

Assessment Details

ID 1250

Name CSQ's - Equality Impact Assessment Form v0_2

Organization Care Inspectorate

Description

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Respondent Amanda Tough

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Creator Amanda Tough

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High Risks 0

Medium Risks 0

Low Risks 0

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Residual Risk Score 0.0

Result Approved

Result Comments

Under Review (Jacqui Duncan - Approved) ;

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Assessment Questions

1 General Information

1.1 Your Equality Impact assessment relates to the following processing activity

Response

Adult's Scrutiny: Surveys of adults, and their service providers, in furtherance of scrutiny and/or assurance and/or improvement | Adults (Regulated)

Justification

None

1.2 Project process or initiative

Response

Change to an Existing Policy

Justification

None

1.3 Details of Policy

Response

Prior to Covid we had a number of ways to gather the views of people who use care services in Scotland. During the pandemic these had to be changed due to Public Health advice. The advice was that we do not use paper which went between people as this was an infection risk.

We developed the use of Microsoft questionnaires that people could access via computers.

Since we have moved out of the pandemic back to business as usual we have not re-introduced paper questionnaires which enable people to comment on the care they receive. We had commenced a review of all paper questionnaires prior to Covid in terms of content and how we could streamline the process which is resource intensive. The new questionnaires were never developed due to Covid and we have not maintained our older ones. However, the work has been done and this can be used to develop new questionnaires while also considering any learning from Covid.

During Covid we introduced MS forms where we sent a link to people in services who could access and complete questionnaires. This worked well for staff and some relatives but not people living in care homes and many carers which was the main focus of activity at this time. In care at home this approach does not work and a recent example was that less than 5% of people who used a HSCP care at home services had an email address. Therefore they could not access the questionnaires or comment on the service and the care they receive.

It was therefore essential the paper questionnaires were reintroduced so we could hear the views of people experiencing care .

1.4 Information Asset Owner?

Response

Care standard questionnaires (CSQs) | Intelligence

Justification

None

1.5 Business Process Owner

Response

Care standard questionnaires (CSQs) | Intelligence

Justification

None

2 Further details

2.1 Please select the criteria which best relates to your policy, process or initiative

Response

- ☒ Participation and Equalities ☐ Service Delivery / Service Design ☐ Scrutiny and Assurance
☐ Corporate Policy/Plan

Justification

None

2.2 Who does the policy affect?

Response

- ☒ People who use care services

Justification

None

Comments

Amanda Tough

this will also include care service providers

2024/03/27 17:12

2.3 What is the aim of your policy?

Response

To develop paper care survey questionnaires (CSQ) that enable people experiencing care to express their views on their service .

2.4 Why is the change required?

Response

This changed is required to ensure that people who experience care and care experienced young people have various formats to express their views on their service.

Having only one approach e.g. MS forms excludes people who do not have access to a digital device such as a laptop, smart phone.

We are further more breaching the duties under the Equality Act by not ensuring we adapt processes to enable all people with protected characteristics to have their needs met. We are discriminating against people.

2.5 What outcomes do you want to achieve?

Response

1. Internally this ensures that we live our values and we have processes to hear the views of people who use services and their loved ones in Scotland. It enables our work to be aligned to equality legislation and ensure we are working to the Health and Social Care Standards of people being involved in their own care and their voices being heard.
2. External people who use services and carers views and opinions will be valued. They will be listened to and when we regulate services they will see how their views and information about the service have shaped the outcomes for the service.

2.6 What barriers are there to achieving these outcomes?

Response

- Resources will be required and the allocation of a dedicated time.
- Communication Team Support – this will include advice on questions and the look of the forms. Also how we access those in other language or easy read.
- Printing these / posting cost – ongoing finances to do this
- Business support to send out and collate questionnaire qualitative data (as they did before Covid)
- Scrutiny and Assurance Support for content of questionnaires – to provide advice content and process and to continue to support.
- Intelligence team to advise if what is gathered meets intelligence needs.
- Another barrier could be that the provider does not circulate the CSQ's to the relevant people.

2.7 Who is the policy, going to benefit and how? (and who, therefore, doesn't and why?)

Response

It benefits people experiencing care , in that it ensures that our scrutiny of care services takes account of their views . It enables us to see the service through their lens and this enables us to identify improvements that are person centred and benefit people who use the service.

2.8 When is the change due to be implemented?

Response

2023/10/31

2.9 What other Care Inspectorate policies or projects may be linked to or affected by changes to this policy? e.g. the Corporate Plan, the Equality Outcomes, Directorate Plan, or any other relevant strategies.

e.g. the Corporate Plan, the Equality Outcomes, Directorate Plan, or any other relevant strategies.

Response

As an organisation we promote that we are outcomes led, promote and listen to people with lived experiences and have KPIs that rely on this data to be met. We have many documents which state this. Please see some extracts below.

In our Corporate Plan we state the following:

Involving and engaging those who experience care

Outcomes for the those in Scotland who experience care are at the heart of everything that we do. We are passionate and committed to improving the quality of care, support and early learning experiences for those who use services, which will contribute to our vision for world-class social care and social work.

