The State Hospital Detailed Equality Impact Assessment (EQIA)

You should read the guidance document prior to completing this template.

Please note, the EQIA should be proportionate to the significance and coverage of the policy and should take cognisance of the nature of the environment and patient group.

A: Overview

Name of the policy: CCTV Code of Practice SP 04	Number of patients impacted:104 (as of 20/02/2023)		
Directorate: Security, Estates and Resilience Date: 1 Marc	h 2023		
Designation(s) of Lead Author: Physical Security Manager			
Strategy Policy Protocol Project *Other	er (*please provide details)		
New update to existing policy replacement	ent (*please advise what this policy is replacing)		
1. What are the main aims and outcomes of the policy and how do these fit in with the wider aims of the organisation, legislation and national drivers?			
Aim(s) / Outcome(s)	Wider Aim(s)		
To ensure that the State Hospital's CCTV system continues to supp	• •		
a safe and secure environment for everyone accessing the Hospital. requirements, including Mental Health, Data Protection and Human Rights.			
2. Please identify the scope of the policy			
Forensic Network wide Hospital wide Service specific Discipline specific *Other			
(*please provide details)			
3. Who are the key stakeholders potentially affected by the policy? Will the policy impact on these groups in a positive and/or negative and/or neutral way? Why do you say this?			
Stakeholder(s) Impact	Rationale		

1.Patients	Positive	Enhanced CCTV within the wards and grounds will enhance patient safety. Recorded images will offer insight into patient feedback relating to complaints. The protocol confirms that additional internal cameras are not 'live monitored'. Patients reassured that there is a robust process in place to limit access to the CCTV recordings, protecting confidentiality. Standard Operating Procedure (SOP) states that Security Operators will not view patient bedrooms. SOP empowers, through Silver Command, a Level 3 Incident Commander to access these images in the event of a significant incident. Patterns of behaviour relating to Protected Characteristic groups e.g. potential sectarian, racially motivated, gender based violence / aggression may be identified during the course of an investigation through use of CCTV. Supports safe access to fresh air and exercise
	Negative	Recorded images may detect crime and lead to prosecution Recorded images may discount patients' versions of events. Paranoia, experienced by some patients as part of positive symptoms of mental health may be exacerbated with additional cameras in use. Requirement to be monitored by CCTV when outdoors limits access to the grounds to daylight hours.
2.Staff	Positive	Offers staff reassurance that there are no blind spots within the grounds or public areas of the wards. CCTV images may support staff account of their actions and behaviours as part of investigations. Behaviour relating to Protected Characteristic groups e.g. potential sectarian, racially motivated, gender based violence / aggression, behaviour relating to pregnant staff may be identified during the course of an investigation through use of CCTV. May record unprofessional behaviour which potentially lead to disciplinary or criminal
	Negative	procedures.
3. Volunteers	Positive	Volunteers reassured that there are no blind spots within areas they access. CCTV images may support the volunteers account of their actions and behaviours as part of an investigation process.
	Negative	May record behaviours which potentially lead to disciplinary or criminal procedures.
4.Carers	Positive	Provides carers with the knowledge that the Hospital has an up to date CCTV to enhance their safety and security.
	Negative	Potential to detect criminal activity that may be reported to the police.
	Positive	Safeguards the public.

5. Anyone reaching the access point to the State Hospital boundary (leaving the public highway).	Negative	Images of members of the public may be recorded. May record behaviours which may lead to disciplinary or criminal procedures
6. Members of the public passing by the Hospital.	Positive	Safeguards the public.
·	Negative	Members of the public may be filmed. May record behaviours which may lead to disciplinary or criminal procedures

4. Have external partners / other relevant stakeholders contributed to this assessment?

Yes

At the outset, patients were involved in the planning stage of the project and their views relating to a number of privacy matters have been taken into account. The Data Protection Impact Assessment has also highlighted privacy needs relating to the Protected Characteristic Groups which have informed this assessment. Local community, local Councillors and MSPs have been engaged in discussion relating to impact on the community. Engagement has also taken place with the Mental Welfare Commission and the Scottish Government who have had an opportunity to offer feedback.

5. Specifically, in relation to the protected characteristics, please identify whether the policy impacts positively, negatively and / or neutrally 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 policy contributing to any adverse impact or inequality.

