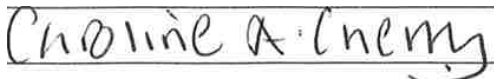


## Argyll and Bute HSCP Equality and Socio-Economic Impact Assessment (EQIA)

### Section 1: About the proposal

<b>Title of Proposal</b>	
Dementia Services Redesign	
<b>Intended outcome of proposal</b>	
Investment in Community Dementia services to support individuals with dementia to remain at home or in a homely care setting within their local community and to avoid hospital admissions. To use our resources more effectively to support more clients at home and avoiding hospitalisation. As part of the redesign, it is proposed that Knapdale Ward be closed.	
<b>Description of proposal</b>	
To decommission Knapdale Ward and investment in sustainable community dementia services across Argyll & Bute (excluding Helensburgh & Lomond)	
<b>HSCP Strategic Priorities to which the proposal contributes</b>	
This forms part of mental health redesign work but also supports the development of effective services for older adults.  This work underpins the main strategic aim of the Partnership, to support adults to remain living well at home within their own communities.	
<b>Lead officer details:</b>	
Name of lead officer	<b>Caroline Cherry</b>
Job title	<b>Head of Adult Services</b>
Department	<b>Older Adults and Community Hospitals</b>
<b>Appropriate officer details:</b>	
Name of appropriate officer	<b>Nicola Gillespie</b>
Job title	<b>Local Area Manager</b>
Department	<b>Mental Health Services</b>
Sign off of EQIA (Head of Service):	
Date of sign off:	26.01.2020
<b>Who will deliver the proposal?</b>	

Work on this project will be led by a newly formed Dementia Redesign Group

## Section 2: Evidence used in the course of carrying out EQIA

### Consultation / engagement

- Dementia Services Review Short Life Working Group – 6/52 meetings to develop options on future of services (October 2018 – October 2019) – membership included staff from community teams and inpatient services, carers, carers centre, Third Sector, NHS Local Area Management, Dementia Champion, Dementia Specialist Improvement Lead, Allied Health Professionals
- Mental Health & Dementia Steering Group
- Transformation Board
- Senior Leadership Team

### Data

Scotland's National Dementia Strategy 2017-2020  
 The Health and Social Care Delivery Plan (2016)  
 National Clinical Strategy (2016)  
 The Public Bodies (Joint Working) Scotland Act 2014  
 Transforming Specialist Dementia Hospital Care Alzheimer Scotland (2018)

### Other information

Inpatient data obtained from Argyll & Bute Information department  
 Case load data obtained from dementia community teams  
 Shetland Dementia Strategy (2015 – 2018)

### Gaps in evidence

Nil of note

## Section 3: Impact of proposal

### Impact on service users:

	Negative	No impact	Positive	Don't know
<b>Protected characteristics:</b>				
Age			X	
Disability		X		
Ethnicity		X		
Sex		X		
Gender reassignment		X		
Marriage and Civil Partnership		X		
Pregnancy and Maternity		X		
Religion		X		
Sexual Orientation		X		
<b>Fairer Scotland Duty:</b>				
Mainland rural population			X	
Island populations			X	
Low income			X	
Low wealth		X		
Material deprivation		X		

	Negative	No impact	Positive	Don't know
Area deprivation		x		
Socio-economic background		x		
Communities of place?		x		
Communities of interest?		x		

**Impact on service deliverers (including employees, volunteers etc):**

	Negative	No impact	Positive	Don't know
<b>Protected characteristics:</b>				
Age		x		
Disability		x		
Ethnicity		x		
Sex		x		
Gender reassignment		x		
Marriage and Civil Partnership		x		
Pregnancy and Maternity		x		
Religion		x		
Sexual Orientation		x		
<b>Fairer Scotland Duty:</b>				
Mainland rural population			x	
Island populations			x	
Low income		x		
Low wealth		x		
Material deprivation		x		
Area deprivation	x			
Socio-economic background		x		
Communities of place?		x		
Communities of interest?		x		

**If any 'don't knows' have been identified, at what point will impacts on these groups become identifiable?**

N/A

**How has 'due regard' been given to any negative impacts that have been identified?**

There will be staff within Knapdale who live in the area who will be affected by the de-commissioning of Knapdale,

**Section 4: Interdependencies**

**Is this proposal likely to have any knock-on effects for any other activities carried out by or on behalf of the HCSP?**

Yes

**Details of knock-on effects identified**

Closure of Knapdale ward will result in the requirement to redeploy a number of staff. There will be opportunities to redeploy some of those staff to newly developed community posts and others will be redeployed as per the NHS Organisational change policy.

There will be implications for patients and families/carers having to utilise out of area placements for those requiring onward care who will not have access to dementia assessment beds locally, however Knapdale serves all of Argyll and Bute with exception to the Helensburgh area. The beds are not long stay beds and are for assessment, the majority of patients accessing inpatients are admitted already with a diagnosis of dementia so this pathway will not change.

The assessment beds provided are in Mid Argyll only and there are no assessment beds available currently in other Argyll and Bute localities (C&B, OLI, Kintyre and Island populations). The current established pathway for onward referral for long term care tends to present to out of area/other localities due to low numbers of residential and nursing homes available within these localities.

There are no current equitable service provision for assessment available throughout Argyll and Bute localities, therefore providing more flexible and robust community services should assist in reducing the requirement for an assessment admission away from home localities. The path for long term care has not changed through this proposal due to current provision of residential and nursing care homes. It is envisaged that the proposal of multi-disciplinary robust community teams will positively impact on the need to transition those in need of assessment to inpatient wards and will assist in in-reach to community hospitals and care homes that require additional support and training to accommodate stress and distress exhibited by those living with dementia. A longer term and related part of this work will be to review the suitability of our care homes within Argyll and Bute to support adults with dementia.

## Section 5: Monitoring and review

<b>How will you monitor and evaluate the equality impacts of your proposal?</b>
---

A detailed project plan will be developed which includes monitoring and evaluation of this project.
---

## Section 6: Publication

<b>How will you publish this EQIA?</b>
--

This EQIA will be published on the NHS Highlands website and other social HSCP social media platforms
---