We will continue to listen to and hear the views of those who experience care, their families and carers and act upon these views, protecting rights and providing public assurance about the quality of care in Scotland.

We will build upon our work to encourage and facilitate feedback from those experiencing care and their communities and review our methods of engagement to allow more to have their say.

Our Values

Person-centred: we will put people*, compassion and kindness at the heart of everything we do.

Fair: we will act fairly and consistently, be transparent and treat everyone equally.

Respectful: we will be respectful in all that we do.

Integrity: we will be impartial and act to improve care for all those in Scotland.

Efficient: we will provide the best possible quality and public value from our work.

Equality: we will promote and advance equality, diversity and inclusion in all our work and interactions

Strategic Outcomes

High Quality Care for All

Infants, children, young people, adults and older people experience high-quality services and support whenever and wherever it is needed. This care and support promotes their individual rights, needs and choices to support their wellbeing.

Our scrutiny, assurance and quality improvement support activity will drive improvement in the quality of care that infants, children, young people, adults and older people experience and support their health and wellbeing. We support the delivery of high quality care, support and learning services through our registration, inspection, and monitoring activity alongside the handling of complaints and gathering feedback from those who experience care and those who care for them. We will champion self evaluation, continuous quality improvement and the sharing of good practice.

We will enable the voices of those experiencing care to be listened to and heard, and support them across all sectors.

Improving Outcomes for ALL

Key Outcome Indicators X % of people telling us they are happy with the quality of care and support they receive

Everyone's Rights are Respected and Realised

Infants, children, young people, adults and older people experience tailored, outcome focused care and support that reflects their rights, needs and wishes, in line with the Health and Social Care Standards. Those experiencing care are listened to and able to influence their individual care and support. Throughout all our work, we will ensure that the Health and Social Care Standards and all other relevant best practice are central to everything we do.

We will ensure our approach upholds and protects human rights in Scotland, supports the United Nations Convention on the Rights of the Child, and keeps The Promise. We will take cognisance of the second Scottish National Action Plan for Human Rights (SNAP 2) that is currently under development with the Scottish Human Rights Commission.

Our scrutiny and assurance work will continue to report on the extent of how an individual's human rights are supported, and how our scrutiny, improvement and delivery partners are promoting personalisation.

We will continue to review the methods we use to encourage and facilitate feedback from as wide and diverse a group as possible of people experiencing care and the public about care and what needs to be improved

Key Outcome Indicators

X % of people telling us they make decisions about their own care

We are further more breaching the Equality Act by not ensuring we adapt processes to enable all people with protected characteristics to have their needs met.

We are discriminating against people.

Improvement and Involvement Strategy 22-25

We now have in place a Improvement and Involvement Team developed post Covid.

The team has an Improvement and Involvement Strategy and it makes the following comments below:

Involvement and equalities team

The involvement and equalities team ensures quality improvement, co-production, equality and fairness are integrated into all our work across the organisation.

Involvement and equality are at the heart of all we do and support the realisation of our vision for world-class care. This team support a cohort of Care Inspectorate volunteers.

We have a duty to further improvement in the quality of social care and social work, and our volunteers and the involvement of those who experience care, many of whom will have protected characteristics or face disadvantage and exclusion, are critical to this work.

3.1 Do you think that the policy impacts on people because of their age?

Age- applies to people of all ages, younger older, children

Response

☒ Yes

Justification

None

3.2 Eliminating unlawful discrimination, harassment and victimisation

Please include a justification for your answer

Response

☒ Positive

Justification

By having a paper based Care survey Questionnaire in place, we are providing a variety of methods available for people experiencing care to express their views during the inspection process.

If we only had one method, we could be potentially be discriminating older people who may not have access to a digital device or have not had the support to become familiar / comfortable using on line forms.

This can also be the case for children and young people people who cannot access a digital based form , as they do not access to a personal device.

3.3 Advancing equality of opportunity

Please include a justification for your answer

Response

☒ Positive

Justification

We are advancing the opportunity for people of all ages to be able to express their views on their quality of care and support. By having a variety of options we are ensuring that nobody is excluded from expressing their views .

3.4 Promoting good relations among and between different age groups

Please justify your answer

Response

☒ None

Justification

There is no evidence to suggest that paper Care survey Questionnaires will affect the development of positive or negative relationships among different age groups. Nevertheless, utilising various methods to gather opinions offers valuable feedback from individuals of diverse ages, which can enhance our work by helping us:

- Foster good relations across various age groups
- Address prejudice
- Encourage understanding of differences

3.5 If you answered negative to any of the age related questions above, please give details as to how you will mitigate this?

Response

N/A

4 Potential Impacts - Disability

4.1 Do you think that the policy impacts on people living with a disability?

Disability- you have a physical or mental impairment that has a 'substantial' and 'long-term' negative effect on your ability to do normal daily activities.

Response

☒ Yes

Justification

None

4.2 Eliminating unlawful discrimination, harassment & victimisation

Please justify your answer

Response

Not sure

Justification

By having a paper Care Survey Questionnaire as an option for people with a disability in an easy read format , as we have suggested, can be accessed by people who require support with literacy, or learning disability.