Protected Characteristic	Positive X	Adverse/Negative X	Neutral X	Identified impact / inequality and rationale, including mitigating practice where appropriate
Age		X		Patients whom experience barriers to communication as a result of age related conditions e.g. Dementia may be unable to comprehend the impact on their privacy as a result of the enhanced CCTV system. Supports rapid response in relation to falls which may occur with older patients who experience mobility issues – live monitored areas only. Children visiting the Hospital are accompanied by all times by an adult who, as a carer, is included within the Communications Plan in terms of being advised of the additional CCTV cameras in use, including those within the Family Centre where child visits take place.
Disability		X		Supports rapid response in relation to falls which may occur with patients who experience mobility issues – live monitored areas only. Enables a graded approach to risks relating to access to the outdoor environment as a result of mental health presentation. Supports patients to safely access fresh air and exercise via remote monitoring. May affect patients whom experience severe mental health issues and require the use of a Modified Safe Room for Seclusion where their privacy will be impacted as a result of cameras located in this area. Patients with a visual impairment may be unable to read the information provided about the impact of the upgraded CCTV system. Section 12 of the CCTV Code of Practice highlights the need to ensure that alternative forms of communication are available for those who experience barriers to communication.
Gender	Х			Safeguards females who may be targeted by some patients.

Gender Reassignment	X	X		Security of having CCTV in situ safeguards transgender stakeholders. Stakeholders who are transitioning may feel vulnerable as a result of CCTV cameras being installed in wider areas. System is not live viewed and stakeholders are made aware that, in the event of an emergency, recordings will be accessed.
Marriage and Civil Partnership			Х	
Pregnancy and Maternity	Х			Inappropriate patient behaviour relating to pregnant stakeholders may be identified during the course of an investigation through use of CCTV.
Race/Ethnicity		X		Patients for whom English is not their first language will have difficulty understanding the implications in terms of privacy relating to the enhanced CCTV system. Section 12 of the CCTV Code of Practice highlights the need to ensure that alternative forms of communication are available for those who experience barriers to communication.
Religion and or Belief		X		Cameras installed in the Multi Faith and Vocational Room in the Skye Centre used by patients engaging in religious activities. This may be viewed as intrusive when engaging in faith related activities. System is not live viewed and patients are made aware that, in the event of an emergency, recordings will be accessed.
Sexual Orientation	Х			Facility for an investigator to request CCTV images are accessed by approved persons to inform investigations relating to incidents whereby stakeholders are targeted as a result of their sexual orientation.

6. Thinking about the key stakeholders you have identified in no. 3, please explain how the policy 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.

The Code of Practice and DPIA is clear about the lawful use of CCTV, it is considered to be necessary and proportionate, regarding the safety and security of the Hospital and all its users, with safe guards in place including the Data Protection Act. All groups are subject to the same surveillance with clear guidance on how the CCTV operator(s) should operate the system. The system will be audited on a regular basis and reported to the Security and Resilience Group.

The process supports the Protected Characteristic Groups in terms of an equitable approach to protecting the privacy of all stakeholders as well as offering a system through which incidents / complaints can be informed by evidence where this is appropriate.

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.

None identified.

B: Responding to Identified Needs

1. For each of the protected characteristics where needs were identified in section A5, outline needs identified, actions required, responsibility for same as well as the anticipated timeframe. Briefly describe the methods which have/will be adopted to mitigate any challenges identified.

Prot	Protected Characteristic: Age				
a)	Impact	Patients whom experience barriers to communication as a result of age related conditions e.g. Dementia may be unable to comprehend the impact on their privacy as a result of the enhanced CCTV system.			
Responsible Person		Consultant Psychiatrist. Well established existing adaptive practice in place. Written information provided in large print, supported by verbal reinforcement. Where verbal communication presents as an issue, use of images to support engagement in activities of daily living.			
		Adapt wider CCTV patient communications to accessible information format, including sound recording of essential information			
By Whom? Pe		Person Centred Improvement Team			
b) Impact Child visitors (26 approved child visitors as of 21/10/22) may not understand the impact on their privacy.		Child visitors (26 approved child visitors as of 21/10/22) may not understand the impact on their privacy.			
Resp	onsible Person	Relevant Social Workers			
Action(s) Required		 Seek confirmation from parents / guardians (who will have received the relevant information) that they have, where appropriate, made children aware of this addition to the CCTV system. Adapted information in the form of posters and flyers to be sent to parents prior to first visit post-implementation. Update Patient Visitor Information Pack. 			
By whom?		Social Workers. Person Centred Improvement Team.			

