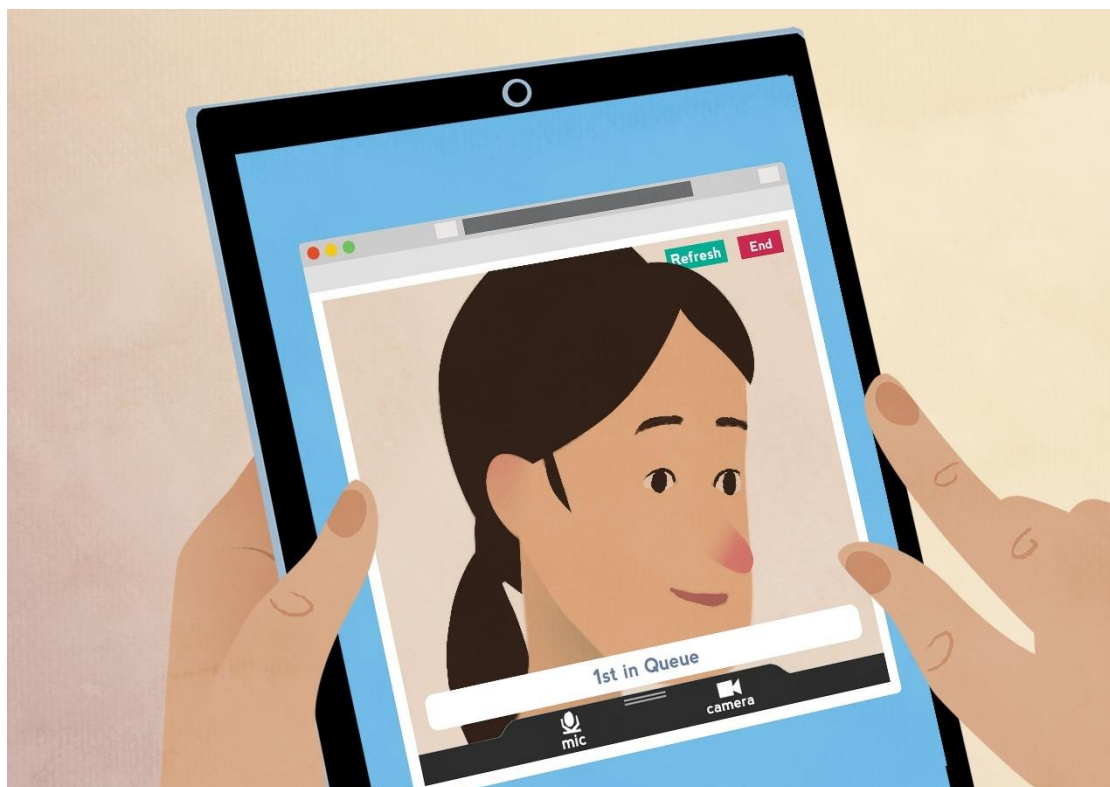


# NHS Near Me Video Appointment Service

## Equality Impact Assessment

### Appendix 1

Stage 2 Supporting evidence gathered to underpin EQIA



**Version 2- 12 May 2021**

## New sources of information since Version 1 published on 10<sup>th</sup> August 2020

Date	Organisation	Document	Relevance to protected characteristics
<b>March 2021</b>	<b>Deaf Scotland</b>	<u>Communication For All deafscotland publications Health and social care partnerships inclusive communication Scottish Election 2021</u>	<ul style="list-style-type: none"> <li>• <b>Disability</b></li> <li>• <b>Other – in terms of data collection and implications on deaf within other protected characteristics</b></li> </ul> <p>Highlights five asks including that Principles of Inclusive Communication are at the heart of everything</p>
<b>March 2021</b>	<b>SNP</b>	Manifesto	<ul style="list-style-type: none"> <li>• <b>Children and young people</b></li> <li>• <b>Poverty</b></li> </ul> <p>Commitment to give every pupil a free internet-connected laptop or tablet.</p>
<b>March 2021</b>	<b>Oxford University</b>	Evaluation of Near Me during Covid-19 in Scotland including various recommendations	<ul style="list-style-type: none"> <li>• <b>All</b></li> </ul> <p>Wide support among the public and healthcare professionals for the use of video during, and beyond, the pandemic. However, they also highlight concerns in relation to digital access and health inequalities, including poor internet connectivity, access to relevant technology, cost of mobile phone data usage, and lack of privacy or other social circumstances within the patient's home.</p> <p>Identified more work needs to be done at board and national level, through joined up government working, to address issues associated with</p>

