Road and Burnbank to Oakburn Park)

This is a: Service Development

2. Description of the service & rationale for selection for EQIA:

### A. What does the service do?

There are 3 Day Centres (1 of these is a local authority) for Older People in the 'West' locality area of East Dunbartonshire ('West' locality is made up of Bearsden, Milngavie and the outlying villages of Baldernock and Bardowie), offering care to frail older people and people with Dementia aged over 60 and the service(s) are registered with the Care Inspectorate. Service users attending have been assessed by a social work or a health professional as requiring day care. This is part of a package of care which meets their assessed needs and enables

them to live in their own home for as long as possible. The three Day Care centres offer 203 contracted care spaces to older people each week. Park Road and Burnbank are open Monday to Friday and have 48 contracted spaces (Park Rd (24) 12 Tuesday and 12 Thursday) (Burnbank (24) - 6 Tues, 6 Wed, 6 Thur and; 6 places on a Fri). The average attendance of day care service users at both units sits at around 50% per annum. Oakburn Park day care centre is open 7 days and has 155 weekly spaces (25 Mon, 25 Tue, 25 Wed, 25 Thur, 25 Fri and 15 places each on a Sat and Sun).

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

The Public Bodies (Joint Working) (Scotland) Act 2014 received Royal Assent, completing the process of legislation through Parliament, on 1 April 2014. The Act aims to support improvement in the quality and consistency of services through the integration of health and social care. East Dunbartonshire Health and Social Care Partnership (HSCP) has integrated planning and delivery of all community health and social care services, including services for children, adults, criminal justice and older people.

The East Dunbartonshire HSCP's Strategic Plan 2015-18 was approved by the IJB Board in February 2015. It outlines a clear vision whereby all HSCP services and stakeholders work in partnership with older people, their carers, families and communities to support them to stay at home or in a homely setting for as long as possible.

The Strategic Plan 2015-18 was the culmination of a 1 year programme of work which was led by the HSCP in partnership with other health and council service(s) such as social work and housing and also the third and independent sectors, community groups and local service users, carers and their families (The HSCP has recently published its draft Strategic Plan 2018-21, this again outlines the HSCP's ambition to further improve the opportunities for people to live a long and healthy life).

East Dunbartonshire Health and Social Care Partnership (HSCP) then set up a Day Care Review group who carried out a review of Day Care services from 1 February 2016 to 1 August 2016. The review group comprised the Head of Adults & Primary Care Services, Managers from Older People Social Work and Health teams, Planning and Commissioning and Finance staff.

The remit of the Day Care Review Group was to scope current provision, examine patterns of current and projected demand and uptake, and identify a strategic commissioning route for day care in light of the priorities set out with the HSCP's Strategic Plan (2015/18). This strategic

review of day care services for older people was presented and approved by the HSCP Board in March 2017.

The findings from the Day Care Review illustrated that the current 'West' locality Day Care service provision does not fit the strategic priorities of the HSCP, nor does it provide best value in terms of being flexible, needs and evidence based, outcome focussed or financially sustainable.

The estimated 2018 East Dunbartonshire population is 107,431 and over the next few years the overall population is predicted to decrease by 0.5%, while the 85+ years age group will increase by 17.8%. There is a projected increase in the twenty five years from 2014-2037, of 95% in the number of people aged 75+years. A key priority identified within the Strategic Plan 2015-18, is the requirement to identify options for the future provision of services for older people in East Dunbartonshire – in terms of both local authority provision and services provided by the third and independent sector.

Over the last few years, the HSCP has experienced increasing levels of demand for care at home services, specialist dementia care home and nursing care home placements. In recent years attendance at Day Care has been steadily falling. As at June 2016 there were 285 individuals attending commissioned day care services. A breakdown of days allocated include:

- 1 day; 144 (50%) of which 39 (27%) did not attend.
- 2 days; 103 (36%) of which 22 (21%) do not attend or attend for one day only.
- 3 days; 38 (13%) of which 18 (47%) do not attend or attend for 1 or 2 days only.

