

Coronavirus (Discretionary Compensation for Self-isolation) Bill

Equality Impact Assessment (EQIA)

November 2021

This assessment relates to the Coronavirus (Discretionary Compensation for Self-isolation) (Scotland) Bill. The Bill makes temporary modifications of the Public Health etc. (Scotland) Act 2008 (“the 2008 Act”), so that Health Boards have discretion as to whether to pay compensation for self-isolation in connection with coronavirus. This impact assessment considers the proposed temporary modifications, which are a continuation of modifications that have been in place since March 2020 by the introduction of the Coronavirus Act 2020 (“the UK Act”).

Legislative Background

Legislation that was in place prior to the coronavirus (“COVID-19”) pandemic, such as the 2008 Act, was not designed to deal with the outbreak of an infectious disease on the scale of the COVID-19 pandemic. The 2008 Act contains provisions and powers relating to the control and management of infectious diseases, however the provisions were drafted with smaller scale outbreaks in mind, rather than a global pandemic. For example, the Policy Memorandum for the 2008 Act cites E-Coli as an example of infectious diseases in relation to which the powers might be used, which is not as transmissible as coronavirus, nor has it ever infected as many people in Scotland as COVID-19.

Our response to the COVID-19 pandemic has therefore been delivered by other means. We passed new primary legislation, and have made SSIs made under that legislation, to respond to the pandemic. Other than the power to make SSIs in relation to international travel, the 2008 Act has had no application to the pandemic. For example, while comprehensive systems have been put in place to reduce or prevent the spread of COVID-19, no use has been made of the quarantine provisions in the 2008 Act, which were considered not to be fit for purpose.

Similarly, the 2008 Act contains, at section 56, a duty on Health Boards to compensate people who are asked in writing by the Health Board to voluntarily quarantine, or to limit their movements or activities. Section 58 of the same Act sets out a further duty on Health Boards to compensate carers of those people and carers of people subject to an exclusion order, restriction order or quarantine order.

The modification made by the UK Act changed the duty on Health Boards to pay compensation to a discretionary power to do so, during times that Scotland is in a “transmission control period” by virtue of a statutory declaration made under paragraph 25 of schedule 21 of that Act. The statutory declaration must be revoked by the Scottish Ministers when they are no longer of the view that COVID-19 is a serious and imminent threat to public health, and that the powers in schedule 21 of the UK Act remain a suitable means to reduce transmission. If the statutory declaration is revoked, and accordingly the modifications made by paragraph 46 of schedule 21 of the UK Act cease to be of effect, at a time when people are still being asked by Health Boards to voluntarily self-isolate as a result of the COVID-19 pandemic, Health Boards will be under an obligation to pay compensation to those people and to their carers.

This Bill extends the modification for a further six months. The Bill also contains regulation-making powers to move expiry to an earlier, or later, date. Should the Scottish Ministers seek to extend the expiry date, an affirmative vote of the Scottish Parliament would be required, and the Scottish Ministers would be required to lay a statement of their reasons for why such an extension is needed before the Scottish Parliament.

Impacts of the Bill

The Bill affects people who self-isolate, following a written request from a Health Board asking them to do so, and suffer losses as a result. It also affects carers who suffer losses as a result of people they care for being asked by a Health Board to self-isolate or being subject to an exclusion order, restriction order or quarantine order.

While COVID-19 affects all parts of society, not everyone who self-isolates will suffer loss as a result. In most cases, lost income will be the most significant loss for households affected. People who are able to work from home may be able to maintain an income through a period of isolation. Some people will be entitled to contractual sick pay if they are unable to work due to self-isolation and others will be entitled to statutory sick pay (“SSP”). SSP has been adapted to apply from day one of an absence during this pandemic and is available to people who self-isolate as a result of being a close contact of someone who has COVID-19, as well as to those who have tested positive themselves. While SSP may not cover 100% of a person’s lost income, it reduces the amount lost due to being absent from work.

The people who are most likely to lose all of their income are those who cannot work from home, are not entitled to contractual sick pay and are not eligible for SSP. This is more likely to be people who work in transient or zero hours contracts, those who are self-employed, or those earning below a certain income. In addition, those on lower incomes are more likely to work in jobs which, by necessity, will see people interacting with people directly and therefore face an increased risk of contracting COVID-19 and having to self-isolate.

It follows that while the modifications in this Bill could impact on people in all parts of society, the people most impacted by the Bill are those who are on lower incomes and those who work in transient employment, on zero hour contracts or are self-employed. During the pandemic, low earners are 7 times more likely than high earners to have worked in a sector that shut down as a result of the lockdown, and those with customer facing roles are likely to have seen reductions in earnings or face job losses as they are less able to work from home¹.

