

# Equality & Poverty Impact Assessment 00399 (Version 1)

## SECTION ONE: ESSENTIAL INFORMATION

<b>Service &amp; Division:</b>	Social Work Adult Services	<b>Lead Officer Name:</b>	Jennifer Faichney
	None	<b>Team:</b>	Planning, Performance and Policy
		<b>Tel:</b>	07483920653
		<b>Email:</b>	jennifer.faichney@falkirk.gov.uk
<b>Proposal:</b>	<p><b>Care Opinion</b></p> <p>Care Opinion is an online integrated platform where people can safely share their experiences of any health service or Care Inspectorate-registered provider of adult social care services. Care Opinion has national scale and visibility and has successfully worked with all health boards in Scotland as well as ten Health and Social Care Partnerships.</p> <p>The platform provides a safe, easy-to-access, consistent feedback mechanism and enables staff across services we deliver and commission to publicly demonstrate how we listen to and learn from online feedback. Care Opinion supports the commitments outlined in our Participation and Engagement Strategy by ensuring the Partnership and commissioned providers have an innovative and independent mechanism to engage with a wide range of people locally.</p> <p>Service users and their carers or families can share stories of their experiences of care using Care Opinion. Their stories are then moderated by Care Opinion to ensure they are safe and support constructive online conversations. Staff can easily respond online, and the story author will be alerted to the response. Staff can also show when changes or improvements occurred because of a story.</p>	<b>Reference No:</b>	

Care Opinion moderate stories before they are published online to allow for safe and constructive conversations. All parties involved in the story are protected as Care Opinion removes any names and details which might identify an individual. Care Opinion removes any profanities and discriminatory language from stories. They reject stories that relate to events which ended over three years ago. Care Opinion also removes any assumptions made about a service or staff member and any allegations or speculations about the character or motivations of staff or services.

Care Opinion's suite of reports and visualisation tools can help the Partnership to identify areas of good practice which can be highlighted and shared. They also help identify opportunities for improvement and change which is firmly based on the experiences of people receiving those services. By using the reporting tools, we can quickly identify areas that need improvement and to see how all services are engaging with feedback. We can enhance our local provision by engaging with feedback that covers full care pathways across services. We can meet our statutory and regulatory obligations to engage with, listen to, and improve services based on feedback from service users and their families.

As part of the implementation process, all staff who will be responding to stories will receive training on how Care Opinion works as well as how to respond to stories. This training is vital for staff to feel confident in responding to stories in an effective and constructive way that is aligned with the values of the Partnership.

The Senior Leadership Team approved the purchase and implementation of Care Opinion for three-years. This will allow sufficient time to implement the platform, train relevant staff, raise awareness amongst the public and our commissioned providers as well as gather data to evaluate the effectiveness of using the platform.

<b>What is the Proposal?</b>	<b>Budget &amp; Other Financial Decision</b>	<b>Policy (New or Change)</b>	<b>HR Policy &amp; Practice</b>	<b>Change to Service Delivery / Service Design</b>
	Yes	No	No	Yes
<b>Who does the Proposal affect?</b>	<b>Service Users</b>	<b>Members of the Public</b>	<b>Employees</b>	<b>Job Applicants</b>
	Yes	No	Yes	No
<b>Other, please specify:</b>				

**Identify the main aims and projected outcome of this proposal (please add date of each update):**

03/04/2023	Launch all adult social work services and some health service, including Falkirk Community Hospital, Bo'ness Community Hospital, Allied Health Professionals, Community Nursing, Home from Hospital service, and Community Residential Resources on the Care Opinion platform. These services will then be available for service users to submit their feedback on their experiences of care for staff to respond to and potentially improve service delivery.
05/06/2023	Launch additional health services, including the Health Improvement Service and Public Dental Services, and all commissioned providers on the Care Opinion platform. These services will then be available for service users to submit their feedback on their experiences of care for staff to respond to and potentially improve service delivery.
07/08/2023	Launch Primary Care and Community Mental Health Services on the Care Opinion platform. These services will then be available for service users to submit their feedback on their experiences of care for staff to respond to and potentially improve service delivery.

## SECTION TWO: FINANCIAL INFORMATION

For budget changes ONLY please include information below:			Benchmark, e.g. Scottish Average
Current spend on this service (£'0000s)	Total:	£27,372	The HSCP Senior Leadership Team approved the purchase of a three-year subscription of the Care Opinion platform. This timeframe allows us to fully implement the platform and gather data to evaluate its effectiveness.
Reduction to this service budget (£'0000s)	Per Annum:		
Increase to this service budget (£'000s)	Per Annum:		
If this is a change to a charge or concession please complete.	Current Annual Income Total:		
	Expected Annual Income Total:		
If this is a budget decision, when will the saving be achieved?	Start Date:		
	End Date (if any):		

**SECTION THREE: EVIDENCE** Please include any evidence or relevant information that has influenced the decisions contained in this EPIA. (This could include demographic profiles; audits; research; health needs assessments; national guidance or legislative requirements and how this relates to the protected characteristic groups.)