Reasons for the decline in attendance are most likely to be that; people are choosing to spend their personal budget generated by Self Directed support, on alternative services, such as overnight care, purchasing one to one care, attending historical talks, lunch clubs and musical events. Health and Social Care services have also specifically focused on the development of reablement and rehabilitation services, including the use of telecare which support older people to live in their homes or a homely setting for as long as possible.

In order to meet the changing needs of the local population as well as address the ongoing financial sustainability of the HSCP there is a need to consider alternative ways to target resources more effectively. It is recognised that resources within the 'West' locality older people Day Care services allocated, are not being fully utilised. The HSCP plans to consolidate Park Road and Burnbank services and re-provision

within Oakburn Day Care - thus ensuring and protecting East Dunbartonshire 'West' locality Older Peoples Day Care Services.

The re-provisioning of these services for older people with dementia who are assessed as needing day care support will take place over the coming months and will involve the HSCP reassessing individual's needs and outcomes and give people attending Park Road and Burnbank the opportunity to move to Oakburn Park if they wish.

The total number of places available will reduce from 203 daily to 155. Existing service users will continue to receive the same service and there should be little, if any effect on potential service users.

The HSCP understands that the re-provisioning activity will impact on service users, carers and families and plans to engage with and provide support to all those currently involved. Anyone assessed as requiring day care will continue to receive it.

**3. 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)**

**Name: Anthony Craig**

**Date of Lead Reviewer Training: 10/05/18**

**4. Please list everyone involved in carrying out this EQIA**

Derrick Pearce, (EDHSCP-Head of Community Health and Care Services); Stephen McDonald, (Joint Service Manager Older People); Gillian Healey, (Planning and Commissioning Manager); Margaret Friel, (Planning and Commissioning Officer); Kelly Gainty (Adults and Community Care Support Worker); Paula Brown, (AWI/Co-production Facilitator) and Anthony Craig, (Development Officer).

<b>Lead Reviewer Questions</b>	<b><i>Example of Evidence Required</i></b>	<b>Service Evidence Provided</b>	<b>Additional Requirements</b>
<p>1. <b>What equalities information is routinely collected from people using the service? Are there any barriers to collecting this data?</b></p>	<p><b><i>Age, Sex, Race, Sexual Orientation, Disability, Gender Reassignment, Faith, Socio-economic status data collected on service users to. Can be used to analyse DNAs, access issues etc.</i></b></p>	<p>All protected characteristics are covered by data collection in the needs assessment process for service users and is recorded on our database. The Equalities information that is recorded includes information on Age, Sex, Race, Sexual Orientation, Disability and Faith is reviewed in relation to service users attending the day centres as part of a package of care. The information recorded considered protected characteristics and upon review there was no requirement to undertake</p>	

		<p>more intensive analysis. In addition local and national data is collected and analysed and from this information resources and alternative services are put in place to support service users and staff service as required to ensure that equality and human rights issues for each individual are considered. No barriers have been identified however service users can choose not to disclose information. In the event that they lack capacity (for example dementia) to complete the data we would obtain permission from Power of Attorney or Legal Guardian.</p>	
<p><b>2. Can you provide evidence of how the equalities information you collect is used and give details of any changes that have taken place as a result? You should explain here how data is used to meet the General Duty of removing discrimination, promoting equality of opportunity and supporting good relations between protected</b></p>	<p><b><i>An addiction service used collected data to identify service uptake by sex. The review showed very few women attended and the service undertook local engagement to better understand perceived</i></b></p>	<p>Recent projections suggest that if current trends continue the number of people aged 75+ living in East Dunbartonshire will increase by over 95% in the years 2014-2037. In addition, increasing numbers of people are</p>	