For other disabilities including people living with a visual impairment, dyslexia, having a paper questionnaires being available will not necessarily the best option available for them, and having a web based form maybe their preference , as the MS form has the option to be read out aloud.

Having both options available will be down to individual choice. Having a choice, as opposed to one option is positive.

We are exploring various options available to enable the views of disabled people who are disabled in regulated services. We recognise that we could be discriminating disabled who do not have the ability to use on line, web based forms , and are aware that they are not an homogenous group , and having a variety of options available is essential.

Having just paper, or a MS form may take away that person's independence and created a barrier.

4.3 Advancing equality of opportunity

Please justify your answer

Response

Not Sure

Justification

Although some disabled people are agile adopters of technology. Disabled people may adopt different technologies. This is highly intersectional with income. Income is strongly related to access to ICT, particularly networked computers.

The paper based form will enable people living with a learning disability to express their views , as there is an intention to have an easy read version available. There is an opportunity for them to participate fully as there are photographs on the form to support the explanation of the questions .By having a paper CSQ as an option we are increasing the opportunity for people living with a disability to express their views. We are aware as organisation there is a digital divide and current research shows that

- 32% of people with an impairment do not have even the most basic digital skills.
- Of the 11 million people who do not have the ['Essential Digital Skill for Life'](#), more than half have an impairment.
- People with multiple impairments are at the greatest risk of digital exclusion.

[Disability, equality and digital inclusion - Good Things Foundation](#)

4.4 Promoting good relations among & between disabled and non-disabled people

Please justify your answer

Response

None

Justification

There is no evidence that this will have an impact on people who are living with a disability/ who are not in terms of developing positive or negative relations , by having paper Care survey Questionnaires in place.

However, having multiple ways of hearing views, provides feedback which can help to inform our work and we can help us to:

Foster good relations among and between disabled and non disabled people to:

- tackle prejudice
- promote understanding of difference

4.5 If you answered negative to any of the disability related questions above, please give details as to how you will mitigate this?

Response

We need to continue to work with people with different types of disability and not assume one size fits all .e.g. . You might assume blind people would be able to read braille but actually only 1 in 10 can, due to smartphones there just isn't the need.

We need to continue to test with people from all walks of life and with a range of accessibility needs, both physical and mental. This includes all age groups, ethnic groups, language skills, and digital abilities, as we need to ensure that everyone who has experience of care is able to complete the a CSQ if they wish.

5 Potential Impacts - Sex

5.1 Do you think that the policy impacts on men and women in different ways?

Sex- applies to men & women

Response

☐ No

Justification

None

5.2 Eliminating unlawful discrimination, harassment & victimisation

Response

☐ Not sure

Justification

There is no evidence to suggest there is any indirect discrimination based on sex. Although some older women may not feel confident in completing paperwork (this is not true of all women and depends of education, previous employment and other factors).

5.3 Advancing equality of opportunity

Response

☐ Positive

Justification

Studies have indicated that women's access to and use of ICT at home is often conditional, with a tendency to prioritise the needs of children or other family members over their own. Additionally, lone parents, who are predominantly women, are overrepresented in lower-income brackets. Providing a paper option could facilitate these women in articulating their perspectives on their care and support needs.

5.4 Promoting good relations among & between men and women

Response

☐ None

Justification

There is no evidence that this will have an impact on different sexes developing positive or negative relations , by having paper Care survey Questionnaires in place.

However, having multiple ways of hearing views, provides feedback which can help to inform our work and we can help us to:

Foster good relations among and between men and women to:

- tackle prejudice
- promote understanding of difference

5.5 If you answered negative to any of the questions relating to sex above, please give details on how will the policy be modified to mitigate this?

Response

N/A

6 Potential Impacts - Pregnancy and Maternity

6.1 Do you think that the policy impacts on women because of pregnancy and maternity?

Pregnancy & maternity- protection against maternity discrimination covers 26 weeks after giving birth – this includes treating a woman unfavourably because she is breastfeeding.

Response

☐ No

Justification

None

6.2 Eliminating unlawful discrimination, harassment & victimisation

Response

☐ None

Justification

No discrimination, harassment or victimisation has been identified on the grounds of pregnancy or maternity and this is change is not about us as an employer.

6.3 Advancing equality of opportunity

Response

☐ None

Justification

No discrimination, harassment or victimisation has been identified on the grounds of pregnancy or maternity

6.4 Promoting good relations between women who are pregnant or on maternity leave

Response

☐ None

Justification

No discrimination, harassment or victimisation has been identified on the grounds of pregnancy or maternity

6.5 If you answered negative to any of the above questions about pregnancy and maternity , please give details on how will the policy be modified to mitigate this?

Response

N/A

7 Potential Impacts - Gender Reassignment

7.1 Do you think the policy impacts on transsexual people?

Gender reassignment- transsexual, when your gender identity is different from the gender assigned to you when you were born.

Response

☐ No

Justification

None

7.2 Eliminating unlawful discrimination, harassment & victimisation

Response

☐ None

Justification

No discrimination, harassment or victimisation has been identified on the grounds of gender reassignment.

