### **Equality & Poverty Impact Assessment 00845 (Version 1)**

SECTION ONE: ESSE	NTIAL INFORMATION		
Service & Division:	Social Work Adult Services	Lead Officer Name:	Caroline Doherty
	Community Care	Team:	Central locality
		Tel:	07484011661
		Email:	caroline.doherty@falkirk.gov.uk
Proposal:	Develop and implement a moving on policy that will operate Forth Valley wide. Aims of policy are to:  Support delayed discharge  Support whole system flow  Provide an agreed approach when there is disagreement about remaining in hospital when the client is fit for discharge.	Reference No:	IJB 21.03.25

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

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

identity the in	and and projected outcome or this proposal (picase and date or each aparter).
26/02/2025	The aim of the proposal is to implement a moving on policy to support adults in hospital fit for discharge who are not in agreement with leaving hospital to move onto a more appropriate setting. This maybe a care home, returning back home with a care package or admission into an interim care arrangement. The policy will be Forth Valley Wide.

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

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SECTION TWO: FINANCIAL INFORMATION					
For budget changes ONLY please include information below:			Benchmark, e.g. Scottish Average		
Current spend on this service (£'0000s)  Total:					
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	Current Annual Income Total:				
concession please complete.	Expected Annual Income Total:				
If this is a budget decision, when will the	Start Date:				
saving be achieved?	End Date (if any):				

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<b>SECTION THREE: EVIDENCE</b>	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.

The information available around characteristics is limited. However given that the adults delayed are all awaiting a service, this indicates that the adult will have been assessed with a physical or mental health needs and are all considered to be affected by a disability as defined under protected characteristics.

The following is noted:

The policy applies to adults 16 years and over. From information available today ages of adults currently being supported via hospital discharge processes are age 24 years old to 103 years old.

Around 55% of adults support are female, with around 45% being male.

On average there are between 70 - 80 delayed discharges for Falkirk patients.

Weekly figures are produced by Public Health Scotland. The latest figures show on 20th February there was:

- 58 Standard delays
- 20 code 9 delays (Complex case)
- 17 Adults With Incapacity delays

# 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

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The impact of the implementation of this policy is that adults will be supported to move to a more appropriate setting when assessed as medically fit for discharge.

In terms of outcomes despite the adult initially not being in agreement which would trigger the use of the policy, the impact on staying in hospital beyond the time required for treatment is significant. Adult's are deconditioned by protracted stays in hospital and there is in increased risk of infection. Outcomes are adversely impacted.

National Guidance of Scottish Government states the impact on prolonged stay in hospital are as follows:

- a sense of disconnection and loneliness
- risk of health associated infection/delirium
- distress for the adult and their carer/family member

Source - Policy - Independent living, Department of health and social care, Scottish Government.

Best Judgement:	
Has best judgement been used in place of data/research/evidence?	No
Who provided the best judgement and what was this based on?	Best judgement and research combined in being used to inform this policy,
What gaps in data / information were identified?	There is a good level of research in this area that confirms this position.
Is further research necessary?	No
If NO, please state why.	See above

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SECTION FOUR: ENGAGEMENT Engagemen	t with individua	ls or organisations affected by the policy or proposal must take place
Has the proposal / policy / project been subject to engagement or consultation with service users taking into account their protected characteristics and socio-economic status?	No	
If YES, please state who was engagement with.		
		of for how staff will implement the national guidance outlined by Scottish Government. In the national guidance outlined by Scottish Government. In the nation is a staken place with key stakeholders. Impact will be monitored following implementation.
How was the engagement carried out?		What were the results from the engagement? Please list
Focus Group	No	
Survey	No	
Display / Exhibitions	No	
User Panels	No	
Public Event	No	
Other: please specify		
Has the proposal / policy/ project been reviewed / changed as a result of the engagement?		Yes / No
Have the results of the engagement been fed back to the consultees?		Yes / No
Is further engagement recommended?		Yes / No