<p><b>characteristic groups.</b></p>	<p><b>barriers.</b></p>	<p>developing dementia as they live longer. HSCP services will increasingly have to develop models of service provision which provide the care and support that people with dementia and their families require post diagnosis. Between 2015 -17 there was an estimated 11% rise on the number of people with dementia (2086 to 2314<sup>1</sup> people). This number will continue to rise with the growing older population and is one of the key development areas for services. To ensure we remove discrimination and promote equality of opportunity all staff within the Day Centres have been provided with dementia training to ensure appropriate skills are in place to build capacity and knowledge and to support service users going forward. In addition Dementia Services, Community</p>	
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<sup>1</sup> Estimated number of people with dementia in East Dunbartonshire 2017 - EuroCoDe and Harvey study - Alzheimer Scotland

			<p>Rehab Team (CRT), District Nurses, Podiatry Staff, GP's and Sensory Impairment Services are linked to all Day Centres to provide tailored services as and when required. An example that data collected has been used to inform the way the service operates is the monitoring of attendance figures which over the past two years indicate a gradual reduction in attendance. As a result it is intended to reduce the number of the 'West' locality Day Centres and reconfigure to reflect the number of people attending day services and diverting resources released to more urgent priorities.</p>	
<p>3.</p>	<p>Have you applied any learning from research about the experience of equality groups with regard to removing potential barriers? This may be work previously carried out in the service. You should explain here how this learning has been used to meet the General Duty of removing discrimination, promoting equality of</p>	<p><b><i>Social work services used best practice models of engaging with adults with dementia tested in other parts of the UK. These were piloted locally with evaluation and review.</i></b></p>	<p>A Strategic Review of day services for older people and a needs assessment exercise has been conducted. This took into consideration evidence from consultation, service provision information as well as key local and</p>	



opportunity and

national demographic trends gathered through the development of the Strategic Plan 2015-18. Evidence suggested that Black and Minority Ethnic (BME) communities are less likely to access day care services. We also review service user feedback in relation to Day Care Centres and work has been undertaken with local officers to identify ways of promoting and raising awareness of day centre opportunities for people from BME communities. Client groups attending Day Centres may be affected by physical disabilities and mental health issues (e.g. dementia). Day services address these difficulties by providing care that helps to overcome these particular difficulties. Day Centre staff also receive specialised training to support service users. They are also provided with the appropriate level of support to ensure that

			<p>their continuous professional development is ongoing (e.g. specialised dementia training).</p>	
<p>4.</p>	<p>Can you give details of how you have engaged with equality groups to get a better understanding of needs?</p> <p>You should explain here how engagement has contributed to meeting the General Duty of removing discrimination, promoting equality of opportunity and supporting good relations between protected characteristic groups.</p>	<p><b><i>Service user satisfaction surveys with equality and diversity monitoring forms have been used to make changes to service provision.</i></b></p>	<p>We engage with service users and carers on a regular basis to better understand possible barriers to accessing the service. Through feedback forms with equality and diversity monitoring attached and regular 1 to 1's and reviews and through consultation with service users, carers and their families, this gives the HSCP an opportunity to link any notes for improvement to protected characteristics and to identify possible patterning in the feedback received. The HSCP also liaise with the local carer's org who hold annual service users and carer's surveys. This information is collated into an action plan and helps to address any issues raised to make relative changes to service provision (i.e.</p>	

better advocacy signposting or to cater for people who have special dietary requirements etc). Individual needs assessment are carried out by social work staff and regular meetings and briefings held with managers and staff to inform best practice going forward. In addition, individual and group meetings with service users and carers are carried out as and when appropriate.