7.3 Advancing equality of opportunity

Response

☐ None

Justification

No discrimination, harassment or victimisation has been identified on the grounds of gender reassignment.

7.4 Promoting good relations between people of the trans community and non-trans people

Please justify your answer

Response

None

Justification

No discrimination, harassment or victimisation has been identified on the grounds of gender reassignment.

7.5 If you answered negative to any of the above gender reassignment questions, please give details on how will the policy be modified to mitigate this?

Response

N/A

8 Potential Impacts - Sexual Orientation

8.1 Do you think the policy impacts people because of their sexual orientation?

Sexual orientation- applies to straight, heterosexual, lesbian, gay, bisexual people

Response

No

Justification

None

8.2 Eliminating unlawful discrimination, harassment & victimisation

Response

None

Justification

No discrimination, harassment or victimisation has been identified on the grounds of sexual orientation.

8.3 Advancing equality of opportunity

Response

None

Justification

No discrimination, harassment or victimisation has been identified on the grounds of sexual orientation.

8.4 Promoting good relations between groups from all different sexual orientations

Please justify your answer

Response

None

Justification

No discrimination, harassment or victimisation has been identified on the grounds of sexual orientation..

8.5 If you answered negative to any of the above sexual orientation questions, please give details on how will the policy be modified to mitigate this?

Response

N/A

9 Potential Impacts - Race

9.1 Do you think the policy impacts people because of their race?

Race- applies to national or ethnic origin, nationality, colour, Gypsy, Travellers

Response

☒ Yes

Justification

None

9.2 Eliminating unlawful discrimination, harassment & victimisation

Response

☐ Not Sure

Justification

The paper Care Survey Questionnaires have been developed to be more accessible to people who do not have access to a digital device but it cannot be defined at the moment that having paper will have a positive impact for race.

We can provide CSQ's in preferred language and have these translated. This will however rely on people being able to recognise that this is an option and will rely on the provider to request these. This will be added in the communications sent to providers when CSQ's are sent in advance of the inspection.

This request may delay the information be ready for the inspection, but the views will still be taken into account by the inspector.

9.3 Advancing equality of opportunity

Response

☐ Not Sure

Justification

We recognise this but we have considered that the survey is only one way of communicating with people on their views of their service. During the Inspection process there is an opportunity for people experiencing care, families/ carers, and staff to express their views to an Inspector with support from translator.

This will help to ensure there are no barriers/ disadvantages connected to the protected characteristic of race, to allow people from minority ethnic communities to participate and complete a CSQ

9.4 Promoting good relations from all different races.

Please justify your answer

Response

☐ None

Justification

There is no evidence that this will have an impact on races in fostering good relations , by having paper Care survey Questionnaires in place.

However, having multiple ways of hearing views, provides feedback which can help to inform our work and we can help us to:

Foster good relations among and between people from different races to:

- tackle prejudice
- promote understanding of difference

9.5 If you answered negative to any of the above race questions, please give details on how will the policy be modified to mitigate this?

Response

N/A

10 Potential Impacts - Religion or belief

10.1 Do you think the policy impacts people because of their religion or belief?

Religion or belief- applies to people of different faiths or beliefs including people with no religion or beliefs

Response

☐ No

Justification

None

10.2 Eliminating unlawful discrimination, harassment & victimisation

Response

None

Justification

No discrimination, harassment or victimisation has been identified on the grounds of religion or belief

10.3 Advancing equality of opportunity

Response

None

Justification

No discrimination, harassment or victimisation has been identified on the grounds of sexual orientation.

10.4 Promoting good relations from all different religions, people with no religions, people with different beliefs and people with no beliefs.

Please justify your answer

Response

None

Justification

No discrimination, harassment or victimisation has been identified on the grounds of sexual orientation.

10.5 If you answered negative to any of the above religion or belief questions, please give details on how will the policy be modified to mitigate this?

Response

N/A

11 Potential Impacts - Marriage or civil partnership

11.1 Do you think the policy impacts people because of their marriage or civil partnership?

Marriage or civil partnership- married/civil partnership/mixed-sex couple

Response

No

Justification

None

11.2 Eliminating unlawful discrimination, harassment & victimisation

Response

None

Justification

This is not assessed as it applies on to Care Inspectorate employees and this is not in the scope of this assessment

11.3 Advancing equality of opportunity

Response

None

Justification

This is not assessed as it applies on to Care Inspectorate employees and this is not in the scope of this assessment

11.4 Promoting good relations people who are married or in civil partnerships

Please justify your answer

Response

None

Justification

This is not assessed as it applies on to Care Inspectorate employees and this is not in the scope of this assessment

11.5 If you answered negative to any of the above marriage or civil partnership questions, please give details on how will the policy be modified to mitigate this?