For this reason, the Scottish Government has ensured that alternative financial and practical support has been in place during the pandemic for those in need. For example, the Self-Isolation Support Grant (“SISG”) provides £500 to workers who lose income as a result of self-isolating (or caring for someone who is self-isolating) and earn the Real Living Wage or less. The Grant is also available to those who are in receipt of Universal Credit (“UC”) or other low income benefits or whose family income is within 25 per cent of UC rates. This more targeted approach to financial support was considered a more proportionate response given the scale of the pandemic.

Costs of full compensation

The Scottish Government estimates that the cost of full compensation would be up to twenty times the cost of the current SISG - some £380 million in 2021/22², based on the Scottish Fiscal Commission’s (“SFC”) forecast expenditure on SISG of £19m³. This estimate assumes that compensation would apply to all losses incurred, including for those on high incomes, and would as a result be much more costly than the means-tested SISG. The estimate also depends on the number of people asked to self-isolate. While the cost of SISG would increase if the number of people asked to self-isolate turns out to be higher than assumed by SFC, the estimated cost of full compensation would increase by a higher amount.

In the absence of the modifications provided by this Bill, and by the UK Act before that, compensation for self-isolation would be provided by Health Boards which would have required substantial financial and

¹ [Sector shutdowns during the coronavirus crisis: which workers are most exposed? - Institute For Fiscal Studies - IFS](#)

² This is the cost of universal compensation for losses resulting from self-isolation, regardless which public authority made the request to self-isolate.

³ [Scotland's Economic and Fiscal Forecasts - January 2021 \(fiscalcommission.scot\)](#)

administrative resource. As detailed in the Government Expenditure and Revenue Scotland Report 2020 – 2021 (“the GERS Report”), the Scottish Government has spent £9 billion on combined health, economic and social security support as a result of the COVID-19 pandemic, with £4 billion allocated to health, public health and local government⁴. The GERS Report revealed that the Scottish Government’s expenditure is significantly higher than it was in 2020, principally as a result of the pandemic. Expenditure increased from £82.0 billion in 2019-20 to £99.2 billion in 2020-21, the largest recorded increase in public expenditure⁵.

If Health Boards were also under an obligation to pay compensation under sections 56 and 58 of the 2008 Act, we estimate that it would cost £380 million in 2021/22⁶. This represents nearly 10% of the current £4 billion budget for health, public health and local government.

In addition to the funding required to pay the compensation itself, additional funding would be required for the administration of the compensation. The administration would include processing claims for compensation, reviewing evidence of losses, issuing awards of compensation and then seeking to appoint an arbiter in agreement with a claimant if the award was not accepted.

If the costs of compensation were met by Health Boards, this would divert resources away from the provision of healthcare and could have an impact on Health Boards’ ability to respond to the pandemic. Similarly, given the scale of the costs involved, it is not clear that it would be a proportionate use of public resource to provide compensation at the scale that would be required if the modification to the 2008 Act was no longer in place

Providing full compensation to those isolating would be to the detriment of other services and Health Boards operating on the front line of the pandemic. Delivering a targeted support for isolation offer towards lowest income groups ensures that funding is directed to where it is most needed, at an appropriate cost to the public purse. . This means that essential targeting of support, to make sure that impacts are mitigated inequalities are addressed as effectively as possible, is vital to ensure value for money and the best use of public resources.

Self-Isolation support

During the pandemic, self-isolation support has been targeted at those on low incomes and includes the SISG, which is a one-off £500 payment to those earning the equivalent of the real living wage or less who lose income from self-isolation; the Local Self-Isolation Assistance Service (“LSIAS”), which is a localised service offering support with food or essential medicines delivery or social support; and the National Assistance Helpline, which anybody with enquiries relating to COVID-19 can call to receive advice and support.

The SISG has been adapted in the course of the pandemic, to provide support to larger cohorts of people and help those who need it. Eligibility for the SISG was first extended in November 2020, to include parents of those who are isolating, and was expanded again in February 2021 to include workers earning the real living wage or less, as well as those in receipt of a council tax reduction as a result of low incomes. Eligibility was also extended to include those with caring responsibilities for someone over 16

⁴ [Government Expenditure and Revenue in Scotland \(GERS\): 2018 to 2019 - gov.scot \(www.gov.scot\)](https://www.gov.scot/publications/government-expenditure-revenue-scotland-2020-21/)

⁵ <https://www.gov.scot/publications/government-expenditure-revenue-scotland-2020-21/>

⁶ This is the cost of universal compensation for losses resulting from self-isolation, regardless which public authority made the request to self-isolate.

who is asked to self-isolate, where the carer themselves meet the other eligibility criteria, and the period of time during which people could apply was extended to 28 days. These expansions have taken into account increased transmission of the virus, the increased risk of transmission for those on low incomes and the equalities impacts outlined below, in order to provide as equitable a suite of support for people who are isolating as possible.