From April to June 2017, the HSCP carried out an involvement and participation mapping exercise on how all services engaged and consulted with their service users and carers. The aim of this was to understand the various mechanisms currently in place that are used by HSCP staff teams to engage with public, service users, carers, patients and their families and the residents of East Dunbartonshire. The

			<p>HSCP then identified clear recommendations that were taken forward to the HSCP's senior management team.</p>	
<p>5.</p>	<p>Is your service physically accessible to everyone? Are there potential barriers that need to be addressed?</p> <p>You should explain here how reasonable adjustment has been used to meet the General Duty of removing discrimination, promoting equality of opportunity and supporting good relations between protected characteristic groups.</p>	<p><b><i>A service has installed loop systems and trained staff on their use. In addition, a review of signage has been undertaken with clearer directional information now provided.</i></b></p>	<p>In relation to physical accessibility, Oakburn Park day centre has full wheelchair accessibility for users and people with a disability. All services provided at Oakburn Park are delivered in a purpose designed Day Care Centre and includes all reasonable adjustments to ensure that service user and carer access is seamless and stress-free. Specialised equipment is also available to support accessibility needs and to mitigate potential barriers (i.e. Loop systems, specialised equipment for dementia service users). In addition moving and assistance training is available to all staff. There</p>	

		<p>is also appropriate equipment in place (i.e. hoists, etc and the HSCP's OT dept will assess for any additional equipment that may be required for individual service users). Also transport and bus escorts are available to support people attending the day centres.</p>	
<p><b>6.</b> How does the service ensure the way it communicates with service users removes any potential barriers?</p> <p>You should explain here how you communicate in a way that meets the General Duty of removing discrimination, promoting equality of opportunity and supporting good relations between protected characteristic groups.</p>	<p><b><i>A podiatry service has reviewed all written information and included prompts for receiving information in other languages or formats. The service has reviewed its process for booking interpreters and has briefed all staff on Interpreting Protocols.</i></b></p>	<p>Apart from customer consultation and client reviews where service users have the opportunity to express their views care inspectorate reports specifically address this area and indicate day services are operating within National Care Standards. The service also works closely with other support services i.e. occupational therapy, sensory impaired services and external day care providers to put in place information and supports to remove any potential barriers. Strategies are</p>	<p>All day centres are fully adapted to ensure barrier free environments for people with varying forms of disability including wheelchairs and sensory impairments. This includes loop systems, clear signage, dedicated disabled parking and transport designed to cope with different forms of disability e.g. tail lift access and bus escorts are also provided to support people attending the day</p>

			<p>also in place to promote positive behaviour and prevent incidences of challenging behaviour.</p> <p>The Talking Mats communication symbols tool are used which makes it easier both for people with dementia to keep to topic and for the listener to follow the track of the conversation. It also supports people with communication difficulties to express negative as well as positive views and reduce the tendency for people to acquiesce, i.e., agree with everything. We also ensure that all additional communication support needs are met in order to remove discrimination, promote equality of opportunity and good relations.</p>	<p>centres. Specialised equipment is also available to support accessibility needs and mitigate potential barriers, i.e. specialised equipment for dementia service users and stair climbers. In addition moving and assistance training is available to all staff and they are aware of the interpreting protocols and how to arrange services.</p>
7.	<p>Equality groups may experience barriers when trying to access services. The Equality Act (2010) places a legal duty on Public bodies to evidence how these barriers are identified and removed. What specifically has happened to ensure the needs of equality groups have been taken into consideration when considering discrimination, equality of opportunity and good relations in relation to:</p>			

