

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 for further details or call 0141 2014560.

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

East Dunbartonshire HSCP Learning Disability Strategic Review - EDC Accommodation Based and Community Respite Provision

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.

East Dunbartonshire Health and Social Care Partnership (HSCP) operates within a defined legal framework. This framework includes a range of legislation from which it derives duties and powers. The main source of these duties and powers are the:

- Social Work (Scotland) Act 1968 (as amended);
- Chronically Sick and Disabled Persons Act 1970 (as amended);
- Mental Health (Care and Treatment) (Scotland) Act 2003.

The Carers (Scotland) Act 2016 is a law passed by the Scottish Parliament to improve support for unpaid carers in Scotland. The Act recognises the important contribution of carers and aims to ensure that they are better supported in their caring role. The Act requires local authorities – councils – to ensure carers have access to information and advice services, and to offer carers an Adult Carer Support Plan or Young Carer Statement, which can highlight any support needs they may have. A break from caring must be considered as part of these support needs. The Act also expects local authorities to involve carers in decisions that affect them and to be aware of their views in the planning, design and delivery of support services, which could include short breaks services.

In addition, Scottish Government are committed to establishing a right to breaks from caring and have brought forward draft legislation in the National Care Service (Scotland) Bill. This proposes a new duty for authorities to consider whether a carer is already achieving sufficient breaks (e.g. with a limited caring role; by having family or friends step in; or due to the cared-for person's existing care package). If not, they would be entitled to receive support to meet their need for breaks.

There are two building-based respite services located within EDC:

- Twechar Respite - Adults service;
- Buttercups - Children's service.

Commissioned in 2006, Twechar Respite provides support to adults with learning disabilities, including those with complex and profound and multiple learning disabilities (PMLD) and Autistic Spectrum Disorder (ASD). The service, which is provided by The Mungo Foundation (TMF) has 5 places available per night. The Joint Learning Disability Team (JLDT) is responsible for day-to-day oversight and referrals to the service.

Commissioned in 2014, Buttercups Respite provides support to Children with disabilities, including physical disability, learning disability and Autistic Spectrum Disorder (ASD). The service, which is also provided by TMF has 3 places available per night. Children's & Families is responsible for day-to-day oversight and referrals to the service.

Both buildings are owned by the Council and sub-let to TMF as part of the original contractual arrangements.

Contracts for both services elapsed several years ago (albeit implied arrangements continue) and in recent years, both services reported annual deficits which are not sustainable. Furthermore, on-going under-occupancy issues, a large volume of cancellations and an inefficient management booking system has not only contributed to escalating costs but inadvertently, prevented both services from operating at optimum capacity.

As it stands, community respite opportunities are limited and access to community breaks can be difficult for carers to source.

Furthermore, the HSCP is operating within an increasingly challenging financial framework. The overall financial envelope for the HSCP has decreased. This means that subject to annual funding reviews, Learning Disability Services and those across all other care groups will be required to achieve sustained efficiencies.

The aim of this review is to:

- Explore potential efficiencies and reduce overall cost to the HSCP associated with buildings based respite;
- Examine alternative service delivery models with a view to reducing costs to the HSCP and improving access and choice associated with carer respite.

A lot of what the HSCP needs to do to support people with learning disabilities and autism is already set out in National and Local Policy. The service review will incorporate the guiding vision for adults with a learning disability and autism as set out in these policies; to shape supports, services and attitudes to ensure that the human rights of autistic people, also with learning/intellectual disabilities are respected and protected and that they are empowered to live their lives in the same manner as everyone else.

The review will be underpinned by Scottish Government and COSLA **Health and Social Care - Planning with People: Community Engagement and Participation Guidance**, to ensure those who will be affected are fully involved throughout the process and their views are secured.

The respite review is planned to conclude March 2026.

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.)

East Dunbartonshire HSCP has finite resources. [East Dunbartonshire Adult Learning Disability Strategy 2018-23](#) has at its core a commitment to fairness and equity of service provision. Applied through the implementation of the [Fair Access to Community Care Services Policy](#) we want to ensure consistency and fairness in how available services are allocated.