**A - Quantitative Evidence** This is evidence which is numerical and should include the number people who use the service and the number of people from the protected characteristic groups who might be affected by changes to the service.

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**B - Qualitative Evidence** This is data which describes the effect or impact of a change on a group of people, e.g. some information provided as part of performance reporting.

**Social - case studies; personal / group feedback / other**

An initial scoping exercise was done in mid-2021 to identify a method to allow service users, their carers or families to submit their feedback about their experience of care. Research identified multiple examples of patient/service user groups that provide feedback. For example, NHS Forth Valley established a Patient Public Panel in 2004. NHS Scotland has a Patient Experience Programme that involves patients providing feedback on their experiences of care through surveys, interviews, and group discussions. Other HSCPs (East Lothian and Fife) have set up their own Patient Participation Groups and Participation and Engagement Networks to involve patient and service user representatives.

We considered setting up a service user forum as a method to engage with service users and gather feedback. This may involve another organisation, such as SDS Forth Valley or CVS Falkirk, to take the lead on establishing that forum. This is an option that we are continuing to explore.

Research also identified Care Opinion as a possible online platform where service users/patients can share their feedback. Care Opinion presented their proposal as an online feedback platform and based on the existing use of the platform by NHS Forth Valley and other HSCPs and the benefits the platform provides, it was decided to present their proposal to HSCP Senior Leadership Team for consideration.

**Best Judgement:**

<b>Has best judgement been used in place of data/research/evidence?</b>	Yes
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<b>Who provided the best judgement and what was this based on?</b>	<p>The Partnership was looking for a method to allow service users, their carers or families to submit their honest feedback about their experience of care, and for the Partnership to use this feedback to identify service improvements. The Care Opinion team presented their proposal of what they could offer as an online feedback platform to the HSCP. Care Opinion was identified as a suitable platform and their proposal was presented to the Senior Leadership Team with recommendation to approve a three-year subscription. The Senior Leadership Team approved the subscription on 9 September 2022.</p>
<b>What gaps in data / information were identified?</b>	
<b>Is further research necessary?</b>	<p>No</p>
<b>If NO, please state why.</b>	<p>No further research is necessary because Care Opinion meets the requirements of the Partnership and is a trusted platform because it has national scale and visibility and is used by all NHS boards in Scotland as well as 10 HSCP's.</p>

**SECTION FOUR: ENGAGEMENT**

Engagement with individuals or organisations affected by the policy or proposal must take place

<b>Has the proposal / policy / project been subject to engagement or consultation with service users taking into account their protected characteristics and socio-economic status?</b>	No	
<b>If YES, please state who was engagement with.</b>		
<b>If NO engagement has been conducted, please state why.</b>	There was no requirement to consult with service users prior to launching Care Opinion. Instead, we met with NHS Forth Valley Patient Relations Team to discuss their experience of using the platform and working with Care Opinion. Care Opinion hosted multiple information sessions for social work staff to inform them about Care Opinion and provide them with training on how to respond. Our Comms Officer shared information about Care Opinion during its promotion before and after it launched.	
<b>How was the engagement carried out?</b>	<b>What were the results from the engagement? Please list...</b>	
<b>Focus Group</b>	No	
<b>Survey</b>	No	
<b>Display / Exhibitions</b>	No	
<b>User Panels</b>	No	
<b>Public Event</b>	No	
<b>Other: please specify</b>		
<b>Has the proposal / policy/ project been reviewed / changed as a result of the engagement?</b>	Yes / No	
<b>Have the results of the engagement been fed back to the consultees?</b>	Yes / No	
<b>Is further engagement recommended?</b>	Yes / No	

## SECTION FIVE: ASSESSING THE IMPACT

**Equality Protected Characteristics:** What will the impact of implementing this proposal be on people who share characteristics protected by the Equality Act 2010 or are likely to be affected by the proposal / policy / project? This section allows you to consider other impacts, e.g. poverty, health inequalities, community justice, carers etc.

