



Areas for Consideration of Impact

Protected Characteristics

Age: older people; middle years; early years; children and young people.
Disability: physical impairments; learning disability; sensory impairment; mental health conditions; long-term medical conditions.
Gender Reassignment: people undergoing gender reassignment
Marriage & Civil Partnership: people who are married, unmarried or in a civil partnership.
Pregnancy and Maternity: women before and after childbirth; breastfeeding.
Race and ethnicity: minority ethnic people; non-English speakers; gypsies/travellers; migrant workers.
Religion and belief: people with different religions or beliefs, or none.
Sex: men; women; experience of gender-based violence.
Sexual orientation: lesbian; gay; bisexual; heterosexual.

Fairer Scotland Duty

Low income – those who cannot afford regular bills, food, clothing payments
Low Wealth – those who can meet basic living costs but have no savings for unexpected spend or provision for the future.
Material Deprivation – those who cannot access basic goods and services, unable to repair/replace broken electrical goods, heat their homes or access to leisure or hobbies
Area of Deprivation/Communities of Place - consider where people live and where they work (accessibility and cost of transport)
Socio-Economic Background - social class, parents' education, employment, income.

Health Inequality (those not already covered in the Fairer Scotland Duty)

Low literacy / Health Literacy includes poor understanding of health and health services (health literacy) as well as poor written language skills.
Discrimination/stigma – negative attitudes or treatment based on stereotyping. Discrimination can be direct or indirect and includes harassment and victimisation.
Health and Social Care Service Provision - availability, and quality/affordability and the ability to navigate accessing these.
Physical environment and local opportunities - availability and accessibility of housing, transport, healthy food, leisure activities, green spaces, air quality and housing/living conditions, exposure to pollutants, safety of neighbourhoods, exposure to crime, transmission of infection, tobacco, alcohol and substance use.

<p>Education and learning - availability and accessibility to quality education, affordability of further education, Early Years development, readiness for school, literacy and numeracy levels, qualifications.</p>
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Other

Looked after (incl. accommodated) children and young people
Carers: paid/unpaid, family members.
Homelessness: people on the street; staying temporarily with friends/family; in hostels, B&Bs.
Involvement in the criminal justice system: offenders in prison/on probation, ex-offenders.
Addictions and substance misuse
Refugees and asylum seekers
Staff: full/part time; voluntary; delivering/accessing services.

Human Rights (note only the relevant ones are included below)

<p>Article 2 – The right to no discrimination – not to be treated in a different way compared with someone else in a similar situation. Indirect discrimination happens when someone is treated in the same way as others that does not take into account that person's different situation. An action or decision will only be considered discriminatory if the distinction in treatment cannot be reasonably and objectively justified.</p>
<p>Article 3 - The right to life (absolute right) – everyone has the right to life, liberty and security of person which includes access to basic necessities and protection from risks to their life from self or others.</p>
<p>Article 5 - The right not to be tortured or treated in an inhuman or degrading way (absolute right) which includes anything that causes fear, humiliation intense physical or mental suffering or anguish.</p>
<p>Article 9 - The right to liberty (limited right) – and not to be deprived of that liberty in an arbitrary fashion.</p>
<p>Article 10 - The right to a fair trial (limited right) – including the right to be heard and offered effective participation in any proceedings.</p>
<p>Article 12 - The right to respect for private and family life, home and correspondence (qualified right) – including the right to personal choice, accessible information and communication, and participation in decision-making (taking into account the legal capacity for decision-making).</p>
<p>Article 18 - The right to freedom of thought, belief and religion (qualified right) including conduct central to beliefs (such as worship, appropriate diet, dress etc.)</p>
<p>Article 19 - The right to freedom of expression (qualified right) – to hold and express opinions, received/impart information and ideas without interference</p>

