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.

| Name of the proposal for assessment: CP58 Patient Access to Sexually Explicit and Violent Materials Policy | | | | | |
|--|--|--|--|--|--|
| Directorate: Nursing | | | | | |
| Date: 8/06/23 | | | | | |
| Designation(s) of author(s): Principal Clinical Psy | vchologist | | | | |
| What is being assessed: | | | | | |
| Policy ⊠ Strategy □ Protoc | ol 🗌 Project 🔲 | | | | |
| Other (please provide details) | | | | | |
| | | | | | |
| Is it new 🗵 (Combination of two individual policies | es to create one new policy) | | | | |
| Is it an update $\ \square$ | | | | | |
| ls it a replacement (please advise what is being replaced) | | | | | |
| What are the main aims and outcomes of wh in with the wider aims of the organisation, le | | | | | |
| Aim(s) / Outcome(s) | Wider Aim(s) | | | | |
| The policy defines clinical and security practices for the safe management of the system by which the State Hospital patients whom as assessed as being appropriate to be considered for access to sexually explicit and/or violent materials. These can be in the form of magazines, DVDs and video games | To ensure that all patients are fully assessed by the Clinical Team using a risk assessment framework prior to granting access to material which may have sexually explicit or violent content. To define the way in which patients will be monitored using these materials. To provide information for patient and their carers, including explanation of the policy and additional guidelines on appropriate use of sexually explicit or violent material. | | | | |
| 2. Please identify the scope of what is being assessed: | | | | | |
| Forensic Network wide Hospital wide | Service specific □ | | | | |
| Discipline specific ☐ Other ☐ (p | lease provide details) | | | | |

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| 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? | | | | |
|--|----------|---|--|--|
| Stakeholder(s) | Impact | Rationale | | |
| 1. Patients | Positive | Patients following a robust risk assessment are permitted to access materials which may have a sexually explicit or violent content, including those relating to sexual | | |
| | Negative | orientation. | | |
| | | Policy stipulates access to 'R' rated material is not permitted impacting on the freedom of choice. | | |
| 2.staff | Positive | Managing access which is limited based on individual risk assessment and formulation, limits risk of inappropriate behaviour which may result in the need for staff intervention. | | |
| | Negative | | | |
| | | Staff involved in searching processes may be exposed to sexually explicit or violent materials which may not be their choice to view. | | |

Some requests may be declines based on content, which requires staff to engage in challenging discussions with may impact on the therapeutic relationship.

4. Is a collaborative assessment with external partners required? No

Other high security hospital policies reviewed when compiling current policy. Lower levels of security would allow different levels of access to these materials due to patients' clinical and legal status.

4. 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.

| Protected Characteristic | Positive (Yes/No) | Adverse / Negative (Yes/No) | Neutral (Yes/No) | Identified impact/inequality and rationale, including mitigating practice where appropriate (Yes/No) |
|-----------------------------|----------------------|-----------------------------------|---------------------|--|
| Age | no | no | yes | |
| Disability | yes | yes | no | Individual risk assessments are undertaken by the Clinical Team to determine a patients' mental ability to safely access this type of material. On |

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| | | | | occasions, a decision may be made which denies access as a result to the need to protect the patient and others. |
|--------------------------------|-----|-----|-----|---|
| Gender | no | no | yes | |
| Gender Reassignment | yes | no | no | Patients undergoing gender reassignment are afforded the opportunity to access relevant material of an appropriate nature. |
| Marriage and Civil Partnership | no | no | yes | |
| Pregnancy and Maternity | no | no | yes | |
| Race/Ethnicity | yes | yes | no | Requests from patient who are unable to communicate in English in respect to access to sexually explicit or violent material will be considered. Consideration will be given to the costs associated with translation of these materials in relation to the best use of the budget which is prioritised for core care and treatment. |
| Religion and or Belief | yes | no | no | Patients who may be offended by any sight of sexually explicit material due to their culture/religious beliefs are protected from this by the controlled access to this material. |
| Sexual Orientation | yes | no | no | Patients of any sexual orientation are afforded the opportunity to access relevant sexually explicit material of an appropriate nature. |

5. 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.

The policy was originally introduced in response to the need to ensure consistent of practice and as part of the risk management process.

The policy applies equally to every patient and is operationally relevant for every member of staff involved in the access process.

Decision making processes are recorded within confidential patient files and material, where approved, stored securely within patient bedrooms in order to ensure access is limited to those approved.

A collaborative approach to managing access is undertaken by the Clinical Team with ongoing monitoring to ensure that regular communication takes place with the patient to support understanding of the need to balance risk with freedom of choice.

As with all aspects of access within the hospital, effective relationships with patients are key to working collaboratively to adopt a 'least restrictive' approach.

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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.

Sexually explicit material or violent materials may be more expensive than other publications/DVDs. Patients transferring through the criminal justice system who receive a smaller amount of benefits may have insufficient funds to purchase materials. The hospital library does not stock such materials and patients are not permitted to share such material. Therefore, these patients may be disadvantaged when compared to those who receive a larger amount of benefits.

This income differential is as a result of current Scottish Government policy and therefore out with the control of the hospital.

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 Nursing and Operations

Date: 08/06/2023

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.

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