Protected Characteristic	Neutral Impact	Positive Impact	Negative Impact	Please provide evidence of the impact on this protected characteristic.
Age			✓	<p>Potentially Care Opinion could have a negative impact on older people as older people are at greater risk of digital exclusion.</p> <p>However, there are ways for an older person to submit their feedback on Care Opinion. A carer or a family member can submit a story on their behalf. 47% of stories that have been submitted on Care Opinion have come from a carer, parent/guardian, or a relative.</p> <p>Within the materials order, Care Opinion provides the HSCP freepost leaflets for people who do not have digital access or the skills to submit their feedback online. People who are at risk of digital exclusion can submit their feedback using the freepost leaflet and the Care Opinion team will publish their story online. There is also a telephone number that people can use to submit their feedback.</p> <p>Care Opinion also has a number of accessibility features available so if an older person does have access to the platform and has the digital skills or has someone to help them submit a story then they can make the text bigger or change the font type so it is easier to read. The platform also has a feature so stories and responses can be read out loud.</p> <p>100% of stories have been submitted by an adult over the age of 18. Of the three story authors who provided information about their age, one was in their forties, one was in their fifties, and one was in their sixties.</p>



**Public Sector Equality Duty: Scottish Public Authorities must have 'due regard' to the need to eliminate unlawful discrimination, advance quality of opportunity and foster good relations. Scottish specific duties include:**

				<p>three colour/contrast themes to support someone with low vision. There are also signed videos about Care Opinion available in British Sign Language or Irish Sign Language.</p> <p>Care Opinion developed pictures stories in partnership with Talking Mats and Life Changes Trust. This aims to support, in particular, people with learning disabilities and people affected by dementia to share their stories using pictures.</p> <p>Additional accessibility features include text to speech feature, text highlighting, and easy read images on demand using the immersive reader button.</p> <p>People with disabilities are at greater risk of digital exclusion. However, Care Opinion does provide freepost leaflets for people unable to access online.</p>
<b>Sex</b>	✓			<p>Three story authors shared information about their gender and 100% of them are female. Women might be more likely to provide feedback, especially if they are caring for someone, as women tend to take on caring responsibilities.</p> <p>There is no information or data available to show whether Care Opinion has a positive or negative impact on this protected characteristic.</p>
<b>Ethnicity</b>			✓	<p>Care Opinion could have a negative impact on people who don't have English as a first language.</p> <p>Care Opinion can be shown in a range of languages. Someone can choose a language from the "select language" link at the top of each webpage. The translations are done by computer and not by translators which means they may not be very good.</p> <p>Someone may not have the written language skills to provide feedback. However, Care Opinion have developed picture stories. This could be an option for people with limited written language skills to share their stories in pictures.</p> <p>Care Opinion does ask story authors about their ethnicity and the three people who volunteered that information are white.</p>

<b>Religion / Belief / non-Belief</b>	✓			There is no information or data available to show whether Care Opinion has a positive or negative impact on this protected characteristic. There is no evidence that would suggest this protected characteristic would be a barrier for someone to access the platform and submit their feedback.
<b>Sexual Orientation</b>	✓			There is no information or data available to show whether Care Opinion has a positive or negative impact on this protected characteristic. There is no evidence that would suggest this protected characteristic would be a barrier for someone to access the platform and submit their feedback.
<b>Transgender</b>	✓			There is no information or data available to show whether Care Opinion has a positive or negative impact on this protected characteristic. There is no evidence that would suggest this protected characteristic would be a barrier for someone to access the platform and submit their feedback.
<b>Pregnancy / Maternity</b>	✓			There is no information or data available to show whether Care Opinion has a positive or negative impact on this protected characteristic. There is no evidence that would suggest this protected characteristic would be a barrier for someone to access the platform and submit their feedback.
<b>Marriage / Civil Partnership</b>	✓			There is no information or data available to show whether Care Opinion has a positive or negative impact on this protected characteristic. There is no evidence that would suggest this protected characteristic would be a barrier for someone to access the platform and submit their feedback.
<b>Poverty</b>			✓	People on lower incomes and living in poverty are at greater risk of digital exclusion. If they are unable to access the platform and submit their feedback online then they could use freepost leaflets or use the telephone number available.
<b>Care Experienced</b>	✓			There is no information or data available to show whether Care Opinion has a positive or negative impact on this protected characteristic. There is no evidence that would suggest this protected characteristic would be a barrier for someone to access the platform and submit their feedback.
<b>Other, health, community justice, carers etc.</b>	✓			A carer or a family member can submit a story on the behalf of the service user. 47% of stories that have been submitted on Care Opinion have come from a carer, parent/guardian, or a relative. There may be carers who don't have the digital skills to submit their feedback online but they would be able to use freepost leaflets.
<b>Risk (Identify other risks associated with this change)</b>				

	<b>Evidence of Due Regard</b>
<b>Eliminate Unlawful Discrimination (harassment, victimisation and other prohibited conduct):</b>	Care Opinion moderate stories before they are published online to allow for safe and constructive conversations. Care removes any profanities and discriminatory language from stories. They also remove any assumptions made about a service or staff member and any allegations or speculations about the character or motivations of staff or services.
<b>Advance Equality of Opportunity:</b>	All parties involved in the story are protected as Care Opinion removes any names and details which might identify an individual.
<b>Foster Good Relations (promoting understanding and reducing prejudice):</b>	Care Opinion encourages responders to be polite and personal, and to try to understand and connect with the story author in their response.