			equity of access and help people get setup at home for the video appointment, such as building digital skills and confidence, providing relevant technology and internet connectivity, helping people get technically set up at home, and linking in with schools, libraries, and other community facilities for people to access technology outside of the home. Some work has already commenced in this regard, such as the Connecting Scotland initiative <sup>1</sup> is providing devices to people's home and improve digital literacy to improve social connection:
<b>March 2021</b>	<b>Scottish Government</b>	Digital Strategy <a href="http://www.gov.scot">A changing nation: how Scotland will thrive in a digital world - gov.scot (www.gov.scot)</a>	<ul style="list-style-type: none"> <li>• <b>All</b> Connectivity Nobody Left Behind</li> </ul>
<b>March 2021</b>	<b>Health Improvement Scotland</b>	<a href="http://hisengage.scot">Seventh Citizens' Panel report (hisengage.scot)</a>	<ul style="list-style-type: none"> <li>• <b>Age</b> Those aged 65+ were less likely to use online services.</li> </ul>
<b>March 2021</b>	<b>Scottish Government</b>	NHS Scotland and Gypsy / Traveller National Framework Agreement (approved).	<ul style="list-style-type: none"> <li>• <b>Gypsy Travellers</b> Recommendations to the NHS Boards CEOS on the 9<sup>th</sup> of March included that there is named person in each board.</li> </ul>
<b>February 2021</b>	<b>ALLIANCE</b>	<a href="#">Independent Review of Adult Social Care in Scotland- Engagement Report - Health and Social Care</a>	<ul style="list-style-type: none"> <li>• <b>All</b> Technology was a significant theme across engagement activities with a consensus that a</li> </ul>

<sup>1</sup>Connecting Scotland is a Scottish Government initiative set up in response to Covid-19 to help get every citizen online through technology provision and education, <https://connecting.scot>

		<a href="http://alliance-scotland.org.uk">Alliance Scotland (alliance-scotland.org.uk)</a> “	cultural and attitudinal shift towards technology is needed.
<b>December 2020</b>	<b>Scottish Government</b>	COVID-19 – Framework for Decision Making: Impact Assessment <a href="https://www.gov.scot">COVID-19: Equality and Fairer Scotland Impact Assessment (www.gov.scot)</a>	<ul style="list-style-type: none"> <li>• <b>Disability</b></li> </ul> <p>In line with the NHS mobilisation plan the increased expansion of a variety of health and social care support services will be of benefit to disabled people. However, reduced public transport to get to face to face appointments and the need for access to specialist IT technology to access video appointments may be difficult for some disabled people. For others, being able to contact the GP and health specialists from home may have positive impacts reducing the stress, expense and inconvenience of attending in person.</p>
<b>September 2020</b>	<b>TEC</b>	Findings from public engagement <a href="#">Findings from public engagement (June to August 2020)</a>  Note findings from engagement with specific groups.	<ul style="list-style-type: none"> <li>• <b>All</b></li> </ul> <p>Widespread support but also highlighted problems of poor connectivity, technology access, mobile data allowance and availability of private space which could impede care quality or access.</p> <p>Additionally, quality of the call and usability was found to have a significant impact on patient reported outcomes in terms of their ability to manage and cope with their condition.</p>
<b>August 2020</b>	<b>Scottish Refugee Council</b>	<a href="https://scottishrefugeecouncil.org.uk">Covid-impact-survey.pdf (scottishrefugeecouncil.org.uk)</a>	<ul style="list-style-type: none"> <li>• <b>Race, gender, age, socio-economic</b></li> </ul> <p>Respondents pointed to a lack of access to suitable devices and broadband as a significant problem for refugees during lockdown. Whilst access to smartphones was widespread, access</p>