Response

N/A as this is for employees only

12 Potential Impacts - Children for whom we have corporate parenting responsibilities

12.1 Do you think the policy impacts people because they are care experienced?

Response

Yes

Justification

None

12.2 Eliminating unlawful discrimination, harassment & victimisation

Response

Positive

Justification

We know from studies carried out in during the Covid pandemic by Together Scotland Scottish Alliance for Children's Rights, that for many care experienced young people there is a digital divide . This is in terms of :

- Lack of access to hardware including laptops, tablets and smartphones.
- Lack of consistent reliable access to broadband and Wi-Fi.
- For some young people, gaps in digital literacy or confidence.

[Bridging the digital divide for care experienced young people in Scotland | Together Scotland](#)

We should not ignore this divide and we should work towards on young people having access to digital platforms to express their views. However, having a paper CSQ will provide one medium for Children and Young People to give their views. They may require support from a trusted member of staff or an advocate, and this will be ongoing work in relation to our commitments to article 12 of the UNCRC and The Promise which states *Scotland must listen to care experienced children and young adults in the delivery, inspection and continuous improvement of services and of care.*

12.3 Advancing equality of opportunity

Response

Positive

Justification

We should work towards on young people having access to digital platforms to express their views. Having a paper CSQ will provide one medium for Children and Young People to give their views. They may require support from a trusted member of staff or an advocate, and this will be ongoing work in relation to our commitments to article 12 of the UNCRC and The Promise which states *Scotland must listen to care experienced children and young adults in the delivery, inspection and continuous improvement of services and of care.*

12.4 Promoting good relations between people who are care experienced and those who are not

Please justify your answer

Response

None

Justification

We have not identified any impact

12.5 If you answered negative to any of the above corporate parenting questions, please give details on how will the policy be modified to mitigate this?

Response

N/A

13 Potential Impacts - Caring responsibilities

13.1 Do you think the policy impacts people who have caring responsibilities?

Response

Yes

Justification

None

13.2 Eliminating unlawful discrimination, harassment & victimisation

Response

Positive

Justification

We heard through feedback from one group that we consulted with that there unpaid carers often support them to complete their care survey questionnaires. They described that having their family /unpaid carer support them was beneficial.

13.3 Advancing equality of opportunity

Response

Positive

Justification

The digital divide intensifies the struggles of elderly unpaid caregivers, particularly amidst escalating living costs. Older caregivers are a group significantly affected by digital exclusion, with those over 65 having restricted internet access and those over 75 having the lowest rates of broadband ownership.

These factors contribute to challenges in accessing support services, increased financial strain, and barriers to obtaining respite or maintaining employment. Providing paper CSQs allows older carers to complete them, offering an alternative to online forms.

13.4 Promoting good relations people who have caring responsibilities and those who do not

Please justify your answer

Response

None

Justification

nothing to suggest impact here

13.5 If you answered negative to any of the above caring responsibilities questions, please give details on how will the policy be modified to mitigate this?

Response

None as this point, but we have to be aware that we cannot ignore the digital divide.

14 Child Rights and Wellbeing Impact Assessment

14.1 Which UNCRC Articles are relevant to the policy/measure?

List all relevant Articles of the UNCRC and Optional Protocols. All UNCRC rights are underpinned by the four general principles: non-discrimination; the best interests of the child; the right to life, survival and development; and the child's right to have their views given due weight.

Response

Article 12

I have the right to be listened to and taken seriously

Article 12 of the UNCRC

We are aware that we need to create questionnaires that are accessible and engaging for children, using age-appropriate language and formats. This ensures that children's voices are accurately captured and respected, adhering to Article 12 of the UNCRC, which emphasises the child's right to express their views in all matters affecting them. This will be part of the wider action plan

Article 2

Ensure that any further questionnaires that we develop, reach all children, including those from diverse backgrounds and with different needs. This promotes inclusiveness and aligns with the non-discrimination principle in Article 2 of the UNCRC.

Article 3

The CSQ is one method for the Care Inspectorate to ask children about their experiences with the care services they use. Their feedback can help identify strengths and areas for improvement, directly impacting the quality of care and aligning with Article 3, which states that the best interests of the child shall be a primary consideration.

Article 19

We ensure that the questionnaire process is confidential and safe. Children need to feel secure that their input will not lead to any negative consequences, respecting their right to be protected from harm, as outlined in Article 19.

14.2 What impact will the policy/measure will have on children's rights?

Response

Positive

Justification

It was one format that could enable a child/ young person to express their views on their service provision. We will build on this work through the participation community within the care inspectorate.

14.3 Will there be different impacts on different groups of children and young people?

Which groups of children will be affected by the policy/measure? Are there competing interests between different groups of children and young people, or between children and young people and other groups?

Response

We know from studies carried out in during the Covid pandemic by Together Scotland Scottish Alliance for Children's Rights, that for many care experienced young people there is a digital divide . This is in terms of :

- Lack of access to hardware including laptops, tablets and smartphones.
- Lack of consistent reliable access to broadband and Wi-Fi.
- For some young people, gaps in digital literacy or confidence.