<p><b>(a)</b></p>	<p><b>Sex</b></p>	<p><b><i>A sexual health hub reviewed sex disaggregated data and realised very few young men were attending clinics. They have launched a local promotion targeting young men and will be analysing data to test if successful.</i></b></p>	<p>The 2018 estimated East Dunbartonshire population is 107,431 people, an increase of 0.8% from the 2013 estimate. The estimated number of older people was higher than the national average with 11.8% aged over 65yrs (Scotland 10.6%), and 11% aged over 75yrs (Scotland 8.5%). Staff groups make up is also monitored to ensure appropriate staff are available to support clients and all staff undertake Diversity and Equality training. Oakburn Day Centre is located within a community; it is accessible and has a mixture of public and private rooms to ensure that communication with service users on any topic including a sensitive enquiry can take place in an appropriate space. Gender information is collected for all clients and is used as a basis for staffing and activity levels.</p>	
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<b>(b)</b>	<b>Gender Reassignment</b>	<b><i>A service has held briefing sessions with staff using the NHSGGC Transgender Policy. Staff are now aware of legal protection and appropriate approaches to delivering inpatient care including use of language and technical aspects of recording patient information.</i></b>	<p>East Dunbartonshire HSCP has policies in place and staff members are aware of the sensitivities around gender reassignment.</p> <p>Staff are able to manage sensitive care issues and treat persons as individuals according to his / her needs and preferences.</p>	
<b>(c)</b>	<b>Age</b>	<b><i>A home support service had operated age related exclusions for service users without objectively justifying the decision. This was reviewed and evidence sought to support the decision to limit service access.</i></b>	<p>Recent population projections by the Registrar General for Scotland suggest that the population of East Dunbartonshire will increase by 5.9% over the next 25 years and with the 85+years age group will increase by 17.8%. The current percentage of the population aged over 65 in Bearsden North is 20.4%, Bearsden South 22.1% and Milngavie 21.7%. The highest</p>	

		<p>population increase will be seen in those aged 75+ years with a predicted increase of 95% over 25 years. Increasingly age also has an impact on the likelihood of developing one or more long term conditions and increase the demand for health and social care provision.</p> <p>Oakburn Park specialises in providing exemplary care for frail older people and people with Dementia and consistently have high scores with the Care Inspectorate. It strives to achieve the highest care standard for older people at all times, the environment, culture and care is focussed on this.</p> <p>All staff have undertaken Adult protection training.</p>	
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(d)	Race	<p><b><i>An outpatient clinic reviewed its ethnicity data and saw it was not providing information in other languages. It included a prompt on information for patients to request copies in other languages. The clinic realised it was dependant on family to interpret and reviewed use of interpreting services to ensure this was provided for all appropriate appointments.</i></b></p>	<p>The 2011 Census showed 4.2% of East Dunbartonshire's population were from a minority ethnic group, an increase of around 2% since the last census in 2001, with the Asian population constituting the largest minority ethnic group. Information on day centres is available via leaflets and on the HSCP website and can be translated and made available in audio and large print through the Sensory Impairment team, who work closely with the service and NHS GGC Interpreters would be made available as necessary for clients. Information on race is collected on the internal computer/ information system (Carefirst) and is used to inform activities and service delivery.</p> <p>The HSCP and external providers have policies in place and staff can appropriately identify manage and challenge</p>	
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		racism in an appropriate and sensitive manner when required.	
(e)	<b>Sexual Orientation</b>	<b><i>A community service reviewed its information forms and realised that it asked whether someone was single or 'married'. This was</i></b>	Staff are aware of their legal responsibility to protect vulnerable adults and this is achieved through training, awareness raising and

		<p><b><i>amended to take civil partnerships into account. Staff were briefed on appropriate language and the risk of making assumptions about sexual orientation in service provision. Training was also provided on dealing with homophobic incidents.</i></b></p>	<p>management overview, including dealing with homophobic incidences. Such incidences would be recorded and reported through the existing processes. All staff undertake diversity and equality training. Information is reviewed on a regular basis to ensure that it is appropriate and this with include LGBT inclusive information.</p> <p>The HSCP and external providers have policies in place and are committed to delivering non discriminatory care and treats all people who enter Oakburn Park with dignity and respect.</p>	
<b>(f)</b>	<b>Disability</b>	<p><b><i>A receptionist reported he wasn't confident when dealing with deaf people coming into the service. A review was undertaken and a loop system put in place. At the same time a review of interpreting arrangements</i></b></p>	<p>The service is designed to meet the needs of people affected by a variety of disabilities. This includes the use of a variety of communication approaches and equipment. Person centred planning also</p>	