			<p>to tablets and/or personal computers of any sort was far more limited.</p> <p>Digital poverty was the area of need that shows the highest increase in organisational concern</p>
<b>June 2020</b>	<b>Inspiring Scotland</b>	<p>Digital Exclusion in Scotland  <a href="https://inspiringscotland.org.uk">PowerPoint Presentation (inspiringscotland.org.uk)</a></p>	<p><b>All</b>  Overview of current Policy and Support Landscape</p>
<b>June 2020</b>	<b>University of Glasgow</b>	<p>Report 36 GPs at the Deep End - General Practice in the time of COVID-19. 2020.  <a href="https://www.gla.ac.uk/media/728033_smxx.pdf">Media 728033 smxx.pdf (gla.ac.uk)</a>  (which serve socio-economically deprived populations)</p>	<ul style="list-style-type: none"> <li>• <b>Race, gender, age, socio-economic</b>  Face to face consultations is still essential for many patients with complex problems and for those unable to access or use remote consultations effectively.</li> </ul> <p>Unresolved issues of poverty and financial hardship, including access to appropriate (up to date) computing/mobile devices and internet/mobile data allowances.  There are significant concerns for women's mental health and child wellbeing as more women stay at home to look after children, losing their financial security and independence</p>

Characteristic <sup>2</sup>	Evidence gathered and Strength/quality of evidence	Source
AGE	<p><b>Demographics Data</b> Those aged 65 years and older make up 19% of the population in Scotland. This has increased by over 37% in the last 30 years. The working age group (aged 16-64 years) make up 64% of the population. Children (aged 0-15 years) make up 17% of the population.</p> <p><b>Digital Communication Related to Age</b> A recent survey found that age has the biggest impact on whether people are online. Digital engagement decreases as age rises, with the over 70s particularly less likely to engage digitally (<a href="#">Lloyds Bank, May 2020</a>). 100 percent of young people aged 16-24 use the internet (<a href="#">Scottish Government 2019</a>).</p> <p><b>Scottish Household Survey 2016</b> In 2016, one per cent of adults aged 16 to 24 reported not using the internet, compared to 28 per cent of those aged 60 to 74 and 67 per cent of those aged 75 and over. The method of accessing the internet also varies with age, for example, 93 per cent of 16 to 24-year olds use a mobile phone, compared to 45 per cent of those in the 60-74 years bracket. There is a clear relationship between age and internet use, with lower usage rates among older people.</p> <p><b>Engagement with Key Organisations</b> The implementation of this service will have some impact on age both in terms of benefits and barriers.</p> <p><u>Age/frailty</u> Benefits for frail/ older patients and their carers could be reduced travel time, discomfort and stress and disruption. Near Me is particularly beneficial for</p>	National Records of Scotland Mid-year Population Estimates 2019

<sup>2</sup> Refer to Definitions of Protected Characteristics document for information on the characteristics

	<p>those individuals shielding, have mobility issues, those who are nervous about travel, during COVID-19 outbreak, breathless or in pain.</p> <p>Consideration has been given to ensuring older people have the right technology and knowledge of how to undertake a video consultation. Work is being piloted through Connecting Scotland and SCVO to support people, who for whatever reason, are digitally excluded.</p> <p>Public Health Scotland are currently exploring scope of digital exclusion within Scotland and are looking to develop appropriate mitigation plans to align with service remobilisation and recovery plans.</p> <p>There is evidence to suggest that the service and type of appointment will impact older patients' willingness to use Near Me. For example, may not want to use Near Me if it is a significant health issue.</p> <p>There are concerns that use of Near Me may further impact on the social isolation of some older people, as there will be less interaction within the community.</p> <p><u>Younger Age</u> Confidentiality is a key barrier to younger people using Near Me. Often younger people are in a house with others and may have concerns about others listening to their appointment.</p> <p>Near Me also works better than telephone consultations for paediatrics and reduce the need to travel to appointments which can be problematic.</p> <p>We must also be alert to the experiences of young people facing disadvantage. <a href="#">Who Cares? Scotland has highlighted concerns</a> that many of the care-experienced young people it supports lack the appropriate technology and/or access to home broadband to participate in online meetings.</p>	<p>EQIA Workshop and broader engagement with key organisations</p>
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	<p>Feedback has been provided by young people, including through the Young Scot organisation. They commented on the website; contributed to Frequently Asked Questions and their general thoughts. They liked that it would offer choice and benefits of continuity of care e.g. if away from home such as for education and training.</p> <p>There are potential benefits for young carers by being able to provide support at home.</p>	
<p><b>DISABILITY</b></p>	<p><b>Demographic Data</b>          Around 42% of households in Scotland contain at least one person who is long-term sick or disabled. This figure covers all household members, including children.</p> <p>Around 25% of adults in Scotland reported a limiting long term physical or mental health problem. Of these 27.1% were female and 22.1% were male. Disabled people face many barriers usually due to financial issues, physical accessibility and a lack of understanding regarding the variety of issues that they face (<a href="#">Attree et al 2011</a>).</p> <p>For some disabled and/or older people, however, digital methods may provide opportunities to participate without the common barriers of having to travel far or sit/stand for long periods of time (<a href="#">Edwards 2001</a>).</p> <p>Near Me is accessible for the majority Deafened/Hearing (355,000 &amp; 700,000 respectively) loss. There are benefits for deaf patients as Near Me can be undertaken with a BSL interpreter or electronic note taker. This is particularly relevant with Covid-19 due to the use of face masks.”</p>	<p>Scottish Household Survey 2016</p> <p>Scottish Surveys Core Questions 2020</p> <p>EQIA Workshop and broader engagement with key organisations</p> <p>Statistics and Reports from deafscotland  <a href="https://deafscotland.org/">https://deafscotland.org/</a></p>