Pro	tected Charac	cteristic: Disability
c)	Impact	May affect patients whom experience severe mental health issues and require the use of a Modified Safe Room (MSR) for Seclusion, where their privacy will be impacted as a result of cameras located in this area.
Res	ponsible Person	Consultant Psychiatrist
Acti	on(s) Required	Develop discrete communication resource for patients entering the MSR to ensure that they understand that CCTV is in use in this area.
By \	Whom?	Person Centred Improvement Team
d)	Impact	Paranoia, experienced by some patients in relation to their mental health diagnosis, may be more acute.
Res	ponsible Person	Senior Charge Nurse
Acti	ons(s) Required	None. Patients' mental health monitored by nursing staff at all times.
e)	Impact	Patients with a visual impairment may be unable to read the information provided about the impact of the upgraded CCTV system.
Res	ponsible Person	Consultant Psychiatrist
Acti	on(s) Required	Written information to be provided in large print / sound recording.
Ву	Whom?	Person Centred Improvement Team
f)	Impact	Patients with a diagnosis of Intellectual Disability may not fully understand the information shared, specifically relating to impact on privacy.
Res	ponsible Person	Consultant Psychiatrist
Acti	ons(s) Required	 Information will be provided in accessible information format. Offer patients the opportunity to share concerns and seek clarity where required via Ward Talking Group and Iona 2 PPG.
By V	Whom?	Person Centred Improvement Team

Protected Characteristic: Gender Reassignment			
g)	Impact Stakeholders who are transitioning may feel vulnerable as a result of CCTV cameras being installed in wider areas.		
Res	ponsible Person	Consultant Psychiatrist	

Action(s) Required	No patients in this group currently. Individually tailored approach will be adopted in terms of reassuring patients should the
	need arise.

Pro	Protected Characteristic: Race and Ethnicity				
h)	Impact	Patients for whom English is not their first language will have difficulty understanding the implications in terms of privacy relating to the enhanced CCTV system.			
Res	ponsible Person	Consultant Psychiatrist			
Acti	on(s) Required	All communications to be translated into the patient's language of choice.			
By Whom? Person Centred Improvement Team		Person Centred Improvement Team			
Pro	tected Charac	teristic: Religion and / or Belief			
i)	Impact	Cameras installed in the Multi Faith and Vocational Room in the Skye Centre used by patients engaging in religious activities. May be viewed as intrusive by patients / Chaplaincy Team when engaging in faith related activities.			
Res	ponsible Person	Person Centred Improvement Lead			
Action(s) Required		 Posters to be displayed in each area. Use of CCTV to be highlighted in patient information relating to spiritual and pastoral care activities. Chaplains are already aware, having been involved in original consultation, letters to be sent advising 'go live' date as part of communications plan. 			
By Whom?		Person Centred Improvement Team			

2. Do any actions identified require to be completed prior to implementing this policy? Yes

*If actions are required, please refer to the previous section and identify those which must be completed prior to implementation of this policy:

All those identified require to be complete prior to the upgraded CCTV system 'going live'.

3. If actions are required, at Board level, which Executive Director is res	ponsible for ensuring all are complete prior to implementation of
the policy?	

Director of Security, Estates and Resilience

4. Which groups have been involved in approving the content of the policy document and this EQIA?

Security, Resilience, Health and Safety Oversight Group.

5. Which TSH senior decision making group is approving this policy for implementation?

Policy Approval Group

6. How will the impact of the policy on stakeholders be assessed and when?

Impact will be assessed through quarterly updates at the Security and Resilience Group with oversight provided by Security, Resilience, Health and Safety Oversight Group.

The final stage of the EQIA is to formally sign off this document as being a complete, rigorous and robust assessment. When you are satisfied that the policy has been fully assessed in relation to equality and all relevant concerns have been addressed, please discuss with the responsible Executive Director and, having received written confirmation, complete below to indicate this person is in agreement with the content.

Date: 01/03/2023

7. Executive Director Designation: Director of Security, Estates, Risk and Resilience

8. Approved by Person Centred Improvement Lead on: 01/03/2023

Comments: This EQIA has been developed involving stakeholders impacted, and is a dynamic assessment, which will be reviewed in conjunction with monitoring arrangements above.

No impact on content of EQIA following final consultation undertaken in February 2023.

This EQIA must be attached to the policy document and CCTV Implementation Communications Plan within the paperwork submitted to the Policy Approval Group (PAG) prior to implementation.

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

This detailed EQIA includes stakeholder data. In order to protect confidentiality, this document is therefore not for publication on TSH website