To date, there have also been a range of other interventions, which have mitigated the impact of compensation not being available. In addition to the support outlined above, economic support such as expanded SSP from day 1 of absence from work and for close contacts, Small Business Loans, the Furlough Scheme and other support has been available to businesses and sectors particularly hard hit by the pandemic.

Policy Objective

The policy proposal is to maintain the modifications made to the 2008 Act, so that a Health Board may pay compensation to a person who receives a written request from the Board to be quarantined, be excluded from entering or remaining in a specified place or refrain from carrying on any activity or type of activity, and the carers of such a person and carers of people subject to an exclusion order, restriction order or quarantine order under the 2008 Act, but the Board is not under an obligation to do so with regard to COVID-19.

The modifications would be put in place for a limited time only. The modification would apply to requests made by Health Boards in respect of COVID-19 only, and not any other infectious diseases. It is proposed that the provisional expiry date of the modification to the power would be 31 October 2022. This date of expiry could then be extended or brought forward, if necessary, through regulations made by the Scottish Ministers.

The Scottish Government's view is that the modifications should remain in place where:

- some people were still being asked, under public health guidance, to self-isolate in certain circumstances due to Covid;
- alternative financial support for people self-isolating remains available either through the existing Self-Isolation Support Grant or another mechanism;
- the expiry of the provisions would present a significant resource burden on Health Boards at a scale not envisaged during the development of the 2008 Act.

Ministers will keep these factors under review and if they change, will consider whether the expiry date should be brought forward or extended.

Alternative Proposals

The Scottish Government has considered alternative options to the measures proposed in the Bill:

Option 1

Allow the duty to pay compensation to resume but subject to limitations

The Scottish Ministers have a power to make regulations under sections 56 and 58 of the 2008 Act to make further provision about compensation payable under those sections. We considered whether this power could be used to provide compensation on a level similar to the SISG and whether the power could be used to identify a third party that could administer the compensation. We reached the view that the power in sections 56 and 58 was not broad or flexible enough to achieve this policy aim.

Benefit

Compensation would be universal and could not be restricted to those on low incomes. There would, however, be a disparity in the compensation available to a person depending on whether they were asked to self-isolate by a Health Board (which issue around half of self-isolation requests) or a Special Health Board (such as a Public Health Scotland and NHS National Services Scotland, who operate Test and Protect). Steps would need to be taken to ensure that compensation was universally available, so that eligibility did not depend on which public authority issued a request to self-isolate.

Cost

The Scottish Government estimates that the cost of full compensation would be up to twenty times the cost of the current SISG - some £380 million in 2021/22⁷, based on the SFC forecast expenditure on SISG of £19m⁸. While some limitations imposed by regulations would reduce the cost slightly, the overall cost would be significantly higher than the SISG. The SISG is limited to £500 and is only available to those people on low incomes, whereas this proposal would make the payment universal i.e. payable to anyone who is asked to self-isolate, regardless of their income. Setting up a structure in a third party, or establishing a new body, to administer the compensation would also be costly.

Option 2

Enable the mandatory compensation power in the 2008 Act to resume

The compensation requirement under the 2008 Act could be left to resume when the modifications under the UK Act come to an end. If people are still being asked to self-isolate by Health Boards at that time, Boards would incur a significant financial and administrative liability, as outlined above. This would come at a detriment to other components of the COVID-19 response and inhibit future policy choices through cost.

⁷ This is the cost of universal compensation for losses resulting from self-isolation, regardless which public authority made the request to self-isolate.

⁸ [Scotland's Economic and Fiscal Forecasts - January 2021 \(fiscalcommission.scot\)](https://www.fiscalcommission.scot.gov.uk/forecasts/2021-22)

Benefit

Anyone who receives a written request from a Health Board to self-isolate, and carers of such people, would be entitled to full compensation for their losses. To avoid a significant disparity in entitlement to compensation depending on whether a Health Board or a Special Health Board issued the request to self-isolate, steps would need to be taken to ensure that eligibility for compensation was not dependent on whether a Health Board or other public authority issued the request to self-isolate.