A Strategic Review of Learning Disability Services was formally approved in 2018 and widely consulted on at the time of conception. The review of Supported Accommodation Respite Services is being undertaken as part of this review. The re-design principles for services under review, as set out in the strategic review strategy are:

- To review existing in-house and purchased provision, identifying issues that impact on effectiveness and efficiency in meeting service-user and organisational outcomes;
- To redesign and re-commission where necessary;
- To meet statutory and strategic objectives, national and local;
- To ensure fair and consistent utilisation of resources, to meet existing and future needs;
- To maximise use of innovative and modern approaches to service delivery;
- To ensure sustainability of resources, services and contracts and the delivery of Best Value.

The service review could result in a change to service provision that will affect service users, carers and stakeholders. This Equality Impact Assessment (EqIA) has been undertaken to formally capture contextual information relevant to those affected by the review with protected characteristics and will be used to inform subsequent service proposals and consultation, to ensure any adverse impact on protected characteristic groups is minimised.

Whilst the outcome of the review is yet to be established, a number of potential overarching solutions are known to the HSCP, as identified through a recent benchmarking exercise across other local authority areas. These include, but are not limited to:

1. Continuation of buildings based respite only, but with a change to the funding model and the associated funding allocation for individuals;
 2. Continuation of buildings based respite only, but with a refreshed allocation model that ensures a minimum of 95% occupancy at all times and minimises waiting times for new referrals;
 3. Development of a single community based short break model only, supported by a Respite Bureau but with option to purchase building based provision out of authority;
 4. Development of a community based short break model, supported by a Respite Bureau but with retention of some or all of the current building based provision.
- All 4 options could result in reduced respite allocation for service users and carers and/or the introduction of personalised respite budgets.

The aim is to acknowledge the equalities duties placed upon the HSCP by the Equalities Act 2010 and the Public Sector Equality Duty (PSED) ensuring they are upheld. The PSED is non-delegable. In practice, this means that public authorities like EDHSCP need to ask their suppliers and those they commission services to take certain steps in order to enable the public authority to meet their continuing legal obligation to comply with the Equality Duty. The relevant protected characteristics covered by the Duty are:

- Age
- Disability
- Gender Reassignment
- Pregnancy and Maternity
- Race
- Religion or Belief
- Sex

- Sexual Orientation

Throughout the development of the review strategy, reference has been made to the general duties (Equality Act) (2010) and to the HSCP Equality Mainstreaming Report (2023-2027) and outcomes and how any proposed changes in service provision will meet the requirement:

- to eliminate unlawful discrimination;
- advance equality of opportunity, and;
- promote good relations.

Promoting equality and addressing health inequalities are at the heart of East Dunbartonshire Health and Social Care Partnership's vision and values. [East Dun HSCP Strategic Plan 2025-30](#) has aspirations set against the realities of the pressures being faced in the health and social care sectors to build towards a fair, equitable, sustainable, modern and efficient approach to service delivery. The Strategic Plan is aligned to the National Health and Wellbeing outcomes. The overarching principles are that:

- Health and social care services should focus on the needs of the individual to promote their health and wellbeing, and in particular, to enable people to live healthier lives in their community;
- People's experience of health and social care services and their impact is positive; that they are able to shape the care and support that they receive; and that people using services, whether health or social care, can expect a quality service regardless of where they live.

Specific service proposals Equality Impact Assessments will be undertaken to ensure any service change is compliant with the IJBs legal duties in respect of their Public Sector Duty.

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: Gayle Paterson

Date of Lead Reviewer Training: 26/10/23

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):

Karen Lamb – Head of Learning Disability Services
 Claire Carthy – Head of Children and Criminal Justice Services
 Jane Jeffrey - East Dun HSCP Health Improvement Senior

