

East Dunbartonshire Assistive Technology – Ethical Considerations and Good Practice Guide



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Introduction:

This guide sets out the principles and provides guidance on the assessment for the use of assistive technology.

Assistive technology can be used to enhance community alarm systems. Depending on the type of technology provided, it can send automatic alerts to services, staff, families, carers, fire brigade and others in the event of any incidents or crises occurring. Some technology can be used to monitor the daily living activities and movements of individuals within their own home or homely setting.

While assistive technology offers potential benefits for service users including promoting independence and safeguarding, it has the potential to threaten individuals' privacy and control. There are a variety of assistive technology sensors, which can enhance service user's support packages and assist the management of potential risks, but care has to be taken to ensure that the use of any technology solutions is authorised by the service user and/or the service user's legal representative and does not impinge on their human rights.

As reported in the SCIE's Report 30 (Francis and Holmes, 2010) an 'ethical framework' helped to clarify potential problems associated with assistive technology. The framework is based on four principles:

Autonomy: the individual having the ability to make choices. When service users depend on professionals and/or family for their support or for managing risks, the provision and installation of an assistive technology package can encourage or limit independence.

Beneficence: this is the principle of working for the benefit of the service user. Assistive technology, including environmental controls and sensors, can provide assurances and peace of mind for service users and their families. It can increase confidence and encouragement for the person to continue living in the community and has the ability to reduce dependence on unpaid carers.

Non-Maleficence: this is the principle of doing no harm. As explained in the principle of 'Beneficence' there are a number of benefits to utilising assistive technology to increase independence and confidence however, there is also the ability to expose service users to risk. Assessment and support planning which considers assistive technology as a possible factor has to ensure that it achieves a balance between ensuring safety and infringing on privacy and other human rights.

Justice: assistive technology should be provided so as to balance the needs of the individual with those of the wider community.

(Francis and Holmes, SCIE Report 30, 2010)

Considering Using Assistive Technology?

There are a number of issues that need to be deliberated before supplying assistive technology as part of a support plan. Consideration has to be given to personalisation, choice, control, risk management, risk enablement and other potential solutions.

The use of assistive technology can raise issues about risks. These risks can be practical, technical, ethical and financial in nature.

Practical and Technical Issues?

Assessors must be clear about both the potential abilities and limitations of the assistive technology. Does the technological solution have the ability to reduce dangerous situations faced by the service user and their carers?

Assessors needs to find a balance between the wish to ensure privacy, dignity, respect and safety and the use of assistive technology to address potential risks. For example: a technology sensor that monitors a front door being opened at pre-set times will send an automatic response to the Contact Centre and/or family, possibly resulting in a response visit to the service user.

While some risks may be evident in certain situations i.e. the service user going out at night; getting out of bed in the middle of the night etc., the concerns expressed by third parties may not be accurate. There can be occasions when expressed concerns may be over-estimated.

It is crucial to confirm the potential risks before exploring and considering the use of assistive technology, for example:

- Reducing carer anxiety at the expense of the service user's privacy;
- Providing false reassurances;
- Unrealistic expectations from technology i.e. for example a falls sensor cannot prevent a person from experiencing a fall, however it can detect and summon assistance much quicker than if the technology was not available.

The assessment must be clear about what the service user and their carers understand about, and expect from, assistive technology. This should be reflected in the assessment and support plan. Where there are questions about the frequency or occurrence of risk, technology can also provide information about the service user's tendency to put themselves at risk and can inform support planning and consideration for longer-term use of assistive technology.

Assistive technology, while having the ability to provide an automatic notification of an event or crises occurring, cannot prevent the service user from taking the risk i.e. going outside at night, falling, unlit gas switch being left on

etc. It is the response time and actions taken thereafter that is the crucial element of providing assistive technology.

Ethical Considerations:

Assistive technology has the potential to intrude in the service user and carer's lives. Wherever possible social work and health practitioners should consult and respect the service user's wishes in relation to assistive technology. How assistive technology is operated; how the data is used; expected response to alerts; all need to be explained to the service user in an open and honest manner. If the service user is able to make an informed decision not to have assistive technology installed, their wishes need to be respected. Assistive technology should not be forced or imposed on anyone.