Cost

The Scottish Government estimates that the cost of full compensation through the 2008 Act would be up to twenty times the cost of the current SISG - some £380 million in 2021/22⁹, based on the SFC's forecast expenditure on SISG of £19m¹⁰. This estimate assumes that compensation would apply to all losses incurred, including for those on high incomes, and would as a result be much more costly than the means-tested SISG. The estimate also depends on the number of people asked to self-isolate. While the cost of SISG would increase if the number of people asked to self-isolate turns out to be higher than assumed by SFC, the estimated cost of full compensation would increase by a higher amount.

Public health rationale for Government intervention:

The rationale for this Bill is to avoid Health Boards being subject to a substantial financial and administrative resource burden by being required to pay compensation to all people required to self-isolate.

In the absence of the modifications provided by this Bill, and by the UK Act before that, compensation for self-isolation would be paid out by Health Boards. Throughout the pandemic, Health Boards have been under significant pressure, with additional funding provided from the Scottish Government to support the response to the pandemic and ensure the provision of essential care, for which Health Boards are directly responsible at a local level.

As highlighted in the *Costs of full compensation* section above, if Health Boards were also under an obligation to pay compensation under sections 56 and 58 of the 2008 Act, we estimate that it would cost £380 million in 2021/22¹¹. As outlined, the current provision of self-isolation support is budgeted at £18.8 million by the SFC so the proposed saving of the measures within this bill is approximately £361 million. If the costs of compensation were met by Health Boards, this would divert resources away from the provision of healthcare and impact on Health Boards' ability to respond to the pandemic, all whilst they are under significant pressure.

If the money came directly from Health Board budgets, there would be less to spend on the delivery of health services for either the response to the pandemic or essential care services. If this were to come from Scottish Government budgets then money would need to be found from existing Scottish Government budgets to provide essential services and inhibit future policy choices through cost. For these reasons this is not considered to be a sustainable option.

⁹ This is the cost of universal compensation for losses resulting from self-isolation, regardless which public authority made the request to self-isolate.

¹⁰ [Scotland's Economic and Fiscal Forecasts - January 2021 \(fiscalcommission.scot\)](https://www.fiscalcommission.scot.gov.uk/forecasts)

¹¹ This is the cost of universal compensation for losses resulting from self-isolation, regardless which public authority made the request to self-isolate.

However, we acknowledge that there are certain groups more likely to be affected by this Bill: those on lower incomes, or those in transitory or insecure employment, without recourse to contractual or statutory sick pay, or who have not been able to benefit from the economic support (such as the furlough scheme) which has been put in place.

The impacts of the modification on these groups of people could be significant – by having to isolate without significant amounts of income for up to ten days, they stand to lose a significant amount of income. People in these groups tend to have lower levels of income overall, so the knock-on impacts of losing this income can be both socially and individually significant.¹² Scottish Government analysis estimates that 37 per cent of families are financially vulnerable, and as a result of losing employment, may fall behind on payments for essentials or rent, leading to economic insecurity, anxiety, a lack of ability to pay for food or other essentials, which can also have significant health outcomes, especially on children and families. These impacts also have a social cost, with more families and individuals needing wider support as a result of this economic vulnerability¹³.

In order to address those impacts, we have adapted support in an agile fashion to support these groups as much as possible during the pandemic. One of these adaptations to support has been to expand the eligibility criteria for the SISG, firstly to include parents who are self-isolating as a result of a child who has tested positive, and then to include those earning the equivalent of the real living wage or less. A key lesson from this was the eligibility criteria is critical, and that targeting support to those on low incomes is an essential cornerstone of the support.

The current support for isolation provides significant mitigation to the impacts which the modification to the 2008 Act might otherwise have had on the groups mentioned above. The SISG, available to those earning the real living wage or less, provides £500 per isolation period and helps to bridge any gap in income as a result. Localised support, such as LSIAS or that arranged through local authorities, can help with social support or with essential food or medicine delivery. If the modification had not been in place, and full compensation were required to be paid in accordance with sections 56 and 58 of the 2008 Act, instead of the current, more targeted suite of support, not only would the cost to the Scottish Taxpayer be twenty times what it is to provide that support, but this would divert resources away from Health Boards at a critical time, bringing with it significant inequalities. In the case of universal compensation, those on higher incomes would receive more support than those on lower incomes, which is an inequitable approach to mitigating the equalities impacts highlighted.

There are, as mentioned earlier, intersectional impacts too, especially on groups at an increased risk of vulnerability owing to living on lower incomes. These impacts are detailed and broken down by equality group below.