	<p>There is a specialist service in place through contact SCOTLAND that offers BSL video relay and can extend to video interpreting for BSL users living in Scotland. That or other suppliers are in place or being put in place in line with BSL Plans across Scotland. (Result of BSL (Scotland) Act 2015. Many reflect the need to offer other sign language access too, depending on the needs in their area.</p> <p>Both video relay and video interpreting are available at local Health Board level and different Boards have different contracts in place for reasonable adjustments. For Example, NHS Greater Glasgow and Clyde can offer online, video relay and video interpreting, electronic notetaking, and braille access through the contact SCOTLAND supplier.</p> <p>There are some issues about standards for interpreting BSL/English and the use of online interpreting to be resolved with BSL users and Sign Language Interpreters/Professional Bodies.</p> <p>Specialist responses are in place for 4,000 Deafblind residents in Scotland, most requiring tactile, hands-on communication. Some have accessibility via contact SCOTLAND or require access to Moon.</p> <p>I</p> <p>in response to the lockdown situation, the Scottish Commission for Learning Disabilities (SCLD) <a href="#">identified an opportunity</a> to connect with their members on Facebook through forming a group. They realised that many members were active on the social media platform. A variety of activities take place on the group page, including gathering people's experiences.</p> <p>It is important to note that familiarity with online platforms is a key factor in choosing how to engage with disabled people. Unfamiliarity for certain groups may create stressful situations (<a href="#">Zolyomi et al 2019</a>).</p>	<p>An estimate of the number of people in Scotland with hearing loss aged 68 years or over in 2020 (March 2020)</p> <p>Statistics – Population by Local Authority Area of Deaf People</p> <p>Statistics – BSL at home Deafness and Dementia: Predicting the future for Scotland Deafness: Predicting the future for Scotland - The Census and beyond.</p>
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	<p><b>Engagement with Key Organisations</b></p> <p>The implementation of this service will have some impact on disability both in terms of benefits and barriers. Not having to travel to appointments has the potential to reduce distress for some patients and their carers, for example, people with learning disabilities, autism, anxiety, mobility issues and chronic pain.</p> <p>There is a spectrum of hearing, visual, physical, mental and communication impairments where Near Me offers some advantages over the telephone.</p> <p>There are benefits for some deaf patients, who lip-read for instance, over the telephone or face to face appointments due to face coverings. However, more inclusive communication and guidance is required for use of Near Me.</p> <p>Lack of confidentiality has been identified as a barrier for patients with dementia and their carers, as often they do not have a private space to have a video consultation. Although it was noted that video may be more accessible than a face to face consultation. Alzheimer's Scotland are currently undertaking work on the benefits and barriers of Near Me.</p>	<p>EQIA Workshop and broader engagement with key organisations</p> <p>Virtual meetings with Scottish Commission for Learning Disabilities and service users</p>
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<p><b>SEX</b></p>	<p><b>Demographic Data</b>  Scotland had a relatively even split between sexes in 2017, with 51% females and 49% males.</p> <p>A large majority of lone parent households are headed by women and these households tend to experience high poverty rates: 34% were in poverty in 2014/15, compared with 26% of single working age women without children. For comparison, 16% of couples with dependent children were in poverty in 2014/15. These statistics have implications for child poverty, as women tend to be the main carers of children. (Sourced from the Equality Impact Assessment for the Child Poverty (Scotland) Bill).</p> <p>The service has the potential to significantly benefit single parent households, but further work is required to look at their access to the internet.</p> <p>Lone parent households often suffer from demanding schedules, which have an impact on family time. For households who are particularly “time poor” the service may have a disproportionately large impact on available time by providing a more convenient service</p> <p><b>Engagement with Key Organisations</b>  Confidentiality and domestic violence within the household may be barriers to use of Near Me.</p>	<p>NRS - Mid-year Population Estimates 2017.</p> <p>Work and Relationships Over Time in Lone-mother Families, 2017, Joseph Rowntree Foundation.</p> <p>EQIA Workshop and broader engagement with key organisations.</p>
<p><b>PREGNANCY AND MATERNITY</b></p>	<p><b>Engagement with Key Organisations</b>  If no hands-on examination is required on baby or mother, Near Me can allow the mother/mother-to-be, to complete the consultation from their own environment - to reduce unnecessary travel to a GP or hospital appointment. Especially where parking is difficult and having adequate space to exit the car with baby.</p>	<p>EQIA Workshop and broader engagement with key organisations and staff.</p>

