

## The State Hospital Equality Impact Assessment (EQIA)

The 'Guidance to Support Completion of the Equality Impact Assessment' should be read prior to completing this template.

Please note, the EQIA should be proportionate to the significance and coverage of the proposed policy, strategy, protocol, project, service or function and should take cognisance of the nature of the environment and patient group.

**Screening questions to determine if the document requires a detailed EQIA.**

<b>Name of the proposal for assessment: Technology and Electronic Devices Policy SP28</b>		
<b>Directorate: Security</b>		
<b>Date: 14/09/2023</b>		
<b>Designation(s) of author(s): Deputy Physical Security Manager</b>		
<b>What is being assessed:</b>		
Policy <input checked="" type="checkbox"/> Strategy <input type="checkbox"/> Protocol <input type="checkbox"/> Project <input type="checkbox"/>		
Other <input type="checkbox"/> <i>(please provide details)</i>		
Is it new <input type="checkbox"/> Is it an update <input checked="" type="checkbox"/>		
Is it a replacement <input type="checkbox"/> <i>(please advise what is being replaced)</i>		
<b>1. What are the main aims and outcomes of what is being assessed and how do these fit in with the wider aims of the organisation, legislation and national drivers?</b>		
<p style="text-align: center;"><b>Aim(s) / Outcome(s)</b></p> <p>To ensure robust and consistent practice supporting safe use of electronic equipment which supports the decision making process relating to the approval of access to such equipment.</p>	<p style="text-align: center;"><b>Wider Aim(s)</b></p> <p>To maintain the safety and security of all relevant stakeholders.</p>	
<b>2. Please identify the scope of what is being assessed:</b>		
Forensic Network wide <input type="checkbox"/> Hospital wide <input checked="" type="checkbox"/> Service specific <input type="checkbox"/>		
Discipline specific <input type="checkbox"/> Other <input type="checkbox"/> <i>(please provide details)</i>		
<b>3. Who are the key stakeholders potentially affected? Will the impact on these groups be positive and/or negative and/or neutral way? Why do you say this?</b>		
<b>Stakeholder(s)</b>	<b>Impact</b>	<b>Rationale</b>
1) Staff	Positive	To create clear guidelines and to support staff to make informed decisions. Requires staff to make decisions which may prevent

	Negative	patients from accessing desired equipment which may impact on their therapeutic relationship
2) Patients	Positive	Provides clear guidelines to patients of what electrical items they are permitted to purchase.
	Negative	Restricts patients to a limited range of technology which prevents them from maintaining current awareness of and practice in the use of the most up to date technology. Prevents patients from making use of personal PC's to engage in private study within the quieter environment of their bedroom out with the 9-5 of ward access periods. Restricts freedom of choice in relation to viewing content.
3) Carers	Positive	Provides clear guidelines to carers of what electrical items they can bring into the hospital. Alleviates the potential of patients to putting visitors under pressure to bring in electronic equipment which is not on the approved list.
	Negative	Restricts carers to a limited range of electrical items they can gift to the patients.
4) Other visitors	Positive	Provides clear guidelines as to what electrical items are permitted.
		May restrict other visitors and contractors to what tools they can bring on site which may impact on the way in which the task is undertaken.
5) General Public	Positive	Keeps the public safe from patients contacting them through unauthorised communications.
6) Scottish Government	Positive	Reassures the Scottish Government that there are clear guidelines in place for

				ensuring patients do not have access to technology that could cause harm to other
<b>4. Is a collaborative assessment with external partners required? Yes <input type="checkbox"/> No <input checked="" type="checkbox"/></b> <i>(If No, please provide rationale):</i> No change to policy				
<b>5. Specifically, in relation to the protected characteristics, please identify whether the impact will be positive, negative and/or neutral on these groups, providing rationale in support of your decision. Please also describe any identified inequality and indicate practice in place which mitigates aspects of the proposed policy, strategy, protocol, project, service or function contributing to any adverse impact or inequality.</b>				
Protected Characteristic	Positive (x)	Adverse / Negative (x)	Neutral (x)	Identified impact/inequality and rationale, including mitigating practice where appropriate
Age		X		Limits scope for patients to remain up to date with new technology with which they may require to be familiar with on return to the community
Disability		X		May impact on choice of electronic equipment provided to support augmentative and alternative communication for patients who experience significant barriers to communication.
Gender			X	
Gender Reassignment			X	
Marriage and Civil Partnership			X	
Pregnancy and Maternity			X	
Race/Ethnicity		X		May impact on access to a wider range of translation software/ telephone/ online packages available to those in the community.
Religion and or Belief			X	
Sexual Orientation			X	
<b>6. Thinking about the key stakeholders you have identified in no. 3, please explain how the proposal being assessed supports the organisation to eliminate any potential unlawful discrimination, harassment and victimisation of these groups, promoting equality of opportunity and fostering good relationships between all stakeholders.</b>				
This policy applies to and is consistently implemented in respect of all patients being cared for within the hospital, all staff working in this environment, volunteers providing input and any carer/ other visitor/ contractor accessing the hospital.				
<b>7. Thinking about the key stakeholders you have identified in no. 3, please identify potential inequalities of outcome which may arise in relation to socio-economic disadvantage (low income), including material deprivation.</b>				
None identified.				

**Please discuss the EQIA with the Service Lead/Director and complete below to indicate this person is in agreement with your findings.**

**Designation of Service Lead/Director: Director of Security, Facilities and Estates**

**Date: 14/09/2023**

If a **detailed EQIA** is required please contact the Director of Nursing and Operations for information.

**Please note:** as EQIA documents are within the public domain via the Hospital's website (unless identified as sensitive information) content should not include the names of any stakeholders and/or include any information which would identify individuals.