In cases where the service user has a cognitive impairment this requires effective presentation of information about and demonstration of assistive technology and judgement of mental capacity. The best approach to gaining consent should be determined on an individual basis and should strive to find a balance between quality of life, independence and safety. (SCIE Report 30, 2010).

Social Work and Health practitioners should refer to the Adults with Incapacity (Scotland) Act 2000. The Act aims to protect people who lack capacity to make particular decisions, but also to support their involvement in making decisions about their own lives as far as they are able to do so. Anyone authorised to make decision, or take actions, on behalf of someone with impaired capacity must apply the following principles:

- Benefit – any action or decision taken must benefit the person, and only be taken when that benefit cannot reasonably be achieved without it;
- Least restrictive option – any action or decision taken should be the minimum necessary to achieve the purpose. It should be the option that restricts the person's freedom as little as possible;
- Take account of the wishes of the person, including present and past wishes and feelings of the person, as far as these may be understood;
- Consultation with relevant others, including, the person's primary carer, nearest relative, named person, attorney or guardian etc;
- Encourage the person to use existing skills and develop new skills

www.mwscot.org.uk/the-law/adults-with-incapacity-act/principles-of-the-act

Given these principles and considerations, social work and health practitioners should consider the following factors before requesting assistive technology:

- Who will benefit from the use of the technology – the service user, their carer, and/or the service or organisation?

- Is a full risk assessment needed?
- Is the technology being considered to fill a skill gap?
- Is safety more important than privacy?
- Is the infringement on privacy justified?
- What is the risk?
- What is the likelihood of the risk occurring?
- What would assistive technology do to reduce the actual risk?
- What are the limitations of the technology?
- Is assistive technology the best option to reduce the risk to a reasonable level?
- Is assistive technology really needed?
- Does everyone involved have realistic expectations of the technology's capabilities and do they understand its limitations?
- Is everyone involved clear about the information generated from the technology and how this information will be used?
- Could the assistive technology have the impact of increasing isolation for the service user?
- Could the technology meet lower level, early intervention/prevention needs?
- Has every effort been taken to support someone to make a decision whenever this is possible i.e. involving advocacy, using communication aids etc.
- Does the person feel coerced into agreeing to the use of assistive technology to make life easier for others?

Informed Consent:

Informed consent relates directly to the principle of autonomy. (SCIE Report 30, 2010).

Where it is quite clear that the service user understands the possibilities and limitations of using assistive technology, and refuses to consent to its use, it should be made clear to the service user about the consequences (i.e. the risks) that could occur.

Where the service user is unable to provide informed consent the following should be considered:

- Is there a legitimate need to use assistive technology due to the level of risk?
- Is this the least restrictive option?
- Is it in line with the principles of the Adults with Incapacity Act and/or the Adult Support and Protection Act?
- Are the wishes of the service user being considered in the broader sense (i.e. previous expressed wishes)?
- Is there agreement from others involved i.e. Carer, GP, Family etc.?
- Is there a requirement to involve an advocate?
- Does the technology encourage the service user to use existing skills or develop new skills?

It is imperative that all decisions regarding the installation and use of assistive technology with or without the consent of the service user are recorded appropriately.

The General Data Protection Regulations (GDPR):

Transparency is a key requirement of GDPR. Staff, either employed by East Dunbartonshire Council or Greater Glasgow and Clyde Health Board will always ensure that individuals are aware of how their information is used, who will have access to it, how long it will be kept for and what rights they have over their personal information while in the relevant organisation's care. Staff should refer to their employing organisation's policies, procedures and privacy notices in relation to data protection.

Mental Welfare Commission: Decisions about Technology:

This guide provides a brief resume of factors and elements that social work and health practitioners should consider when contemplating the installation of assistive technology. All practitioners are advised to read a more detailed guidance document which is available via the Mental Welfare Commission for Scotland ('Decisions about Technology: Principles and Guidance on good practice when considering the use of telecare and assistive technology for people with dementia, learning disability and related disorders, September 2015). (www.mwcscot.org.uk/media/241012/decisions_about_technology.pdf)

If you would like additional information or clarification about assistive technology, please contact:

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