UNCRC

Article 2 non-discrimination	Article 15 freedom of association	Article 30 children from minority or indigenous groups
Article 3 best interests of the child	Article 16 right to privacy	Article 31 leisure, play and culture
Article 4 implementation of the convention	Article 17 access to information from the media	Article 32 child labour
Article 5 parental guidance and a child's evolving capacities	Article 18 parental responsibilities and state assistance	Article 33 drug abuse
Article 6 life, survival and development	Article 19 protection from violence, abuse and neglect	Article 34 sexual exploitation
Article 7 Birth, registration, name, nationality, care	Article 20 children unable to live with their family	Article 35 abduction, sale and trafficking
Article 8 protection and preservation of identity	Article 22 refugee children	Article 36 other forms of exploitation
Article 9 separation from parents	Article 23 children with a disability	Article 37 inhumane treatment and detention
Article 10 family reunification	Article 24 health and health services	Article 38 war and armed conflicts
Article 11 abduction and non-return of children	Article 25 review of treatment in care	Article 39 recovery from trauma and reintegration
Article 12 respect for the views of the child	Article 26 Benefit from social security	Article 40 juvenile justice
Article 13 freedom of expression	Article 27 adequate standard of living	Article 42 knowledge of rights
Article 14 freedom of thought, belief and religion	Article 28 right to education	

ACHSCP Impact Assessment – Proportionality and Relevance

Name of Policy or Practice being developed	Expand the use of Technology Enabled Care
Name of Officer completing Proportionality and Relevance Questionnaire	Peter McAndrew
Date of Completion	20/02/2024
What is the aim to be achieved by the policy or practice and is it legitimate?	To increase the use of technology within the delivery of Aberdeen City Health and Social Care's health and social care services.
What are the means to be used to achieve the aim and are they appropriate and necessary?	<p>There are a range of projects that have been developed to deliver on the aim. These are set out within the Delivery Plan included within the ACHSCP TEC Plan 2023-2025</p> <p>Projects that are currently in progress are:</p> <p>1) Digital Support Hub – Test of Change The Digital Support Hub is a service delivered by Specialist Resource Solutions, Care Provider. This has developed a test of change which integrates the use of technology with in-person care. This service employs a combination of the use of telephone calls to support wellbeing and provide prompts and reminders about personal care and medication. In combination with this, in-person care visits provide assurance with regard to efficacy of prompts and medication use. This service has also provided wearable wristband devices which enable service users to raise an alert for help in an emergency and have other functionality such as 2-way communication with carers, fall detection.</p> <p>The Digital Support Hub is also running a Hospital Discharge project, evaluating the use of the digital Support Hub in facilitating the discharge of patients back home rather than to a care setting using the model described above.</p> <p>The approach of the Digital Support Hub provides a model of care which integrates care at home with TEC in a new hybrid model.</p> <p>2) Upgrade to TEC in Balnagask Court Balnagask Court is a supported living service for people with complex needs. It has been using technology to support the safety and wellbeing of supported people and staff since the site was opened in 2005. Whilst still operational, the current technology is now almost 20 years old and has become obsolete. This project has scoped out options for upgrading this technology, however this project is currently on hold pending decision on availability of funding.</p> <p>3) Assisted Care Robots This project is a 3 month Proof of Concept (POC) of the use of two Mitra Mini care assist robot in care settings in Aberdeen City. One site will be in a Day Care Centre, a second site is still to be agreed. The Mitra Mini provides</p>

	<p>stimulation and interaction with service users through initiating conversation and providing personalised interaction and media content to participants in the POC. The Mitra Mini also provides other functionality which will be tested such as reminders and fall detection. This POC will evaluate the impact of the robots on participants and staff in the care setting.</p> <p>4) Proactive Telecare Following discussion with TEC Scotland about potential funding for a third phase of Proactive Telecare pilots initial discussion were conducted within Aberdeen City Health and Social Care Partnership regarding how these may be delivered. This would involve proactively calling Telecare customers with wellbeing, support calls as a preventative / early intervention approach. Further progression of this proposal is dependent on funding being made available from TEC Scotland. No timeframe for a decision has been provided by TEC Scotland.</p> <p>5) Development of TEC Culture Within the Adult Social Work team there has been a focus on increasing the knowledge and understanding of TEC across the team. This has included recruiting to a TEC Care Coordinator role, having an identified TEC Senior Social Worker, induction training on TEC and online study for Care Managers.</p>
<p>If the policy or practice has a neutral or positive impact please describe it here.</p>	<p>The use of technology enabled care provides a range of benefits both for individuals and for ACHSCP.</p> <p>Increased safety and wellbeing - Telecare (Community Alarm) has been used for decades as a method of increasing the safety for vulnerable members of the community living at home or in other settings such as sheltered housing. This has enabled service users to call for assistance in an emergency or for automatic alerts to be raised to summon help when required through use of linked sensors. This has enabled people to remain living in their own home for longer than would be safe to do so otherwise. The Digital Support Hub is now combining this functionality with proactive calling and in-person care in a hybrid approach care model.</p> <p>Increased independence – In addition to the use of technology to raise alerts for assistance in emergencies, technology is used to support increased independence and enablement. For example, the use of reminders and prompts on devices and prompt calls to support people’s ability to meet their own personal care and medication needs promotes greater independence. Greater independence can also be supported through the use of voice controlled devices, such as smart bulbs, and auto-answer video calling devices. These can also provide support to unpaid carers in their role.</p> <p>Reduced service pressure and costs – Health and social care have both faced significant service pressures as a consequence of recruitment and retention challenges</p>

