

Integrated Impact Assessment (IIA)

Part 1 Scoping

1 Details of the Proposal

<p>Title of Proposal: Reprovision of the night support service and increasing the utilisation of Assistive Technology/Technology Enabled Care (TEC)</p>	
<p>What is it?</p>	<p>A new Policy/Strategy/Practice <input type="checkbox"/></p> <p><u>A revised Policy/Strategy/Practice</u> <input type="checkbox"/></p>
<p>Description of the proposal: (Set out a clear understanding of the purpose of the proposal being developed or reviewed (what are the aims, objectives and intended outcomes, including the context within which it will operate)</p>	<p>The pressure on care services nationally, is already taking its toll and it is likely to increase. Continuing with current models of delivery is not going to be sustainable. New approaches and service delivery models need to be found that will deliver more efficient and effective care, whilst maintaining safe and good quality services.</p> <p>Five Adult Social Care staff teams across each locality area, currently provide night support to only approx. 34 home care service users, at a cost to the Council of £594,295 pa, making this a very expensive service, costing approx. £8,489 per service user. Many Council areas such as Mid Lothian and East Lothian have replaced face to face night support with the use of Assistive Technology/Technology Enabled Care (TEC) solutions.</p> <p>Assistive Technology/TEC has the ability to provide essential support using a person centred approach; it gives increased choice and sense of control to service users; improves service user safety by providing</p>

constant monitoring rather than a time-limited face to face visit and allows for an immediate response in the event there is a serious concern with a service user in need of urgent assistance.

During September 2022 a Pathfinder took place in the Peebles area to establish if service users that currently receive Night Support visits could be provided with an earlier visit in the evening and earlier morning visit or use a technology instead of a physical visit through the night.

The evaluation of the pathfinder highlighted that in many cases a physical visit is not actually required, or the care could be provided by a twilight shift. There was no increase of risk or accidents due to the removal of a physical visit. During the Pathfinder there were 13 alarm activations for the 1 service user. 12 activations were due to the time settings on the sensor needing to be adjusted. Since this adjustment has been made there has only been one alarm activation. A visit was carried out and the service user was settled in bed. The staff team were available to deal with any Tec activations.

Service users reported that they benefit from no staff disturbance through the night and families were supportive of the change with no complaints or concerns raised during the pathfinder.

Due to the positive outcome of the pathfinder, a full consultation on the provision of alternatives to physical Night Support visits across the Borders was undertaken In Jan/Feb 2023.

The results of the consultation raised concerns around Contenance/skin integrity, service user and family anxiety, increased isolation, Palliative and end of life care needs, the proposal not being person centred and concerns around Human Rights.

These results were shared with CMT on 8th March. CMT gave the direction to feedback to APWG and then undertake another pathfinder in another area of the Borders. After discussion, it was decided that Duns would be an ideal area as it has more service users with complex needs.

During this pathfinder period, the Night Support service will continue to support current Night Support Service Users, but will not be taking on any new referrals unless all TEC alternatives have been fully exhausted and the following criteria is met -

- Palliative Care / End of life Care (where a DS1500 is in place) or life altering conditions where critical support is required. This may include, but is not limited to repositioning due to skin integrity, pain relief and the prevention of contractures.

	<p>Summary of the Proposed Option</p> <p>To undertake a second Pathfinder in the Duns area.</p>
<p>Service Area: Department:</p>	<p>Adult Social Care & Social Work</p>
<p>Lead Officer: (Name and job title)</p>	<p>Julie Glen – Operations Director</p>
<p>Other Officers/Partners involved: (List names, job titles and organisations)</p>	<p>Julie Glen (Operations Director Adult Social Care) Daniel Smyth (Service Manager Adult Social Care) Susan Davidson (Operations Manager Adult Social Care) Gwyneth Lennox (Interim Chief Officer, Adult Social Work) Clare Richards (Programme Manager) Louise Brown (Home Care Manager Adult Social Care) Suzanne Hislop (Project Support Officer) Roberta Chester (Assistant Home Care Manager) Ann Darling (Assistant Home Care Manager) Claire Cameron (SW Team Leader) Stacy Patterson (CCRT Team Leader) Lauren Graham (CCRT)</p>
<p>Date(s) IIA completed:</p>	<p>22.03.23</p>

2 Will there be any cumulative impacts as a result of the relationship between this proposal and other policies?

Yes / No <i>(please delete as applicable)</i>
If yes, - please state here:

3 Legislative Requirements

3.1 Relevance to the Equality Duty: No	
<p>Do you believe your proposal has any relevance under the Equality Act 2010? <i>(If you believe that your proposal may have some relevance – however small please indicate yes. If there is no effect, please enter “No” and go to Section 3.2.)</i></p>	
Equality Duty	Reasoning:
<p>Elimination of discrimination (both direct & indirect), victimisation and harassment. <i>(Will the proposal discriminate? Or help eliminate discrimination?)</i></p>	<p>If the proposal goes ahead staff will be able to choose from several suitable redeployment options (rapid response, care home night shifts or day time shifts).</p> <p>Services will not be removed from service users, support will just be provided in different ways. The new provision will be more dignified and respectful and promotes sleep and therefore wellbeing.</p>
<p>Promotion of equality of opportunity? <i>(Will your proposal help or hinder the Council with this)</i></p>	<p>If the proposal goes ahead staff will be able to choose from several suitable redeployment options (rapid response, care home night shifts or day time shifts) and will be supported by Senior Management, HR and Trade Union colleagues.</p>

	Services will not be removed from service users, support will just be provided in different ways. The new provision will be more dignified and respectful and promotes sleep and therefore wellbeing.
Foster good relations? <i>(Will your proposal help or hinder the council's relationships with those who have equality characteristics?)</i>	Good communication, consultation and engagement will support good relations.

3.2 Which groups of people do you think will be or potentially could be, impacted by the implementation of this proposal? (You should consider employees, service users, customers / service users, and any other relevant groups)										
Please tick below as appropriate, outlining any potential impacts on the undernoted equality groups this proposal may have and how you know this.										
	Impact			Please explain the potential impacts and how you know this						
	No Impact	Positive Impact	Negative Impact							
Age Older or younger people or a specific age grouping		Y		Care will be promoted in a way that will promote dignity, privacy, sleep and wellbeing. Service user age ranges from 54yrs – 97yrs.						
				Age range	50-59	60-69	70-79	80-89	90-99	100+
				No of service users	1	1	1	1	6	
Disability e.g. Effects on people with mental, physical, sensory impairment, learning disability, visible/invisible, progressive or recurring		Y		Care will be promoted in a way that will promote dignity, privacy, sleep and wellbeing.						
				Disability breakdown	Mental Health/LD	Physical Disability	Frail elderly			
				No of service users	1 LD 2 Dementia	PD x1, Stroke x 2, Parkinson's x1)	3			

<p>Gender Reassignment /gender Identity anybody whose gender identity or gender expression is different to the sex assigned to them at birth</p>	N/A			
<p>Marriage or Civil Partnership people who are married or in a civil partnership</p>	N/A			
<p>Pregnancy and Maternity (refers to the period after the birth, and is linked to maternity leave in the employment context. In the non-work context, protection against maternity discrimination is for 26 weeks after giving birth),</p>	N/A			
<p>Race Groups: including colour, nationality, ethnic origins, including minorities (e.g. gypsy travellers, refugees, migrants and asylum seekers)</p>	Y			All white/Scottish
<p>Religion or Belief: different beliefs, customs (including</p>	N/A			

atheists and those with no aligned belief)				
Sex women and men (girls and boys)	Y			3 male service users 7 female service users
Sexual Orientation , e.g. Lesbian, Gay, Bisexual, Heterosexual	N/A			
<p>3.3 Fairer Scotland Duty</p> <p>This duty places a legal responsibility on Scottish Borders Council (SBC) to actively consider (give due regard) to how we can reduce inequalities of outcome caused by socioeconomic disadvantage when making <u>strategic</u> decisions.</p> <p>The duty is set at a strategic level - these are the key, high level decisions that SBC will take. This would normally include strategy documents, decisions about setting priorities, allocating resources and commissioning services.</p> <p>Strategic decision to make financial savings based on the 22/23 budget.</p>				
<p>Is the proposal strategic?</p> <p><u>Yes</u> / No (<i>please delete as applicable</i>)</p> <p>If No go to Section 4</p>				
<p>If yes, please indicate any potential impact on the undernoted groups this proposal may have and how you know this:</p>				
	Impact			State here how you know this
	No Impact	Positive Impact	Negative Impact	
Low and/or No Wealth – enough money to meet basic living costs and pay bills but have no savings to deal with		Y	Y	Monitoring cost for current Night Support Service users will be covered by the Council. New service users will be charged the alarm monitoring fee. But the alarm would be beneficial for support during the day.