		<p><b><i>was made using NHSGGC's Interpreting Protocol to ensure staff understood how to book BSL interpreters.</i></b></p>	<p>allows the allocation of additional time if communication barriers exist. Communication needs are assessed on an ongoing basis and as part of regular reviews which includes carers. A small number of service users have learning disabilities and any issues that arise are taken into account e.g. talking mats.</p> <p>The HSCP plans and commissions services and ensures that these services are in fit for purpose facilities that cares for people with all manners of disability and is purposely designed to cater for all person's with physical and sensory disabilities as highlighted in section 6.</p>	
<b>(g)</b>	<b>Religion and Belief</b>	<p><b><i>A spiritual care/faith manual was provided to staff visiting families in their homes to support inclusive and sensitive care. A quiet room was made available for</i></b></p>	<p>In East Dunbartonshire 62.5% of the population stated they belonged to a Christian denomination. 35.6% of the population in East Dunbartonshire belonged to the Church of</p>	

	<p><b><i>prayer in the service area.</i></b></p>	<p>Scotland and 22.3% stated they were Roman Catholic. 4.4% of Bearsden residents and 0.51% of Milngavie residents reported that they were Muslim; and in East Dunbartonshire as a whole 1.8% of the population state they were Buddhist, Hindu, Jewish or Sikh. Religious beliefs of service users are noted as part of the assessment process and are taken into account in the delivery of day services, including meals provision. Day services are part of the community and input from local faith groups and churches would be encouraged. As stated previously Oakburn is an accessible space and has a mixture of public and private rooms. If a service user wishes to practice their faith, an appropriate space will be made available.</p> <p>The NHS GGC Faith &amp; Beliefs manual will be made available when</p>	
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		there is any uncertainty in meeting the needs of different spiritual requirements for people who use the facility.	
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(h)	<b>Pregnancy and Maternity</b>	<b><i>A reception area had made a room available to breast feeding mothers and had directed any mothers to this facility. Breast feeding is now actively promoted in the waiting area, though mothers can opt to use the separate room if preferred.</i></b>	<p>The client makeup of the group would make this seem not applicable, but as explained before, Oakburn is an accessible space and has a mixture of public and private rooms. If a visitor or a family member of a service user requires the use of a private room, a designated area would be provided as an option.</p> <p>The facility does not care for pregnant service users but can provide breast feeding facilities for carers, staff and visitors who require an area to breast feed their child.</p>	
(i)	<b>Socio - Economic Status</b>	<b><i>A staff development day identified negative stereotyping of working class patients by some practitioners characterising them as taking up too much time. Training was organised for all staff on social class discrimination and understanding how the impact this can have on</i></b>	<p>The HSCP is fully aware of socio economic status and will attempt to address any impact on individuals. For example the HSCP would provide signposting and/or input from CAB and/or the public health/health improvement inequalities officer. Making available information and resources</p>	

	<b>health.</b>	known and signposting to the correct advice services for people unable to manage their own finances. Day Centres are based in local communities were there can be areas of deprivation. Postcode data is collected and used to ensure that the service is transparent and open to all members of the community.	
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(j)	<b>Other marginalised groups - Homelessness, prisoners and ex-offenders, ex-service personnel, people with addictions, asylum seekers &amp; refugees, travellers</b>	<b><i>A health visiting service adopted a hand-held patient record for travellers to allow continuation of services across various HSCP areas.</i></b>	The person-centred planning approach allows any adverse impact of marginalised groups to be taken into account.	
9.	<b>Has the service had to make any cost savings or are any planned? What steps have you taken to ensure this doesn't impact disproportionately on equalities groups?</b>	<b><i>Proposed budget savings were analysed using the Equality and Human Rights Budget Fairness Tool. The analysis was recorded and kept on file and potential risk areas raised with senior managers for action.</i></b>	Primarily this service redesign is about providing best value in terms of a person centred approach to the support and care we provide i.e. care that is tailored to individual need and being outcome focussed. As at June 2106 in total, there are 458 Day Care placements available of which, 79 (17%) are currently vacant resulting in void costs of £185k p/a (16%) of the total contract value. Also the East Dunbartonshire Council / HSCP eligibility criteria is designed to ensure that the needs of people with protected characteristics are addressed. The re-provisioning of services from Park Road/ Burnbank to Oakburn	