[Bridging the digital divide for care experienced young people in Scotland | Together Scotland](#)

We should not ignore this divide and we should work towards on young people having access to digital platforms to express their views. Having a paper CSQ will provide one medium for Children and Young People to give their views. They may require support from a trusted member of staff or an advocate, and this will be ongoing work in relation to our commitments to article 12 of the UNCRC and The Promise which states *Scotland must listen to care experienced children and young adults in the delivery, inspection and continuous improvement of services and of care.*

14.4 How will the policy/measure contribute to the wellbeing of children and young people in Scotland?

Outline how the implementation of the policy/measure will support public bodies in Scotland to meet their duties to safeguard, support and promote the wellbeing of children in their area, with wellbeing defined by eight wellbeing indicators. The indicators are: Safe, Healthy, Achieving, Nurtured, Active, Respected, Responsible, and Included.

Response

Utilising a paper questionnaire acknowledges the various developmental stages of children and young people. This method ensures that the assessment of children's well-being is rights-based, strengths-focused, holistic, and flexible enough to consider the developmental stage and the unique complexities of each child or young person's life circumstances.

It is recognised that many young people with care experience lack access to digital devices. While this issue should be addressed more broadly, providing an alternative format for gathering their perspectives is advantageous.

The Care Survey Questionnaire serves as one approach within the regulatory framework to collect feedback from children and young people regarding their care and support.

Feedback is sought through a blend of questionnaires and other participatory methods, such as interviews, focus groups, and interactive activities, to gain a thorough understanding of the children's viewpoints.

Safe

The care surveys can help identify any risks or concerns that may affect a child's safety. This information can be used to address issues and improve safety measures.

Healthy

By gathering information on health-related issues, surveys can identify areas where children may need additional support, ensuring access to health services and promoting physical and mental well-being.

Achieving:

Surveys can illuminate the obstacles to learning and achievement. Comprehending these obstacles can inform interventions that bolster educational success and personal growth.

Nurtured:

Care survey feedback can enquire if children are getting the necessary care and nurturing, fostering their emotional and social development.

Active:

Information on children's involvement in physical activities can be collected, underscoring the significance of a healthy lifestyle and identifying chances for increased participation.

Respected:

Surveys offer a platform among many for children to express their views and experiences, respecting their perspectives and ensuring their input is factored into decision-making.

Responsibility:

Considering children's views on their responsibilities and the support they receive can promote a sense of duty and support positive relationships .

Included:

Ensuring the child's voice is heard through surveys advocates for inclusion. Recognising those who may feel marginalised can prompt specific measures to involve and incorporate all children into the community.

14.5 How will the policy/measure give better or further effect to the implementation of the UNCRC in Scotland?

This will inform Scottish Ministers' duty to report to Parliament on children's rights under the Children and Young People (Scotland) Act 2014

Response

The implementation of paper CSQs aligns with a broader organisational goal to expand our ongoing efforts in gathering the perspectives of children and young people. We are also exploring methods of providing feedback, recognising that it fosters greater involvement of children in assessing and enhancing care services, thereby reinforcing the enactment of the UNCRC in Scotland.

14.6 Have you involved children and young people in the development of the policy/measure?

Is there enough information on the views of the children and young people who will be affected by the policy/measure that enables you to make an informed assessment of impact?

Response

Not in the initial consultation which was focused on adults. It is our intention to develop a child friendly version with children and young people.

15.1 Considering the available evidence

The information you gather in this section will:

- help you to understand the importance of your policy for different equality groups,
- provide justification and an audit trail behind your decisions

The evidence base may include demographic information, academic research, service monitoring/inspection reports, service evaluation reports, user surveys, etc.

In particular, look at what existing evidence tells you about the relevant equality characteristics views and experiences of the relevant service(s); and/or what it tells you about their views of the policy proposal. Identify any gaps in the evidence base and set out how you will address these.

15.2 Which equality characteristics are relevant to support your EQIA?

Response

(Children & Young People (Scotland) Act 2014)

Justification

None

15.3 Please include the quantitative evidence and qualitative evidence you must support your EqIA on age

Response

During the Covid pandemic, we implemented MS Forms, distributing links to individuals in services who could access and complete the questionnaires. This method proved effective for staff and some relatives, but not for residents in care homes and numerous carers, who were the primary focus at the time. For Care at home services, this approach was ineffective; for instance, recently, fewer than 5% of individuals utilizing HSCP home care services possessed an email address. Consequently, they were unable to access the questionnaires or provide feedback on the service and care they received.

15.4 What does the evidence tell you about the experiences of this group (age) in relation to the policy?

Response

Certain age groups utilizing CAH/HSS Services lack email access, preventing them from completing a CSQ via an MS form. There is further work to be done around digital inclusion. The paper CSQ is only one accessible format, to support people experiencing care to give feedback

15.5 Please include the quantitative evidence and qualitative evidence you must support your EqIA on disability

Response

. We are aware as organisation there is a digital divide and current research shows that

- 32% of people with a disability do not have the most basic digital skills.
- Of the 11 million people who do not have the '[Essential Digital Skill for Life](#)', more than half have an disability.
- People with multiple disabilities are at the greatest risk of digital exclusion.

[Disability, equality and digital inclusion - Good Things Foundation](#)

We know that there is a more work to be done in this area, developing digital and inclusion. Having paper ones available, in easy read, is one approach. to try and give people with a learning disability an opportunity to give feedback on their experiences of care.