		Example	Service Evidence Provided	Possible negative impact and Additional Mitigating Action Required
1.	<p>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.</p>	<p><i>A sexual health service collects service user data covering all 9 protected characteristics to enable them to monitor patterns of use.</i></p>	<p>Respite provision is essentially provided for the benefit of the carer, granting them a much needed break from the unpaid caring role.</p> <p>To be considered eligible to access respite care and support the learning disabled person must live at home with the unpaid carer, usually a family member or relative.</p> <p>Prior to a respite referral being made, a needs assessment is undertaken and underpins the development of the Carer and Service User Support Plan. The personal information that is gathered as part of this process is held on the Councils Care First Database, which has been subject to formal Data Impact Assessment. The information held on Care First considers protected characteristics and upon review there is no requirement to undertake more intensive analysis. The system allows information relating to support needs to be recorded in addition to the collection of data relating to age, sex, and social class via postcode related data. No barriers have been identified, however there is some information that is not currently mandatory to provide, such as sexual orientation.</p> <p>Any respite service commissioned by the HSCP to deliver a service to the individual thereafter, will have sight of the relevant information needed to support the person successfully. This may include details of protected characteristics. Furthermore, it will be necessary for them to undertake their own assessment and support planning process, which might include the collection and storage of additional protected characteristic details. All commissioned service providers are bound by contractual</p>	<p>No negative impact has been identified, however there is some information that is not currently mandatory to provide as part of the assessment and support planning process, such as sexual orientation.</p>

			<p>obligations to ensure General Data Protection Legislation is adhered to.</p> <p>The protected characteristic data of those employed by a commissioned provider to deliver a respite service to HSCP customers, will be the sole responsibility of the Employing Organisation.</p>	
		Example	Service Evidence Provided	Possible negative impact and Additional Mitigating Action Required
2.	<p>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 checked="" 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 aim of the review is to 'improve access and choice associated with carer respite'. The protected characteristics of the carers and learning disabled adults already accessing or likely to access respite services in the future, will form a critical component of the councils 10 step review process and shape any potential redesign options, considering but not limited to:</p> <ul style="list-style-type: none"> • Accessibility (Location, Environment); • Care and support provision; <p>in accordance with Policy and Procedure and Human Rights obligations Equality Act 2010.</p> <p>A review panel has been established, with accountability to the Head of Adult Learning Disability Services via the Strategic Learning Disability Review Group. The Head of Adult Learning Disability Services will report to the HSCP Partnership Board (IJB) and the Chief Officer.</p> <p>A Consultation and Engagement Plan has been developed and is cognisant of the barriers that can prevent individuals with protected characteristics from becoming active participants in the review and redesign of services.</p> <p>The views of those employed by a commissioned provider (with a protected characteristic) to deliver a respite service to HSCP customers will be considered during consultation and</p>	<p>The service review could result in redesign proposals that will see a change to how respite is arranged and delivered.</p> <p>Equality impact will be a set agenda item throughout the service review and subsequent proposals, including the unknown characteristics, to mitigate or minimise any negative outcomes for those involved.</p> <p>The HSCP will work in partnership with service users, carers and service providers to achieve the best possible outcomes.</p> <p>An Engagement and Consultation plan has been developed to support the review, in accordance with the Health and Social Care - Planning with People: community engagement and participation guidance - updated 2024.</p>

			engagement but will ultimately remain the sole responsibility of the Employing Organisation.	
		Example	Service Evidence Provided	Possible negative impact and Additional Mitigating Action Required
3.	<p>How have you applied learning from research evidence about the experience of equality groups to the service or Policy?</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 checked="" 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>The primary protected characteristic affecting those impacted by the service review/redesign will be that of 'disability'.</p> <p>The HSCP has carried out initial work by looking at the main pressures (or "drivers") for change and improvement. Analysis of carer and service user numbers and circumstances has also been undertaken to ensure that any developing Policies identify and reflect local needs in the development of priorities.</p> <p>Scotland's Census 2011 reported that 26,349 people in Scotland have learning disabilities. Of these, 21,115 people are aged over 16 years, which equates to 0.5% of Scotland's population. It highlighted 458 people in East Dunbartonshire have learning disabilities. Of these, 357 people are aged over 16 years, which equates to 0.4% of the East Dunbartonshire population. From our own strategic analysis we understand this number to be significantly higher and believe that our prevalence of adult learning disability is the same as the Scottish average, at 0.5% of the population. Scotland's 2022 Census information relating to disability has not yet been published.</p> <p>A Local Strategic Needs Analysis (SNA) carried out in 2023 identified that 504 people with a learning disability aged over 17 years, were known to social work services and receiving support, ranging from low-level advice to extremely intensive round-the-clock care with specialist health input.</p> <p>The Strategic Needs Analysis forecasts that by 2028/29 demand for services will far exceed what is available locally. In addition to known customers, many more individuals will not currently be in regular contact with specialist health or social care services and will live largely independently or be supported by family.</p>	<p>Equality impact will be a set agenda item throughout the service review and subsequent proposals, including the unknown characteristics, to mitigate or minimise any negative outcomes for those involved.</p> <p>The Fair Access to Community Care (Adults) Policy and updated Eligibility Criteria will be applied consistently as part of the respite review, to ensure fair and equitable allocation of available resources.</p> <p>The HSCP will work in partnership with service users, carers and service providers to achieve the best possible outcomes.</p> <p>An Engagement and Consultation plan has been developed to support the review, in accordance with the Scottish Government Health and social care - Planning with People: community engagement and participation guidance - updated 2024</p>