		Park is cost neutral – Oakburn Park has sufficient capacity to absorb extra demand and anyone assessed as requiring day care will continue to receive it.	
10.	<b>What investment has been made for staff to help prevent discrimination and unfair treatment?</b>	<b><i>A review of staff PDPs showed a small take up of E-learning modules. Staff were given dedicated time to complete on line learning.</i></b>	East Dunbartonshire Day Care Centres seek to be part of their local communities and therefore to be socially inclusive, reducing the impact of discrimination. At present staff receive training in relation to equality and diversity. All staff have a continuous personal development programme and it is mandatory to attend equality and diversity training. Staff are reviewed annually for personal development programmes and all staff must either have SSSC certification or working towards as a minimum and must be registered - PVG. Staff will also have a 6 week one to one supervision to ensure they

		have appropriate levels of training and competency.	
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**11. In addition to understanding and responding to our legal responsibilities under the Equality Act (2010), services have a duty 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 (including dementia care) may be considered higher risk in terms of potential human rights breach due to 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.**

**Please give evidence of how you support each article, explaining relevance and any mitigating evidence if there's a perceived risk of breach. If articles are not relevant please return as not applicable and give a brief explanation why this is the case.**

### **Right to Life**

East Dunbartonshire HSCP will put in place safeguards (policy, training and protocols), to minimise the risk to life.

### **Everyone has the right to be free from torture, inhumane or degrading treatment or punishment**

East Dunbartonshire HSCP have in place safeguards (policy, training and protocols), staff training will be put in place (asist/suicide prevention) so staff should be able to recognise and report safely any signs of abuse or neglect and ensure the protection of service users and that there is no abuse or neglect of those in their care.

**Prohibition of slavery and forced labour**

Not applicable

**Everyone has the right to liberty and security**

East Dunbartonshire HSCP have in place safeguards (policy, training and protocols), so that all service users have the right to liberty and security.

**Right to a fair trial**

East Dunbartonshire HSCP have in place safeguards (policy, training and protocols), so that all service users have the right to a fair trial / tribunal and we will signpost any service user / carer to independent advocacy organisations.

### **Right to respect for private and family life, home and correspondence**

East Dunbartonshire HSCP have in place safeguards (policy, training and protocols). The HSCP and its staff will ensure that service users, carers and their families are protected with dignity and autonomy and if requiring participation in decision making will be signposted to independent advocacy to assist them in seeking advice (e.g. decisions about treatment or care, consent to medical treatment, support for decision making etc); Privacy (e.g. personal privacy at home or in care home, use of personal information etc); Family life (e.g. separation from spouse in residential care, social isolation); Physical and psychological integrity (e.g. poor quality care or inadequate service provision not amounting to inhuman treatment).

### **Right to respect for freedom of thought, conscience and religion**

East Dunbartonshire HSCP have in place safeguards (policy, training and protocols) and will aim to protect a wide range of religious and non-religious beliefs so long as sincerely held and worthy of respect.

### **Non-discrimination**

East Dunbartonshire HSCP have in place safeguards (policy, training and protocols), namely staff awareness and training and will aim to ensure that the other articles of the Convention are implemented without discrimination and supplements protection under Equality Act 2010.

**12. 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.**

**N/A**

**Lead Reviewer Name: Anthony Craig**

**Date: 01/05/18**