any unexpected spends and no provision for the future.				
Material Deprivation – being unable to access basic goods and services i.e. financial products like life insurance, repair/replace broken electrical goods, warm home, leisure and hobbies	Y			
Area Deprivation – where you live (e.g. rural areas), where you work (e.g. accessibility of transport)	Y			
Socio-economic Background – social class i.e. parents' education, employment and income	Y			
Looked after and accommodated children and young people	N/A			
Carers paid and unpaid including family members	Y			
Homelessness	N/A			
Addictions and substance use	N/A			

Those involved within the criminal justice system	N/A			
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4 Full Integrated Impact Assessment Required

Select No if you have answered “No” to all of Sections 3.1 – 3.3.

Yes / No (please delete as applicable)

If a full impact assessment is not required briefly explain why there are no effects and provide justification for the decision.

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Signed by Lead Officer:	Julie Glen
Designation:	Operations Director
Date:	22.03.23
Counter Signature Service Director	Jen Holland
Date:	22.03.23

Part 2 Full Integrated Impact Assessment

5 Data and Information

What evidence has been used to inform this proposal?

(Information can include, for example, surveys, databases, focus groups, in-depth interviews, pilot projects, reviews of complaints made, user feedback, academic publications and consultants' reports).

A pathfinder project has been completed in the Peebles area. Feedback gained from service users and their families was positive and no increase in risk was found. A full consultation was undertaken in Jan/Feb 2023 regarding the reprovision of the Night Service across the Borders. The results of this consultation were provided to CMT who agreed a further Pathfinder in a more complex area was required.



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NS_Results13Feb202:



End of Project Report

- Decommissioning of i

Describe any gaps in the available evidence,-then record this within the improvement plan together with all of the actions you are taking in relation to this (e.g. new research, further analysis, and when this is planned)

The initial pathfinder only covered the Peebles area. The full consultation was shared with all current service users across the Borders.

6 Consultation and Involvement

Which groups are involved in this process and describe their involvement

All current night support service users were alerted to the consultation and sent a paper copy and encouraged to participate. Staff and members of the public will also be able to complete the consultation and have their views heard.

For the Duns Pathfinder each client will be reviewed individually and options discussed with them. During this reassessment views on potential impact will be gained. If after review, technology is implemented, its usage will be monitored and a physical visit would be reintroduced should risk increase.

Describe any planned involvement saying when this will take place and who is responsible for managing the process

All service users in the Duns area will be engaged with and consulted individually during the review process.

Duns night support staff have been consulted along with all NS staff, but will have further conversations with the Service Manager and HR prior to the Duns Pathfinder beginning.

Describe the results of any involvement and how you have taken this into account –

**What have you learned from the evidence you have and the involvement undertaken? Does the initial assessment remain valid?
What new (if any) impacts have become evident?**

(Describe the conclusion(s) you have reached from the evidence, and state where the information can be found.)

7 Mitigating Actions and Recommendations

Consider whether:

Could you modify the proposal to eliminate discrimination or reduce any identified negative impacts?
(If necessary, consider other ways in which you could meet the aims and objectives of the proposal.)

Could you modify the proposal to increase equality and, if relevant, reduce poverty and socioeconomic disadvantage?

Describe any modifications which you can make without further delay (e.g. easy, few resource implications)

8 Recommendation and Reasoning *(select which applies)*

Reason for recommendation:

Signed by Lead Officer:	Julie Glen
Designation:	Operations Director
Date:	
Counter Signature (Service Director):	Jen Holland
Date:	

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This assessment should be presented to those making a decision about the progression of your proposal.

If it is agreed that your proposal will progress, you must send an electronic copy to corporate communications to publish on the webpage within 3 weeks of the decision.

Complete the below two sections. For your records, please keep a copy of this Integrated Impact Assessment form.

Action Plan (complete if required)

Actioner Name:	Action Date:
What is the issue?	
What action will be taken?	
Progress against the action:	
Action completed:	Date completed:

Monitoring and Review

State how the implementation and impact of the proposal will be monitored, including implementation of any amendments? For example what type of monitoring will there be? How frequent?

What are the practical arrangements for monitoring? For example who will put this in place? When will it start?

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When is the proposal due for review?

Who is responsible for ensuring that this happens?