¹² [Coronavirus \(COVID-19\): economic impact of labour market effects - gov.scot \(www.gov.scot\)](https://www.gov.scot/resources/consultation-papers/corporate-statements/2020/06/2020-06-23-coronavirus-economic-impact-of-labour-market-effects/)

¹³ [Financial vulnerability in Scotland \(data.gov.scot\)](https://data.gov.scot/dataset/financial-vulnerability-in-scotland)

Background	Age: Children and Younger People	<p>Children and young people can be affected by self-isolation, and therefore the provisions of this Bill, in two ways. Firstly, the children and young people may themselves require to self-isolate if they test positive (Children and Young People under the age of 18 are exempt from the requirement to self-isolate, where they are identified as a close contact of someone who has tested positive and have returned a negative PCR test). If the children or young people are in employment, they may lose income as a result of self-isolating, or potentially incur other financial losses.</p> <p>Secondly, children and young people may be affected by others in their household having to self-isolate, parents or carers in particular. If those others self-isolating lose income as a result, that could impact on the children and young people’s wellbeing and welfare, particularly in low income households.</p> <p>In lower income households in particular, financial losses could dis-incentivise compliance with self-isolation. The children and young people, or those in their households, may be under pressure to continue working despite being asked to self-isolate, which risks the further spread of the virus and impacting on the health of those in the household, potentially magnifying the losses.</p>
Differential impacts		<p>Some evidence of differential impacts for children and young people, mitigated by the support for isolation available.</p> <p>In the third report of Public Health Scotland’s COVID-19 Early Years Resilience and Impact Survey¹⁴, it was found that, in 3 out of 10 households, the status of the main household earner had changed as a result of economic changes post-lockdown, and 4 out of 10 households had seen their income reduce. This highlights the wider socio-economic impact that children face, as a result of the impact of isolation on their parents and wider concerns on the fall-out of weaker economic activity.</p> <p>The wider impacts of this can be significant on children and young people, either on their own employment if they are older teens or through the impact on their parents, can be significant. For the former group, it can lead to significant reduced income and impact precarious employment when they are starting out in the workplace. For the latter group, it can have significant impacts on the household – either through dis-incentivising compliance and the attendant health consequences or through wider impacts of a drop of income on the wellbeing of parents, carers or children.</p>

¹⁴ [COVID-19 CEYRIS Report 3 \(publichealthscotland.scot\)](https://publichealthscotland.scot)

		<p>For this reason, ensuring that the current self-isolation support can continue for lower income parenting groups is a priority. This is achieved through this Bill. Through ensuring Health Boards do not face a liability of £380 million by keeping the current modification in place, resources can remain to support their pandemic response and urgent care.</p> <p>In addition, the Scottish Government has put in place mitigations which address the impacts above – tailored financial support for anyone notified to isolate who earns the equivalent of the real living wage or less. By ensuring this support remains towards those on low incomes, this policy supports children and young people in low income households (or on low incomes) who may be impacted by the modification being in place.</p>
Background	Age: Older People	Older people who are in work are impacted by this Bill. Many older people will be retired and no longer in the workforce, meaning the risk of losing income as a result of isolating is negligible. Those who are still working risk losing income as a result of the Bill.
Differential impacts		<p>No evidence of negative differential impact.</p> <p>Where there is loss, it is unclear that this is exacerbated by age. For those that do suffer loss, the same support which is available to other age groups is available to mitigate it.</p> <p>Older people who are in work in low-income jobs do face losses as a result of this modification, but no more so than any other age group, and these losses are mitigated through the current support for self-isolation in place.</p>
Background	Sex: Women	<p>There is some evidence that women have experienced financial detriment as a result of the modification to the 2008 Act under the UK Act. Women are more likely to be an unpaid carer than men, with 27 per cent of women providing unpaid care reporting that caring duties impacted their employment. During the first lockdown, mothers were 1.5 times more likely than fathers to lose or quit their jobs to cope with unpaid caring responsibilities.¹⁵</p> <p>There are now 1.1 million unpaid carers in Scotland, 61% of whom are women. This is an increase of 392,000 since the start of the crisis with 78% of carers having to provide more care than they were prior to the coronavirus outbreak.</p> <p>As a result, women who are unpaid carers are more likely to be in less secure, lower paid work or to be unemployed. Under Section 58 of the 2008 Act, carers who suffer loss as a result of the person they care for being asked to self-isolate (such as parents) would ordinarily</p>