## SECTION SIX: PARTNERS / OTHER STAKEHOLDERS

Which sectors are likely to have an interest in or be affected by the proposal / policy / project?		Describe the interest / affect.
<b>Business</b>	No	
<b>Councils</b>	No	
<b>Education Sector</b>	No	
<b>Fire</b>	No	
<b>NHS</b>	Yes	Care Opinion is used by all NHS boards in Scotland. During the implementation period, there will be services that are currently on the NHS Forth Valley subscription that will need to move across to the Falkirk HSCP subscription. While we phase the launch of our health services, the NHS Forth Valley Patient Relations Team will continue to be responsible for responding to services until the relevant services are transferred across subscriptions.
<b>Integration Joint Board</b>	Yes	Care Opinion enables staff across services we deliver to publicly demonstrate how we listen to and learn from online feedback. The implementation of Care Opinion supports the commitments outlined in our Participation and Engagement Strategy by providing an independent mechanism to engage with our service users and their carers or families. The platform's suite of reports and visualisation tools can help us to identify areas of good practice which can be highlighted and shared as well as help identify opportunities for improvement and to see how all services are engaging with feedback.
<b>Police</b>	No	
<b>Third Sector</b>	Yes	Some of our commissioned providers are third sector organisations who will be able to engage with service users and respond to online feedback to make changes or improvements to service delivery. They could also use positive stories as examples of good practice for their organisation to share with staff.
<b>Other(s): please list and describe the nature of the relationship / impact.</b>		

**SECTION SEVEN: ACTION PLANNING**

**Mitigating Actions:** If you have identified impacts on protected characteristic groups in Section 5 please summarise these in the table below detailing the actions you are taking to mitigate or support this impact. If you are not taking any action to support or mitigate the impact you should complete the No Mitigating Actions section below instead.

Identified Impact	To Who	Action(s)	Lead Officer	Evaluation and Review Date	Strategic Reference to Corporate Plan / Service Plan / Quality Outcomes
Care Opinion could potentially have a negative impact on those who are at greater risk of digital exclusion.	Anyone unable to access the platform online, in particular, older people, people on low incomes, and people living with disabilities.	Targeted distribution of freepost leaflets to services with note to staff that leaflets should only be provided to identified groups with explanation that they are at greater risk of digital exclusion.	Jennifer Faichney	01/04/2024	

**No Mitigating Actions**

**Please explain why you do not need to take any action to mitigate or support the impact of your proposals.**

<b>Are actions being reported to Members?</b>	No
<b>If yes when and how ?</b>	

**SECTION EIGHT: ASSESSMENT OUTCOME**

Only one of following statements best matches your assessment of this proposal / policy / project. Please select one and provide your reasons.

No major change required	Yes	Care Opinion provides the opportunity to listen to and engage with feedback to identify improvements of service delivery and promote positive experiences of care. There have been no identified negative impacts of using this platform on any of the protected characteristics.
The proposal has to be adjusted to reduce impact on protected characteristic groups	No	
Continue with the proposal but it is not possible to remove all the risk to protected characteristic groups	No	
Stop the proposal as it is potentially in breach of equality legislation	No	

**SECTION NINE: LEAD OFFICER SIGN OFF**

Lead Officer:

Signature:	<i>Jennifer Faichney</i>	Date:	21/04/2023
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**SECTION TEN: EPIA TASK GROUP ONLY**

<b>OVERALL ASSESSMENT OF EPIA:</b>	Has the EPIA demonstrated the use of data, appropriate engagement, identified mitigating actions as well as ownership and appropriate review of actions to confidently demonstrate compliance with the general and public sector equality duties?	Yes
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<b>ASSESSMENT FINDINGS</b>		
If YES, use this box to highlight evidence in support of the assessment of the EPIA		
If NO, use this box to highlight actions needed to improve the EPIA		

<b>Where adverse impact on diverse communities has been identified and it is intended to continue with the proposal / policy / project, has justification for continuing <u>without making changes been made</u>?</b>	Yes / No	If YES, please describe:

**LEVEL OF IMPACT: The EPIA Task Group has agreed the following level of impact on the protected characteristic groups highlighted within the EPIA**

LEVEL		COMMENTS
HIGH	Yes / No	
MEDIUM	Yes / No	
LOW	Yes	

**SECTION ELEVEN: CHIEF OFFICER SIGN OFF**

<b>Director / Head of Service:</b>		
<b>Signature:</b>	<i>Suzanne Thomson</i>	<b>Date:</b> 11/04/2024