	<p>Ad hoc feedback from Health Visitors (HV) has indicated that engagement with families via Near Me has been extremely positive and that the child's development is able to be assessed online. It also offers the HV the opportunity to assess the environment that the child would normally be living in rather than a false snapshot when attending in person.</p> <p>There are some barriers to using Near Me, as during some appointments the women needs to be on her own due to the questions asked (sexual and domestic violence), therefore difficult for the midwife to assess if the patient is not alone during consultation.</p> <p>Blood monitoring and urine analysis equipment is available to help high risk women complete tests at home to avoid travel and physically attending appointment (during COVID19).</p>	
<p><b>GENDER REASSIGNMENT</b></p>	<p><b>Demographic Data</b> In 2016, there were 20 entries in the Gender Recognition Register, a decrease of 5 since 2015.</p> <p><b>Engagement with Key Organisations</b> The transgender community are sometimes fearful of accessing local service as well as the need to travel on public transport where they can often face discrimination both verbal and physical. Being able to have appointments from their own home could have significant benefits including reducing travel. However, there are also barriers around consent, confidentiality, and home environment. It can be beneficial to have a place to go to outside of the home for an appointment. It has been raised that blurring the background may be beneficial for some individuals who might not wish professionals to see their living arrangements. The potential governance issues around this are still being considered.</p>	<p>NRS Registration Division 2016.</p> <p>EQIA Workshop and broader engagement with key organisations.</p>

<p><b>SEXUAL ORIENTATION</b></p>	<p><b>Demographic Data</b> In 2011, 2.2% of respondents to the census declared non-heterosexual sexual orientation.</p> <p><b>Engagement with Key Organisations</b> LGBTi community are sometimes fearful of accessing local service. Being able to have appointments from their own home could have benefits including reducing travel. Equally it might be beneficial to have a place to go to outside of the home.</p> <p>Confidentiality and consent were identified as potential barriers to using Near Me. It was also identified that young LGBTi community also have higher rates of mental health problems. This may impact on their use of Near Me.</p>	<p>2011 Census.</p> <p>EQIA Workshop and broader engagement with key organisations.</p>
<p><b>RACE</b></p>	<p><b>Demographic Data</b> The size of the minority ethnic population in 2011 was just over 200,000 or 4% of the total population of Scotland (based on the 2011 ethnicity classification); this has doubled since 2001 when just over 100,000 or 2% of the total population of Scotland (based on the 2001 ethnicity classification) were from a minority ethnic group.</p> <p>Older Asian people are significantly less likely to have used the internet than white people belonging to the same age groups (<a href="#">ONS 2019</a>), suggesting that there may be particular digital barriers to digital engagement of some older minority ethnic groups. It should be noted this may be true for other races, but such data has not yet been sourced though may be available.</p> <p><b>Engagement with Key Organisations</b> Several barriers have been identified impacting the minority ethnic population accessing Near Me, including higher rates of digital exclusion due to lack of access to equipment, high levels of IT illiteracy and connectivity issues. There is also a need to ensure that Near Me information is communicated in a language other than English.</p>	<p>2011 Census</p> <p>EQIA Workshop and broader engagement with key organisations</p>