		<p>Demographic Pressures - The increasing demands and pressures on services result from a combination of factors such as;</p> <ul style="list-style-type: none">• adults with a learning disability are increasingly living longer with previously life-limiting medical conditions (such as Down's Syndrome) and are benefiting from continuing support;• the substantial rise in the number of young people in 'transition' from school to adult services, many of whom are now being diagnosed with Autistic Spectrum Disorder as well as having a learning disability;• the breakdown of longstanding arrangements with parents or other family carers as a result of the advancing age and reducing capacity of these carers (many of whom are in the 70-90+ age group) and/or the increasingly complex and challenging behaviours exhibited by their son or daughter. <p>The findings of the SNA confirmed finite learning disability resource availability and growing numbers of individuals requiring accommodation and services. The wider review of learning Disability Accommodation based services aims to maximise use of resources by ensuring consistency and fairness in how services are allocated.</p> <p>EDHSCP published a new Learning Disability Strategy 2024-29 committed to improving the quality of life, choices and personal outcomes for people with learning disabilities. It concluded that with the significant increase in demand on resources coupled with a decreasing financial framework, any improvement or development must be delivered within the current or lesser financial envelope. The strategy stressed the importance of ensuring that the HSCP limited resources must be allocated fairly and equitably.</p> <p>The Feeley Report (March 2021) recommended that commissioners of services should focus on establishing a system where a range of people, including people with lived experience, unpaid carers, local communities, providers and other professionals are routinely involved in the co-design and redesign, as well as the monitoring of services and supports.</p>	
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			<p>The review will encompass a collaborative, rights based and participative approach.</p> <p>There has been a number of important policies over recent years, which have sought to empower and develop choice for carers. The Carers (Scotland) Act 2016 was implemented on 1st April 2018 and is designed to support carers' health and wellbeing and help make caring more sustainable. The Act seeks to consolidate carers existing rights and recognises carers as equal partners. The Act includes duties for Councils and Health Boards (and consequently for Health and Social Care Partnerships) to provide support to carers, based on carers' identified needs, which meet local eligibility criteria.</p> <p>The Carers (Scotland) Act 2016 defines a carer as <i>an individual who provides or intends to provide care for another individual (the 'cared-for person')</i>. Carers (sometimes called informal carers) are not employed to care, they do so voluntarily to support a family member or friend.</p> <p>At the time of preparing the Carers Strategy 2023-26, there were 1402 carers known to the HSCP's Social Work Services. The number of carers known to services remains at around 8% of the estimated number of people undertaking informal care in East Dunbartonshire.</p>	
		Example	Service Evidence Provided	Possible negative impact and Additional Mitigating Action Required
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	<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</i>	<p>The HSCP has a Communication and Engagement Strategy 2024-29 that provides clear and consistent approaches to communication and engagement, with our patients, service users, carers and stakeholders across East Dunbartonshire.</p> <p>Initial engagement and consultation on the strategic review of learning disability services was carried out in 2018, developing the foundations for the Learning Disability Strategy 2018-23.</p>	<p>The Engagement and Consultation Plan has been tailored to meet the communication needs of those involved and includes the use of accessible information.</p> <p>The HSCP will work in partnership with service users, carers and</p>