	<p>whist experience increasing demand on services. The use of TEC provides opportunities to address these challenges through supporting the early intervention / prevention agenda, reducing the demand on services through supporting alternative models of care provision and increasing the opportunities for people with health and social care needs to remain at home for longer. It also provides for a wider range of options in relation to employment within the care sector, such as flexible working use of digital skills.</p>
<p>Is an Integrated Impact Assessment required for this policy or decision (Yes/No)</p>	<p>No. There are a wide range of projects that currently fall within the ‘expand the use of TEC’ programme. Due to the wide differences in type of projects and stage of delivery a preferable approach is to undertake Integrated Impact Assessments for those specific projects where they are required, rather than for the overall programme. Further detail included in Rationale for Decision below.</p>
<p>Rationale for Decision NB: consider: -</p> <ul style="list-style-type: none"> • How many people is the proposal likely to affect? • Have any obvious negative impacts been identified? • How significant are these impacts? • Do they relate to an area where there are known inequalities? • Why are a person’s rights being restricted? • What is the problem being addressed and will the restriction lead to a reduction in the problem? • Does the restriction involve a blanket policy, or does it allow for different cases to be treated differently? • Are there existing safeguards that mitigate the restriction? 	<p>1) Digital Support Hub</p> <p>Yes, an Integrated Impact Assessment is required for this project. The Digital Support Hub is providing a different model of care to what is currently provided in the city. This service is being delivered to some of our most vulnerable citizens therefore the impact of this change needs to be assessed within an Integrated Impact Assessment. The test of change is due to be completed end of February 2024 with evaluation to follow. Requirement for an IIA to be included in discussion about commissioning of service.</p> <p>2) Upgrade to TEC at Balnagask Court</p> <p>No, an Integrated Impact Assessment is not required for this project. This project is currently on hold as funding has not yet been made available for it to proceed and therefore an Integrated Impact Assessment is not currently required. In addition, although this change affects a vulnerable group, there has been use of a range of technology in this setting over a long period of time. Current options for upgrade provide for replacement of current systems with similar functionality. As no decision has been made regarding the replacement system the specific differences are not certain. However the options do not provide for significant different impact on supported people. The potential different functionality is:</p> <ul style="list-style-type: none"> • Wider range of sensors • Enhanced communication between staff team using hand held devices • Routing of alarms to handheld devices rather than pagers

	<p>3) Assisted Care Robots</p> <p>No. The aim of the Proof of Concept is to demonstrate and assess the use of care assist robots in controlled conditions within care settings. This will inform understanding about potential benefits, dis-benefits and the impact and response of service users and staff to the devices in a real world setting. As such, this project is not implementing a change which will be incorporated into business as usual but will provide an evaluation regarding the value of these, or similar, devices in these settings.</p> <p>4) Proactive Telecare</p> <p>No. This project is currently on hold pending funding decision from TEC Scotland. Further work on the model of delivery of a proactive Telecare service will not be progressed prior to the outcome of the decision regarding this potential funding. The requirement for an IIA will be reviewed if this project is restarted.</p> <p>5) Development of a TEC culture</p> <p>No. This work supports the knowledge and understanding of the workforce in relation to the use of technology in care.</p>
Decision of Reviewer	
Name of Reviewer	
Date	

Scottish Specific Public Sector Duties (SSPSED)

Procured, Tendered or Commissioned Services

Is any part of this policy/service to be carried out wholly or partly by contactors and if so, how will equality, human rights including children's rights and the Fairer Scotland duties be addressed?