¹⁵ [unpaid work booklet \(engender.org.uk\)](http://engender.org.uk)

		be entitled to compensation but this Bill (and the UK Act before it) means that compensation is not mandatory.
Differential impacts		<p>Some evidence of possible negative differential impact, mitigated by the support for isolation available.</p> <p>Women are more likely to have unpaid caring responsibilities, which is likely to compound both the likelihood that they will need to self-isolate, owing to an increased likelihood of being in contact with people, for example through visits to care services or through children being in school, and the amount of overall compensation they will need.</p> <p>This is mitigated by the SISG and the other support available for people who are isolating. Eligibility for the Grant has been expanded to include the parents of children who are notified to isolate. This is supported by the breakdown of decisions and awards around the SISG. Looking at grants awarded from April to June 2021, when breaking down the data by gender, of the 69 per cent of decisions including gender disclosures, 58 per cent of awards of the Grant are awarded to women, with 42 per cent awarded to men. These apply to decisions taken from March to June 2021, the first time that this additional information around awards was collected.¹⁶</p>
Background	Sex: Men	There is no evidence to suggest men are impacted any differently as a result of their gender.
Differential impacts		No differential impacts identified.
Background	Race	<p>People from Black and Minority Ethnic (“BAME”) communities are more likely to work in low income professions and therefore more likely to be impacted by the modification to the 2008 Act remaining in place. There are significant socio-economic inequalities that are faced by people from ethnic minority backgrounds. 39 per cent of people from an Asian or Asian British background face relative poverty after housing costs are removed in Scotland, with 38 per cent of people from a mixed, black or black British or other related background in the same situation. By contrast, for people identifying as “White-Other” that figure is 25 per cent and for those identifying as “White-British” that figure falls further, to 18 per cent.¹⁷</p> <p>In terms of the job market, a higher proportion of people from BAME communities work in the hospitality industry (31.7% vs 18.6% of the white population, 2019 data). According to the last census, Asian men and women were particularly likely to be working in wholesale and retail and accommodation and food services, and African women were</p>

¹⁶ Self-Isolation Support Grant Award Data, Scottish Government

¹⁷ [Inequalities by ethnicity in the context of COVID-19 \(slide-pack\) - gov.scot \(www.gov.scot\)](https://www.gov.scot/resources/consultations/web_publications/inqualities-ethnicity-covid-19)

		<p>by far the most likely to be working in either caring, leisure and other service occupations or sales and customer service occupations, where homeworking may be much less feasible.¹⁸</p> <p>There is also an intersectional challenge with the inequalities issues faced by BAME women and young people. The BAME employment gap was much higher for women than men. For women the gap was 22 percentage points and for men it was 9.5 percentage points. The gap in the employment rate for the BAME population was largest for ages 16 to 24 (26.1 percentage points); followed by ages 25 to 34 (25.3 percentage points), ages 35 to 49 (15.0 percentage points), and ages 50 to 64 (3.1 percentage points).</p>
Differential impacts		<p>Some evidence of possible negative differential impact, mitigated by the support for isolation available.</p> <p>The current support for self-isolation, including a £500 grant to help anyone earning the equivalent of the real living wage or less to get through a period of isolation, mitigates the economic impact for BAME people in low-paid or insecure work.</p> <p>In addition there are economic and social challenges faced by these groups including a higher likelihood of falling into poverty and an increased chance of being in a job that may bring workers into contact with COVID-19. The SISG can mitigate the cost to workers from these communities, who may be on lower incomes and below the real living wage, by providing targeted support to get them through a period of isolation. In addition, the assistance provided by the LSIAS enables the provision of vital support such as food and essential medicine delivery.</p>
Background	Religion & Faith	<p>There is no evidence to suggest people from a faith (as opposed to BAME) background are adversely affected by this modification.</p>
Differential impacts		<p>No differential impacts identified.</p>
Background	Disability	<p>There are large numbers of people living with a disability in Scotland. The Scottish Health Survey, estimates that, in 2018, 33% of adults (and 12% children) in Scotland were disabled, defined as having a limiting long-standing condition.</p> <p>This same survey indicates that disabled adults are likely to fall into the lowest household incomes - in 2018, 51% of adults with household incomes in the bottom quintile (less than £14,300) were disabled, compared with 23% adults with household incomes in the top quintile (£49,400 and above).</p>

¹⁸ Ibid.