<p>how was this information used?</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 checked="" 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>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></p> <p><i>(Due regard to promoting equality of opportunity)</i></p> <p><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></p>	<p>This was further consulted on in 2023 and carried into the latest Learning Disability Strategy 2024-29. Two priorities were developed from the consultation: To consistently apply the Fair Access to Community Care (Adults) Policy and updated Eligibility Criteria (including assistance with transport) across the Learning Disability care group, to ensure fair and equitable allocation of available resources and to review and modernise existing accommodation based and respite services to respond to complex care needs and respond quickly and effectively to changing and emerging needs within local resources. Consultations in both cases included in person meetings, a survey and website and social media publications. Both Strategies were made available in easy read format and other languages on request.</p> <p>Similarly, consultation on the Carers Strategy 2023-26 was undertaken pre development and from this a number of priorities were identified, including: Developing innovative approaches to broaden the type and nature of available short breaks and continuing to work with Shared Care Scotland and other agencies to develop greater availability and choice of short breaks.</p> <p>An Engagement and Consultation plan has been developed to support the review of respite, in accordance with the Scottish Government Health and social care - Planning with People: community engagement and participation guidance - updated 2024.</p> <p>Stage 1 consultation on the respite review and redesign 'Informing - providing information' took place between January to February 2025. This enabled the HSCP to gather information on what was important for carers and service users who access respite services, setting the tone for the service review.</p> <p>HSCP Boards are collaborative at heart; they include membership from Local Authorities and Health Boards, plus representatives of service users, informal carers, professionals and clinicians, trade unions and third and independent sector</p>	<p>service providers to achieve the best possible outcomes.</p>
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			<p>service providers. When implementing a service review or redesign, the HSCP Board must ensure that all of these stakeholders and partners are fully engaged in the process and have regard to the Health and Social Care Delivery Principles. This ensures that a shared approach is taken to the planning of services to deliver the National Outcomes for Health and Wellbeing and to achieve the core aims of integration, which are:</p> <ul style="list-style-type: none"> • To improve the quality and consistency of services for patients, carers, service users and their families; • To provide seamless, integrated, quality health and social care services in order to care for people in their homes, or a homely setting, where it is safe to do so; and, • To ensure resources are used effectively and efficiently to deliver services that meet the needs of the increasing number of people with long term conditions and often complex needs, many of whom are older. 	
		Example	Service Evidence Provided	Possible negative impact and Additional Mitigating Action Required
5.	<p>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?</p> <p>Your evidence should show which of the 3 parts of the General Duty have been considered (tick relevant boxes).</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>The aim of the review is to 'improve access and choice associated with carer respite'. The protected characteristics of the carers and learning disabled adults already accessing or likely to access respite services in the future, will form a critical component of the councils 10 step review process and shape any potential redesign options, considering but not limited to:</p> <ul style="list-style-type: none"> • Accessibility (Location, Environment); • Care and support provision; <p>in accordance with Policy and Procedure and Human Rights obligations Equality Act 2010.</p> <p>All engagement activity related to the review will be arranged at accessible locations.</p> <p>EDHSCP ask their suppliers and those they commission services from to take certain steps in order to enable the public authority to meet their continuing legal obligation to comply with</p>	<p>Equality impact will be a set agenda item throughout the service review and subsequent proposals, including the unknown characteristics, to mitigate or minimise any negative outcomes for those involved.</p> <p>The HSCP will work in partnership with service users, carers and service providers to achieve the best possible outcomes.</p> <p>An Engagement and Consultation plan has been developed to support the review, in accordance with the Scottish Government Health and social care - Planning with People: community engagement and</p>

