

Assessment for Relevance Form

This is a legal document stating you have fully considered the impact on the protected characteristics and is open to scrutiny by service users/external partners/Equality and Human Rights Commission

What is being assessed:

Adult Support and Protection – a new service is being planned to support the NHS A&A workforce to fulfil their duties under the ASP Act, thus effectively contributing to ASP processes protecting and safeguarding adults at risk of harm . This will include supporting and being accessible to staff via an advice service, providing expert supervision, developing a training plan and engaging in quality improvement/self-evaluation and audit activity.

As developments commence trial periods and review will be planned and governance processes followed.

The new service will support the NHS workforce and increase involvement in multi-agency collaboration with the aim of reducing risk for adults at risk of harm.

The general principles of the ASP Act are:

1. Provide **benefit** to the adult which could not reasonably be provided without intervening in the adult's affairs; and be the option that is **least restrictive** to the adult's freedom.
2. Have regard to the following:

The wishes of the adult - any public body or office holder performing a function or making a decision must have regard to the present and past wishes and feelings of the adult, where they are relevant to the exercise of the function, and in so far as they can be ascertained.

Efforts should be made to assist and facilitate communication using whatever method is appropriate to the needs of the individual. Where this communication support is not provided, reasons for this should be recorded clearly. Also, where the adult has an Advance Statement made under [Section 275](#) of the Mental Health (Care and Treatment) (Scotland) Act 2003 then this should be given due consideration.

Advance Statements should be considered as part of any care plan. Further, regard should always be had to wishes, feelings and directions recorded in powers of attorney (particularly where these follow some recommended styles in having a schedule that records wishes and feelings) and advance directives.

The views of others – the views of the adult's nearest relative, primary carer, a guardian or attorney, and any other person who has an interest in the adult's well-being or property, must be taken into account if such views are relevant. Cognisance, when weighing the merits of such views, must be taken of any possibility of undue pressure¹, or increase of risk, if the views of others are sought. It is important that the adult has the option to maintain existing family and social contacts, should they wish to do so.

The Act seeks to **provide support** additional to that of existent networks. Thus, a person, who may be an adult at risk, might have neighbours, friends or other contacts who have an interest in their wellbeing and are willing to give support (noting the caveat that consideration should be given to whether undue pressure from those contacts is a suspected or known risk factor).

	<p>Every effort should be made to ensure that action taken under the Act does not have an adverse effect on the adult's relationships.</p> <p>The importance of the adult participating as fully as possible. The adult should be enabled to participate as fully as possible in any decisions being made. It is therefore essential that the adult is also provided with support and information to aid that participation, and in a way that is most likely to be understood by the adult. Any needs the adult may have for help with communication (for example, translation services or signing) should be met. Any unmet need should be recorded. Wherever practicable the adult should be kept fully informed at every stage of the process. This includes information about their right to refuse to participate.</p> <p>That the adult is not treated less favourably – there is a need to ensure that the adult is not treated, without justification, any less favourably than the way in which a person who is not an 'adult at risk' would be treated in a comparable situation.</p> <p>The adult's abilities, background and characteristics – including the adult's age, sex, sexual orientation, religious persuasion, racial origin, ethnic group, and cultural and linguistic heritage. So as to more fully assess the abilities, background and characteristics of the adult.</p>
<p>Named Officer / Directorate:</p>	<p>Ann McArthur, ASP Lead, Public Protection, Nurse Directorate</p>

Protected Characteristics	Impact Rating Positive, Adverse or Neutral Impact	Rationale (provide evidence for your rating)
<p>Socio-economic factors such as poverty, unemployment, discrimination, poor working conditions and a lack of education can all affect an individual's ability to access services. This can also be further broken down depending on protected characteristics (listed below).</p>		
<p>Age</p> <ul style="list-style-type: none"> • Children and young people • Adults • Older People 	<p>Positive</p>	<p>The new ASP service will primarily be focussed on adults (16 years and above) although there is provision for 16-18 year olds to be protected and supported via Child Protection guidance and legislation. The intention of the service is to reduce risk for adults who may be experiencing harm/exploitation by improving the capacity of NHS A&A staff to identify harm and to follow ASP processes including making a referral and attending case conference meetings. The Child Protection service already offers a service to achieve this for children and young people 18 years and under.</p>

<p>Disability (incl. physical/ sensory problems, learning difficulties, communication needs; cognitive impairment, mental health)</p>	<p>Positive</p>	<p>The criteria set out in the legislation for ASP states <i>the adult is more vulnerable due to disability or illness</i> and so all adults at risk of harm who is or has been subject to ASP processes will have a disability. Professionals should be alert to harm where an adult relies on support or assistance from others to undertake activities of living. Supporting the workforce to have a good understanding of harm and to be vigilant around adults with a disability will be part of the core function of the new ASP service.</p>
<p>Gender Reassignment (trans)</p>	<p>Neutral</p>	<p>Discrimination of any kind including against trans individuals is a form of harm. If the other criteria for ASP is met staff would be supported to make an ASP referral.</p>
<p>Marriage and Civil Partnership</p>	<p>Neutral</p>	<p>There is no reason that people who are married or in a civil partnership should not be supported to make an ASP referral or be subject to an ASP referral if the criteria is met. ASP is for everyone and the relationship an adult is in has no impact.</p>
<p>Pregnancy and Maternity</p>	<p>Neutral</p>	<p>There is no reason that people who are pregnant or on maternity leave should not be supported to make an ASP referral or be subject to an ASP referral if the criteria is met. ASP is for everyone and being pregnant or on maternity leave has no impact.</p>
<p>Race / Ethnicity</p>	<p>Neutral</p>	<p>There is no reason that people should not be supported to make an ASP referral or be subject to an ASP referral if the criteria is met; a person's race or ethnicity should not preclude them from this. ASP is for everyone and all communities have equal rights in relation to the Act.</p> <p>Where language may be a barrier, existing organisational processes will be implemented to support the individual.</p>
<p>Religion / Faith</p>	<p>Neutral</p>	<p>There is no reason that people should not be supported to make an ASP referral or be subject to an ASP referral if the criteria is met; a person's religion or faith should not preclude them from this. ASP is for everyone and all</p>

		religions, including no religion, have equal rights in relation to the Act.
Sex (male/female/non binary)	Neutral	There is no reason that people should not be supported to make an ASP referral or be subject to an ASP referral if the criteria is met dependent on their sex. ASP is for everyone and all sexes have equal rights in relation to the Act.
Sexual orientation	Neutral	There is no reason that people should not be supported to make an ASP referral or be subject to an ASP referral if the criteria is met dependent on their sexual orientation. ASP is for everyone and individuals of any sexual orientation have equal rights in relation to the Act.
Staff	Positive	Staff will benefit from this new service development as there will be additional support, training, guidance and supervision available in relation to ASP in practice.

If you have answered adverse impact to any of the groups, a full equality impact assessment should be carried out (see flowchart).

If the policy involves a strategic decision, will it impact on socio-economic disadvantage?	Rationale (provide evidence for your rating)
People living on a low income compared to most others in Scotland	Anyone can experience harm no matter where they live however there is more vulnerability recorded in areas of low income and increased deprivation. This can be for many socio economic reasons including poverty, poor housing, unemployment etc. This new ASP service will support NHS A&A staff to more easily recognise an adult at risk of harm and follow processes designed to reduce harm and protect vulnerable individuals.
People living in deprived areas	
People living in deprived communities of interest	

If the policy involves a strategic decision you should carry out a [Fairer Scotland Duty Assessment](#).

Flowchart for Equality Impact Assessment (EQIA) Process