Differential impacts		<p>Some evidence of possible negative differential impact, mitigated by the support for isolation available.</p> <p>Around one fifth¹⁹ of Scotland's population – that's one million people – define themselves as disabled, and half of all adults with household incomes are amongst those on the lowest incomes in Scotland. Without support in place, the impact of the modification would be to exacerbate income inequalities faced by this group.</p> <p>The current support for self-isolation, especially the SISG, however, provides some mitigation for this. This Grant has always been targeted at those workers on low incomes who cannot work from home, and is currently available to people who are self-isolating, lose income, and earning the equivalent of the real living wage or less.</p> <p>Although this group (like the others listed) may miss out on income as a result of the provision for full compensation being suspended, it is worth noting that the £380 million to provide this would not come with no social cost. The Scottish Government, operating in the context of a global pandemic, has had to make difficult choices as to where to allocate resources to support a route through this crisis. The current support for isolation and the wider health responses of Health Boards would be impacted should the liability for full compensation apply in lieu of support for isolation.</p> <p>In terms of practical support, the LSIAS provides direct assistance which can support the needs of disabled people, alongside the wider population. Above, the ONS figures highlight that almost a quarter of disabled people surveyed – more than double the non-disabled population, have required support with groceries, food and essential medicine delivery and the provision of essentials. This is the very service that the LSIAS provides, alongside social support or signposting to mental health support.</p>
Background	Sexual Orientation	There is no evidence to suggest that people are adversely affected by this modification as a result of their sexual orientation.
Differential impacts		No differential impacts identified.
Background	Marriage and Civil Partnership	There is no evidence to suggest that individuals in a marriage or civil partnership are adversely impact by this modification.

¹⁹ [Disability - One Scotland](#)

Differential impacts		No differential impact identified.
Background	Pregnancy and Maternity	There is no evidence to suggest that pregnant women or new mothers are adversely impacted by this modification.
Differential impacts		No differential impact identified.
Background	Gender Reassignment	There is no evidence that people who have undergone, or are undergoing or considering, gender reassignment, are adversely affected by this modification.
Differential impacts		No differential impacts identified.
Background	Socio-economic disadvantage	<p>This analysis should be read in conjunction with the Fairer Scotland Impact Assessment for this Bill.</p> <p>As outlined in the background to this document, people on lower incomes or insecure work, without the protections provided by contractual or statutory sick pay, stand to be impacted the most through the modification to the compensation duty continuing. As outlined in individual assessments above, this may also read across into intersectional considerations, such as the increased risk BAME or disabled people face with regard to being on lower incomes.</p> <p>ScotCen Social Research were commissioned by the Scottish Government to carry out a mixed mode study of adults asked to self-isolate by Test and Protect either because they tested positive for COVID-19, were in contact with someone that tested positive for COVID-19 or recently arrived into Scotland from outside the UK²⁰.</p> <p>When analysed by levels of area deprivation, those living in the two most deprived SIMD quintiles were more likely to indicate that they had/were struggling financially (21%) compared with those living in the other three deprivation quintiles (8%).</p> <p>Respondents who were index or contact cases living in the two most deprived SIMD quintiles were more than twice as likely to have applied for a SISG compared with those living in the other three quintiles (13% and 5% respectively).</p>

²⁰ [COVID-19 support study: experiences of and compliance with self-isolation - gov.scot \(www.gov.scot\)](https://www.gov.scot/resources/consultations/COVID-19-support-study-experiences-of-and-compliance-with-self-isolation/)

		<p>Those with household incomes of less than or equal to £16,900 (17% across all three waves) and £16,901 to £30,700 (13% across all waves) were more likely than those with higher household incomes to have applied for a self-isolation support grant.</p>
<p>Differential impacts</p>		<p>Some evidence of negative differential impact, mitigated by the support for isolation available.</p> <p>As these measures seek to keep the current support for isolation, which is targeted at people on low incomes, with the SISG available to anyone on the equivalent of the real living wage or less, in place, these measures go some way to mitigating the impact. This is reflected in the figures referenced, with a fifth of survey respondents who received SISG lived in the 20 per cent most deprived zones in the country, demonstrating the impact of this support on people on low incomes.</p>

Mitigating actions:

In addition to this assessment, a Fairer Scotland Assessment has been completed. These findings should be read in conjunction with that Assessment, the Islands and Communities Impact Assessment and the Children's Welfare Rights Impact Assessment.

This Bill continues modifications to the 2008 Act that have been in place since March 2020 by virtue of the Coronavirus Act 2020, so far as they relate to COVID-19. The reason this modification was put in place was to enable Health Boards to focus on the delivery of healthcare, both related to the outbreak of the COVID-19 pandemic and essential care not related to COVID-19 and it was not considered a proportionate use of public resource to provide isolation compensation at the scale that would have been required. The modification prevents Health Boards from facing a significant administrative and financial burden as a result of compensation claims from those who are isolating. This pandemic is unprecedented and if the provision of the 2008 Act to pay compensation to those told to self-isolate by Health Boards remained, it would result in a substantial administrative and financial burden across the health system. The Scottish Government estimates the cost of such a measure would be 20 times the amount spent on support for isolation, totalling roughly £380 million²¹.