15.6 Please include the quantitative evidence and qualitative evidence you must support your EqIA on race

Response

Analysis of population data by the NRS suggests that Scotland is becoming increasingly diverse in terms of ethnicity and religion. However, national data on the ethnic groups of social care recipients is scarce. In 2020/21, 72% of social care support recipients were White, consistent with previous years, but ethnicity was unknown or unprovided for another 26%, according to 'Insights in Social Care: Statistics for Scotland'.

Research conducted by the ALLIANCE and Self Directed Support Scotland (SDSS) has identified barriers to social care support for Black and minority ethnic individuals, including challenges in accessing information and advice, as well as cultural awareness and understanding. These issues were especially pronounced among Black and minority ethnic women, potentially linked to lower English fluency within some communities.

In light of this, it is acknowledged that a paper-based format will not suffice for everyone, necessitating the adaptation of Customer Satisfaction Questionnaires (CSQs) and the consideration of alternative feedback methods in preferred languages. A translation service is available and is currently under review as part of the broader CSQ initiative.

[9. Race - National Care Service - adult social care: equality evidence review - gov.scot \(www.gov.scot\)](#)

15.13 Please include the quantitative evidence and qualitative evidence you must support your EqlA on care experienced children

Response

Studies conducted during the Covid pandemic by Together Scotland and the Scottish Alliance for Children's Rights have shown that many care-experienced young people face a digital divide. This manifests as:

- A lack of access to hardware such as laptops, tablets, and smartphones.
- An absence of consistent, reliable access to broadband and Wi-Fi.
- - For some young people, there are also gaps in digital literacy or confidence..

[Bridging the digital divide for care experienced young people in Scotland | Together Scotland](#)

The digital divide should not be overlooked, and efforts must be made to ensure young people have access to digital platforms to voice their opinions.

Nonetheless, providing a paper CSQ offers an alternative means for children and young people to express their perspectives. They might need assistance from a trusted staff member or an advocate, aligning with our obligations under article 12 of the UNCRC and The Promise, which mandates that Scotland listens to the experiences of children and young adults in care when delivering, inspecting, and continually enhancing services.

15.14 Please include the quantitative evidence and qualitative evidence you must support your EqlA on children's rights

Response

no data available

15.15 Please include the quantitative evidence and qualitative evidence you must support your EqlA on children's rights

Response

as above

15.16 Please include the quantitative evidence and qualitative evidence you must support your EqlA on people with caring responsibilities

Response

no data available

15.17 Evidence source (e.g. web link, report, survey, complaint) on age

Response

no accurate data available

15.18 Evidence source (e.g. web link, report, survey, complaint) on age

Response

no accurate data available

15.19 Evidence source (e.g. web link, report, survey, complaint) on disability

Response

no accurate data available

15.20 Evidence source (e.g. web link, report, survey, complaint) on race

Response

no accurate data available

15.27 Evidence source (e.g. web link, report, survey, complaint) on care experienced children

Response

no accurate data available

15.28 Evidence source (e.g. web link, report, survey, complaint) on children's rights

Response

no accurate data available

15.29 Evidence source (e.g. web link, report, survey, complaint) on people with caring responsibilities

Response

no accurate data available

15.30 What does the evidence tell you about the experiences of this group (age) in relation to the policy?

Response

The paper care survey questionnaires are required but we recognise that they are only one method for hearing feedback.

15.31 What does the evidence tell you about the experiences of this group (disability) in relation to the policy?

Response

The paper care survey questionnaires are required but we recognise that they are only one method for hearing feedback. We will need to consider an easy read version.

15.32 What does the evidence tell you about the experiences of this group (race) in relation to the policy?

Response

The paper care survey questionnaires are required but we recognise that they are only one method for hearing feedback. We recognise that we need to do more work in terms of race, and consider how we develop our existing resources to be more accessible. In the meantime we do offer a translation service.

15.39 What does the evidence tell you about the experiences of this group (care experienced) in relation to the policy?

Response

The paper care survey questionnaires are required but we recognise that they are only one method for hearing feedback. WE will continue to review and develop our CSQ's in line with the UNCRC and the Promise.

15.40 What does the evidence tell you about the experiences of this group (children's rights) in relation to the policy?

Response

As above .

15.41 What does the evidence tell you about the experiences of this group (people with care responsibilities) in relation to the policy?

Response

The evidence increasingly suggests that there is a rising recognition of the importance of designing surveys to be more inclusive and supportive of individuals with caregiving responsibilities, to ensure that their experiences are precisely recorded and taken into account when enhancing healthcare services.

16 Stakeholder engagement & consultation

16.1 Have you engaged and consulted with relevant groups?

Response

Yes

Justification

None

16.2 Please state who was engaged/consulted with

Response

Short life working group was established in April 2023, to develop new paper CSQ's based on the Health and Social Care Standards. The group was made up organisational representation from the following areas of the organisation.