	<p>1) Remove discrimination, harassment and victimisation <input checked="" 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 Equality Duty. When connecting carers and service users with community-based supports, resources will already have been commissioned and screened in line with accessibility requirements and equality.</p> <p>Social Work and Allied Health Professionals support the assessment of carers needs and the cared for persons needs in regard access and equipment and appropriate resources are made available to ensure equality of access. Social Work Colleagues work closely with other support services e.g. occupational therapy, sensory impaired services and external day care providers to put in place information and supports to remove any potential barriers. Formal Strategies are also in place to promote positive behaviour and prevent incidences of challenging behaviour.</p> <p>Where transport is required to support the delivery of respite, a needs assessment is carried out to ensure appropriate resources are made available such as escort, adapted vehicles etc.</p>	participation guidance - updated 2024.
		Example	Service Evidence Provided	Possible negative impact and Additional Mitigating Action Required
6.	<p>How will the service change or policy development ensure it does not discriminate in the way it communicates with service users and staff?</p> <p>Your evidence should show which of the 3 parts of the General Duty have been considered (tick relevant boxes).</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>The HSCP has a Communication and Engagement Strategy 2024-29 that provides clear and consistent approaches to communication and engagement, with our patients, service users, carers and stakeholders across East Dunbartonshire.</p> <p>An Engagement and Consultation plan has been developed to support the review, in accordance with the Scottish Government Health and social care - Planning with People: community engagement and participation guidance - updated 2024.</p> <p>The Engagement and Consultation Plan has been tailored to meet the communication needs of those involved and includes the use of accessible information.</p>	<p>Equality impact will be a set agenda item throughout the service review and subsequent proposals, including the unknown characteristics, to mitigate or minimise any negative outcomes for those involved.</p> <p>The HSCP will work in partnership with service users, carers and service providers to achieve the best possible outcomes.</p>

	<p>1) Remove discrimination, harassment and victimisation <input checked="" 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. Specific attention should be paid in your evidence to show how the service review or policy has taken note of this.</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>EDHSCP ask their suppliers and those they commission services from to take certain steps in order to enable the public authority to meet their continuing legal obligation to comply with the Equality Duty. When connecting carers and service users with community-based supports, resources will already have been commissioned and screened in line with accessibility requirements and equality.</p> <p>Communication with those employed by a commissioned provider (with a protected characteristic) to deliver a respite service to HSCP customers will be considered during consultation and engagement but will ultimately remain the sole responsibility of the Employing Organisation.</p>	
7	Protected Characteristic	Service Evidence Provided		Possible negative impact and Additional Mitigating Action Required
(a)	<p>Age</p> <p>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</p>	<p>There are four potential redesign options already known to the HSCP through benchmarking with other local authorities:</p> <ol style="list-style-type: none"> 1. Continuation of buildings based respite only, but with a change to the funding model and the associated funding allocation for individuals; 		<p>Equality impact will be a set agenda item throughout the service review and subsequent proposals, to mitigate or minimise any negative outcomes for those involved.</p> <p>For age this will include to:</p>

	<p>segregation on the grounds of age promoted by the policy or included in the 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 checked="" 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>	<ol style="list-style-type: none"> Continuation of buildings based respite only, but with a refreshed allocation model that ensures a minimum of 95% occupancy at all times and minimises waiting times for new referrals; Development of a single community based short break model only, supported by a Respite Bureau but with option to purchase building based provision out of authority; Development of a community based short break model, supported by a Respite Bureau but with retention of some or all of the current building based provision. <p>All options could hold the possibility of a reduced respite allocation for service users/carers and/or the introduction of personal respite budgets.</p> <p>The introduction of personal respite budgets could disproportionately impact older carers with a cognitive decline.</p> <p>Young carer respite provision is not in scope for the review.</p>	<ul style="list-style-type: none"> mitigate the impact of personal respite budgets on older carers.
(b)	<p>Disability</p> <p>Could the service design or policy content have a disproportionate impact on people due to the protected characteristic of disability?</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 checked="" type="checkbox"/></p> <p>2) Promote equality of opportunity <input checked="" type="checkbox"/></p>	<p>There are four potential redesign options already known to the HSCP through benchmarking with other local authorities:</p> <ol style="list-style-type: none"> Continuation of buildings based respite only, but with a change to the funding model and the associated funding allocation for individuals; Continuation of buildings based respite only, but with a refreshed allocation model that ensures a minimum of 95% occupancy at all times and minimises waiting times for new referrals; Development of a single community based short break model only, supported by a Respite Bureau but with option to purchase building based provision out of authority; Development of a community based short break model, supported by a Respite Bureau but with retention of some or all of the current building based provision. 	<p>Equality impact will be a set agenda item throughout the service review and subsequent proposals, to mitigate or minimise any negative outcomes for those involved.</p> <p>For disability this will include to:</p> <ul style="list-style-type: none"> mitigate the implementation of personal respite budgets for learning disabled adults. mitigate the impact of any reduction in building based respite availability for service users with complex care needs and their carers, whose needs could not be