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#### 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		<b>√</b>		The impact will improve outcomes by providing care and support in a more appropriate environment with less risk of infection.
Disability		✓		The impact will improve outcomes by providing care and support in a more appropriate environment with less risk of infection.
Sex	✓			Policy applies to all. However due to discharge profile is likely to impact more on clients that are female. Sex does not affect how the policy will be operated so impact is neutral.
Ethnicity		✓		The impact will improve outcomes by providing care and support in a more appropriate environment with less risk of infection. Ethnicity will be considered in line with available resources to ensure that cultural needs are considered.
Religion / Belief / non-Belief	✓			Policy applies to all. Insufficient data available to measure impact.
Sexual Orientation	✓			Policy applies to all. Insufficient data available to measure impact.
Transgender	✓			Policy applies to all. Insufficient data available to measure impact.
Pregnancy / Maternity		✓		The impact will improve outcomes by providing care and support in am more appropriate environment with less risk of infection.
Marriage / Civil Partnership	✓			Policy applies to all. Insufficient data available to measure impact.
Poverty			<b>√</b>	The impact will improve outcomes by providing care and support in am more appropriate environment with less risk of infection.
				However it is noted that after 6 weeks of care in the community or care home placement charges may be liable. This is means tested but has the potential to impact on available resources for a family.
Care Experienced	✓			Policy applies to all. Insufficient data available to measure impact.
Other, health, community justice, carers etc.	✓			This policy will support more timely discharge and improve capacity within the hospital and whole system flow.

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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:

	Evidence of Due Regard				
Eliminate Unlawful Discrimination (harassment, victimisation and other prohibited conduct):	This policy applies to all adults considered clinically fit for discharge that require a service post discharge.				
Advance Equality of Opportunity:	This policy applies to all adults considered clinically fit for discharge that require a service post discharge.				
Foster Good Relations (promoting understanding and reducing prejudice):	There is a leaflet being developed to support consistent communication and engagement with those that are supported by the policy.				

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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> Yes		The commissioned care home and at-home care sectors might be interested, as this could result in an increased demand for their services.			
<b>Councils</b> Yes		Implementing this policy throughout Forth Valley will facilitate more prompt discharges having a positive impact on whole system flow.			
Education Sector	No				
Fire	No				
NHS	Yes	Implementing this policy throughout Forth Valley will facilitate more prompt discharges, enhancing the flow of the entire system and generating additional capacity.			
Integration Joint Board	Yes	The implementation of this policy across Forth Valley will enable more timely discharges, improving the efficiency of the entire system and creating extra capacity. This aligns with the HSCP Strategic Plan for 2023-26.			
Police	No				
Third Sector	No				
Other(s): please list and describe the nature of the relationship / impact.					

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### **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
Some services are means tested and subject to charges this may impact on the resources available to a family.	Family members of the patient/carer	Means tested service provision has inbuilt threshold for maximum charges that include subsidisation of the care provided.  For families that require it a referral will be made to maximise benefits.  The application of the policy will be monitored.	Caroline Doherty	31/03/2026	This policy supports the HSCP Strategic Plan 2023-26.

### **No Mitigating Actions**

Are actions being reported to Members?

No

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

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If yes when and how ?			

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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	recommended to around delayed di	national guidance that HSCPs and Health Boards are vork under to support discussion and decision making charges. The approval and implementation of the en practice in this area.		
The proposal ha characteristic gr	s to be adjusted to reduce impact on protected oups	No				
	he proposal but it is not possible to remove all the risk aracteristic groups	No				
Stop the proposal as it is potentially in breach of equality legislation		No				
SECTION NINE: LEAD OFFICER SIGN OFF						
Lead Officer:						
Signature:	Caroline Doherty		Date:	26/02/2025		

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SECTION TEN: EPIA TASK GROUP ONLY							
OVERALL ASS	SESSMENT OF	w	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?				
ASSESSMENT FINDINGS			Lack of information available.				
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							
Where adverse impact on diverse communities has been identified and it is intended to continue with the proposal / policy / project, has justification for continuing without making changes been made?			No	If YES, please describe: No adverse impacts identified.			
LEVEL OF IM	PACT: The EP	PIA Task Grou	up has agreed the follow	ing level of im	pact on the protecte	d characteristic groups highlighted within th	ne EPIA
LEVEL		COMMENTS					
HIGH	Yes / No						
MEDIUM	Yes	The impact	he impact is assessed as medium as a result of the consequences of delayed discharge on the individual as well as the hospital.				
LOW	Yes / No						
SECTION ELE	SECTION ELEVEN: CHIEF OFFICER SIGN OFF						
Director / Head of Service:							
Signature:	Gail Woodcock				Date:	13/03/2025	

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