- Chair Amanda Tough TM Participation and Equalities Team Manager
- Participation Coordinator (responsible for supporting external consultation)
- Rep from CYP, Adults and ELC
- Rep from Business Support
- Rep from Comms Team
- Rep from Intelligence Team
- Rep from The Promise (Promise Lead within Care Inspectorate.

We consulted with two external stakeholder group who represent people experiencing care :
h [Highland Senior Citizen's Network](#), a Highland-wide network of local voices representing the interests of the more than 92,000 people in Highland aged 55+, and [TAG](#) (The Advisory Group), an organisation **run by people with learning disabilities**, who work in partnership with Key Housing. Both organisations have supported us to look at the layout of the questionnaires, the language and the accessibility of the form. Their input has proved invaluable, and we have learned a great deal from them about what matters most to people.

16.4 How was the engagement/consultation carried out?

If other, please specify below

Response

on line meetings with Highland Senior Citizens Network

Focus group

Justification

None

16.5 Has the proposal been reviewed/changed because of the engagement/consultation?

Response

Yes

Justification

None

16.6 What did you learn from the engagement/consultation?

Response

We learned the importance of having an Easy Read version for people with learning disabilities
Simplifying the language of the questions
Changing how the responses to questions were designed. Highland senior citizens network suggested how we asked people to respond in terms of frequency was not helpful, so these will reviewed.
There was also adaptations made in relation the question relating to dignity and respect.

16.7 Have the results been shared with the people you engaged/consulted with?

Response

Yes

Justification

None

Comments

Amanda Tough

meetings have be set to go back to TAG and Highland Senior citizens network.

2024/03/02 12:11

16.8 Is further engagement/consultation recommended?

Response

Yes

Justification

None

17 Assessment outcome

17.1 Please read each of the following four statements:

- 1) No major change required. Your assessment demonstrates that the policy is robust. The evidence shows no potential for unlawful discrimination and that you have taken all opportunities to advance equality of opportunity and foster good relations, subject to continuing monitoring and review.
- 2) The policy must be adjusted to reduce impact on protected characteristic groups. You need to take proportionate steps to remove any barriers, to better advance equality of to foster good relations. You have set actions to address this and have clear ways of monitoring the impact of the policy when implemented.
- 3) Continue with the policy but it is not possible to remove all the risk to protected characteristic groups. The policy will continue despite the potential for adverse impact. You have justified this with this assessment and shown how this decision is compatible with our obligations under the public sector equality duty. When you believe any discrimination can be objectively justified you must record in this assessment what this is and how the decision was reached.
- 4) Stop the policy as this is potentially in breach of equality legislation. The policy will not be implemented due to adverse effects that are not justified and cannot be mitigated.

17.2 Which of the four statements best matches your assessment?

Response

Option 2)

Justification

None

18 Action Planning

18.1 How will you monitor the implementation of the policy?

Response

- We will monitor the policy through the data gathered from intelligence i.e if we are receiving completed paper care survey questionnaires.
- We will be able to monitor if MS forms are being used
- monitor if forms are being requested in alternative languages
- Monitor if forms are being requested / provided in an easy read format
- Regular quarterly meetings with input from scrutiny and assurance, intelligence- to be confirmed by senior management group March 2024.

18.2 How will you use the results of the monitoring to develop the policy?

Response

We will strive to create surveys that are more inclusive and supportive for individuals with care experience, ensuring their experiences are accurately recorded and taken into account in care improvements
This will require flexible options to enable people to give feedback in a way that matters to them .

18.3 When and how will you review the policy? (Please also give details of who is responsible)

Response

- monitor if forms are being requested in alternative languages - business support
- Monitor if forms are being requested / provided in an easy read format
- Regular quarterly meetings with input from scrutiny and assurance, intelligence- to be confirmed by senior management group March 2024.
- Monitor how many forms are being returned - business support
- Inspector's during the inspection routinely asking if forms have been distributed to people experiencing care - inspection teams

Data gathered from CSQ'S are built into business reporting and information is provided to the Care Inspectorate Board- intelligence team

- 18.4 Please give details of how you will monitor any adverse impact over time, and how you will consider the monitoring information gathered in relation to equality. This ensures that you understand the actual impact of the policy once implemented.

Response

We will review at the beginning of each pre inspection year. The next review will Sept 2024. We will also need to consider how many translations are being requested and look at the turn around period on this.

This is currently being looked at by Business support and communications. We will be bale to use this information to look at better solutions moving forward. This could be part of our wider digital transformation work within the care inspectorate.

19 Sign off and Approval

- 19.1 Approved by (senior manager or Executive Director)

Please state full name and job title

Response

Marie Paterson, Chief Inspector

- 19.2 Date Approved

Response

 2024/07/24

- 19.3 Review Date

Response

 2024/09/30

- 19.4 Person responsible for reviewing?

Response

Amanda Tough

20 Conclusion

- 20.1 The full Equality Impact Assessment Form is now complete.

Thank you for your time in helping the Care Inspectorate and your Information Asset Owner understand equality impact associated with your activity.

- 20.2 Do you wish to discuss any aspect of this form with the Equalities Team?

Response

☒ Yes

Justification

None

Assessment Notes