	<p>3) Foster good relations between protected characteristics. <input type="checkbox"/></p> <p>4) Not applicable <input type="checkbox"/></p>	<p>All options could hold the possibility of a reduced respite allocation for service users/carers and/or the introduction of personal respite budgets.</p> <p>A reduction in building based respite availability could have a negative impact on service users with complex care needs and their carers, whose needs could not be met within community settings.</p> <p>The introduction of personal respite budgets could disproportionately impact service users with an intellectual disability.</p>	met within community settings.
	Protected Characteristic	Service Evidence Provided	Possible negative impact and Additional Mitigating Action Required
(c)	<p>Gender Reassignment</p> <p>Could the service change or policy have a disproportionate impact on people with the protected characteristic of Gender Reassignment?</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 checked="" 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>	There is no anticipated impact on service users or carers due to gender reassignment.	N/A

	Protected Characteristic	Service Evidence Provided	Possible negative impact and Additional Mitigating Action Required
(d)	<p>Marriage and Civil Partnership</p> <p>Could the service change or policy have a disproportionate impact on the people with the protected characteristics of Marriage and Civil Partnership?</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 checked="" 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>	There is no anticipated impact on service users or carers due to marriage and civil partnership.	N/A
(e)	<p>Pregnancy and Maternity</p> <p>Could the service change or policy have a disproportionate impact on the people with the protected characteristics of Pregnancy and Maternity?</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 checked="" type="checkbox"/></p> <p><input checked="" type="checkbox"/></p>	There is no anticipated impact on service users or carers due to pregnancy and maternity.	N/A

	2) Promote equality of opportunity 3) Foster good relations between protected characteristics. <input type="checkbox"/> 4) Not applicable <input type="checkbox"/>		
	Protected Characteristic	Service Evidence Provided	Possible negative impact and Additional Mitigating Action Required
(f)	Race Could the service change or policy have a disproportionate impact on people with the protected characteristics of Race? Your evidence should show which of the 3 parts of the General Duty have been considered (tick relevant boxes). 1) Remove discrimination, harassment and victimisation <input checked="" type="checkbox"/> 2) Promote equality of opportunity <input checked="" type="checkbox"/> 3) Foster good relations between protected characteristics. <input type="checkbox"/> 4) Not applicable <input type="checkbox"/>	There is no anticipated impact on service users or carers due to race.	N/A
(g)	Religion and Belief Could the service change or policy have a disproportionate impact on the people with the protected characteristic of Religion and Belief? Your evidence should show which of the 3 parts of the General Duty have been considered (tick relevant boxes).	There is no anticipated impact on service users or carers due to religion and belief.	N/A

	1) Remove discrimination, harassment and victimisation <input checked="" type="checkbox"/> <input checked="" type="checkbox"/> 2) Promote equality of opportunity 3) Foster good relations between protected characteristics. <input type="checkbox"/> <input type="checkbox"/> 4) Not applicable		
	Protected Characteristic	Service Evidence Provided	Possible negative impact and Additional Mitigating Action Required
(h)	Sex Could the service change or policy have a disproportionate impact on the people with the protected characteristic of Sex? Your evidence should show which of the 3 parts of the General Duty have been considered (tick relevant boxes). 1) Remove discrimination, harassment and victimisation <input checked="" type="checkbox"/> <input checked="" type="checkbox"/> 2) Promote equality of opportunity 3) Foster good relations between protected characteristics. <input type="checkbox"/> <input type="checkbox"/> 4) Not applicable	There is no anticipated impact on service users or carers due to Sex.	N/A
(i)	Sexual Orientation	There is no anticipated impact on service users or carers due to sexual orientation.	N/A