	<p>Refugee/Asylum seekers were identified as a cohort who may experience difficulties accessing Near Me due to lack of device and data costs. There may also be a reluctance to use Near Me due to fear they will be identified.</p> <p><a href="#">Survey results</a> published in 2018 also suggest that the UK Gypsy/Traveller communities are more likely to be digitally excluded. People from Gypsy/Traveller communities may experience connectivity issues, as they have limited access to wifi and unlikely to have phone contracts to enable use of mobile data. This will impact access to health care via Near Me.</p> <p>For Gypsy Travellers historic lack of engagement around primary care prompting higher attendance at A&amp;E. Patient registration process to ensure it is being conducted fairly and equitably for all patients, including nomadic populations such as Gypsy Travellers, migrants, asylum seekers and people liberated from prison amongst many others. All practices should be adopting the CEL of 2018.</p> <p>Where good relationships have been established with general practitioners, Gypsy Travellers are known to travel long distances for care. Near Me may be beneficial in these circumstances, reducing the travel impact on this community but maintaining trust and continuity of care.</p> <p><a href="https://www.sehd.scot.nhs.uk/pca/PCA2018(M)10.pdf">https://www.sehd.scot.nhs.uk/pca/PCA2018(M)10.pdf</a> section 4.1 relates to travellers and 5.0 highlights need to avoid discrimination.</p>	<p>EQIA Workshop and broader engagement with key organisations</p>
<p><b>RELIGION OR BELIEF</b></p>	<p>We are not aware of any relevant existing evidence currently on religion or belief in relation to the Near Me programme.</p>	<p>Not applicable</p>

<p><b>RURAL AND REMOTE LOCALITIES</b></p>	<p><b>Demographic Data</b> Households in remote rural Scotland require significantly higher incomes to attain the same minimum living standard as those living elsewhere in the UK. This is partly due to the costs of additional travel. Households rely on online services where coverage is provided.</p> <p>The proportion of households with home internet access is highest (86%) in remote rural areas, and lowest in remote small towns (79%) Scottish Household Survey 2016.</p> <p>In a detailed study of life in low income families in Scotland, fuel and food were identified as the main spending priorities.</p> <p><b>Engagement with Key Organisations</b> One of the drivers behind Near Me being tested, evaluated, and rolled out in the north was many patients were experiencing over six-hour drives for short appointments with all the associated inconvenience. Near Me also provided a benefit to the island communities in Scotland, as they have been unable to access health care particularly during winter when ferries may be cancelled.</p> <p>People living in some rural and remote areas may experience difficulties accessing Near Me if there are connectivity issues.</p> <p>Where there are known connectivity issues, a few Health Boards have established Hubs and local clinics for patients to attend their Near Me appointment.</p>	<p>A Minimum Income Standard for Remote Rural Scotland, 2013.</p> <p>Poverty and the Cost of Living: An Evidence Review, 2014.</p> <p>Extensive public consultation by NHS Highland in Caithness in 2017/18</p> <p>EQIA Workshop and broader engagement with key organisations.</p>
<p><b>SOCIO-ECONOMIC BACKGROUND</b></p>	<p><b>Demographic Data</b> There is a strong relationship between the Scottish Index of Multiple Deprivation (SIMD) and internet uptake in Scotland. In 2018, 69 percent of households with an income of less than £10,000 had internet access at home (cf 63% in 2016). In comparison, almost 99 percent of households with an income of £40,000 and over had home internet access (23 percent of adults in</p>	<p>Scottish Government 2019)</p> <p>Scottish Government 2020).</p>

	<p>social rented housing reported not using the internet in 2018, compared to only five percent of those in private rented housing, and 12 percent of those who owned their own homes.</p> <p>Protected characteristics are associated with higher rates of relative poverty, e.g. disabled people. People from minority ethnic (non-white) groups are also much more likely to be in relative poverty after housing costs compared to those from the 'White – British' group (Scottish Government 2020). Due to minority ethnic people being overrepresented in low-paid and 'gig economy' employment they will be disproportionately impacted by a lack of financial support for people in this sector. A Citizens Advice Scotland (2018) survey found that the most common barriers preventing respondents from using the internet were financial, with broadband costs and phone and data costs considered barriers.</p> <p>While, libraries can provide free Wi-Fi, access to computers and other technology, widespread closures across the country over time will have had an impact on access.</p> <p>Learning from Healthcare Improvement Scotland Case Study: <a href="#">Using NHS Near Me to provide health services to people experiencing homelessness NHS Lothian, Edinburgh Access Practice</a> should be shared and implemented.</p>	Citizens Advice Scotland (2018).
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