	<p>Could the service change or policy have a disproportionate impact on the people with the protected characteristic of Sexual Orientation?</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 checked="" 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>		
	Protected Characteristic	Service Evidence Provided	Possible negative impact and Additional Mitigating Action Required
(j)	<p>Socio – Economic Status & Social Class</p> <p>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?</p> <p>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 exacerbating inequality on the ground of socio-economic status. Additional information available</p>	<p>There is no anticipated impact on service users or carers due to Socio – Economic Status & Social Class.</p>	<p>N/A</p>

here: [Fairer Scotland Duty: guidance for public bodies - gov.scot \(www.gov.scot\)](https://www.gov.scot/publications/fairer-scotland-duty/guidance-for-public-bodies/pages/1-introduction.aspx)

Seven useful questions to consider when seeking to demonstrate ‘due regard’ in relation to the Duty:

1. What evidence has been considered in preparing for the decision, and are there any gaps in the evidence?
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)?
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?
4. Are some communities of interest or communities of place more affected by disadvantage in this case than others?
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?
6. How has the evidence been weighed up in reaching our final decision?
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)²¹ 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 Engagement²² should be followed. Those engaged with should also be advised

	subsequently on how their contributions were factored into the final decision.		
(k)	<p>Other marginalised groups</p> <p>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 & refugees and travellers?</p>	There is no anticipated impact on other marginalised groups.	N/A
8.	<p>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?</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 checked="" 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>	The main principle of the respite review and redesign is to create capacity, efficiency, sustainability and deliver respite services in budget. It does not include cost savings.	N/A

	Service Evidence Provided	Possible negative impact and Additional Mitigating Action Required
9. 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.	<p>East Dunbartonshire HSCP is committed to regularly training and empowering staff on equalities issues in order to prevent discrimination, promote equality of opportunity and foster good relations between protected characteristic groups.</p> <p>East Dunbartonshire HSCP have compulsory policies in place (NHS GGC and East Dun Council) to ensure staff members are aware of the sensitivities around equalities and human rights, protected characteristics and the public sector equality duty.</p>	N/A

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.

The EQIA highlights that the review of Respite Services and subsequent redesign proposals could negatively impact service users and carers on the grounds of Age and Disability. Risks can be safely mitigated with:

- Adherence to Legislation and Local and National Policy;
- Partnership working and a robust engagement and consultation process.

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* .

PANEL principles underpin the general approach to all plans developed by the HSCP, particularly in respect of maximising participation, preventing discrimination and promoting equality and empowerment of communities.

- **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.

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)

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.

N/A

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)
<p>Equality impact will be a set agenda item throughout the service review and subsequent proposals, including the unknown characteristics, to mitigate or minimise any negative outcomes for those involved.</p> <p>The HSCP will work in partnership with service users, carers and providers to achieve the best possible outcomes.</p> <p>The Fair Access to Community Care (Adults) Policy and updated Eligibility Criteria will be applied consistently as part of the respite review, to ensure fair and equitable allocation of available resources.</p> <p>An Engagement and Consultation plan has been developed to support the review, in accordance with the Scottish Government Health and social care - Planning with People: community engagement and participation guidance - updated 2024</p> <p>Mitigate the impact of personal respite budgets on older carers.</p> <p>Mitigate the implementation of personal respite budgets for learning disabled adults.</p> <p>Mitigate the impact of any reduction in building based respite availability for service users with complex care needs and their carers, whose needs could not be met within community settings.</p>	31 March 26 (Anticipated end date)	Review Group Membership

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

01 January 2026

Lead Reviewer:
EQIA Sign Off:

Name Gayle Paterson
Job Title Learning Disability Strategic Review Project Lead
Signature *Gayle Paterson*
Date 25/06/2025

Quality Assurance Sign Off:

Name Alastair Low
Job Title Manager, Equality and Human Rights Team
Signature A Low
Date 10/07/25

**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:

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

		Completed	
		Date	Initials
Action:			
Status:			
Action:			
Status:			
Action:			
Status:			
Action:			
Status:			

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
Action:			
Reason:			
Action:			
Reason:			

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:

Date submitted:

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