In place of this compensation obligation, a suite of support for people who are self-isolating has been established, which acts in mitigation to the principle group affected by this modification remaining in place; namely those on low incomes or insecure work, without sickness benefits, with some intersectional impacts on equalities groups where low incomes may be more prevalent. This support includes the SISG, a one-off payment of £500 to those workers on lower incomes who need to isolate, and lose income as a result, the LSIAS, run by and with local authorities to support people with food and essential medicine deliveries and other critical help such as social support, and the provision of isolation accommodation, which is available to people who have nowhere else to isolate. Given the impact of maintaining this modification is principally economic, this support mitigates a significant impact of this modification on lower-income groups, and the continued modification enables, through ensuring resources are not diverted to meet a massive compensatory need, this support to remain in place.

It is also clear that there are several intersectional challenges with regard to the socio-economic impacts of the pandemic. 4 in 10 households have seen their income reduce as a result of the pandemic²² and 51 per cent of adults in the lowest quintile of earnings – less than £14,300 – have a disability²³. The current support for isolation also mitigates the impact of the modification remaining in place on these groups. It is proposed that this support continues after the Bill is in force.

²¹ This is the cost of universal compensation for losses resulting from self-isolation, regardless which public authority made the request to self-isolate.

²² [COVID-19 CEYRIS Report 3 \(publichealthscotland.scot\)](https://publichealthscotland.scot)

²³ <https://www.gov.scot/publications/scottish-health-survey-2018-supplementary-tables/>

Assessing the impacts and identifying opportunities to promote equality

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

Age	Positive	Negative	None	Reasons for your decision
Eliminating unlawful discrimination, harassment and victimisation			X	No evidence of a differential impact identified at this time.
Advancing equality of opportunity			X	No evidence of a differential impact identified at this time.
Promoting good relations among and between different age groups			X	No evidence of a differential impact identified at this time.

Do you think that the policy impacts disabled people?

Disability	Positive	Negative	None	Reasons for your decision
Eliminating unlawful discrimination, harassment and victimisation			X	No evidence of differential impact, as the modification enables the provision of support which is targeted towards lower incomes.
Advancing equality of opportunity		X		Some potential negative impacts as a result of suspending the compensatory duty, but these are mitigated by the provision of the Self-Isolation Support Grant and other support.
Promoting good relations among and between disabled and non-disabled people			X	No evidence of a differential impact identified at this time.

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

Sex	Positive	Negative	None	Reasons for your decision
Eliminating unlawful discrimination, harassment and victimisation			X	No evidence of a differential impact at this time.

Advancing equality of opportunity		X		Some potential negative impacts as a result of suspending the compensatory duty, but these are mitigated by the provision of the Self-Isolation Support Grant and other support.
Promoting good relations between men and women			X	No evidence of a differential impact identified at this time.

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

Pregnancy and Maternity	Positive	Negative	None	Reasons for your decision
Eliminating unlawful discrimination, harassment and victimisation			X	No evidence of a differential impact identified at this time.
Advancing equality of opportunity			X	No evidence of a differential impact identified at this time.
Promoting good relations			X	No evidence of a differential impact identified at this time.

Do you think your policy impacts on people proposing to undergo, undergoing, or who have undergone a process for the purpose of reassigning their sex? (NB: the Equality Act 2010 uses the term ‘transsexual people’ but ‘trans people’ is more commonly used, although it may include a wide range of people not covered by the Act).

Gender reassignment	Positive	Negative	None	Reasons for your decision
Eliminating unlawful discrimination, harassment and victimisation			X	No evidence of a differential impact identified at this time.
Advancing equality of opportunity			X	No evidence of a differential impact identified at this time.
Promoting good relations			X	No evidence of a differential impact identified at this time.

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

Sexual orientation	Positive	Negative	None	Reasons for your decision
Eliminating unlawful discrimination, harassment and victimisation			X	No evidence of a differential impact identified at this time.
Advancing equality of opportunity			X	No evidence of a differential impact identified at this time.
Promoting good relations			X	No evidence of a differential impact identified at this time.

Do you think the policy impacts on people on the grounds of their race?

Race	Positive	Negative	None	Reasons for your decision
Eliminating unlawful discrimination, harassment and victimisation			X	No evidence of a differential impact identified at this time.
Advancing equality of opportunity		X		Some potential negative impacts as a result of suspending the compensatory duty, but these are mitigated by the provision of the Self-Isolation Support Grant and other support.
Promoting good race relations			X	No evidence of a differential impact identified at this time.

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

Religion or belief	Positive	Negative	None	Reasons for your decision
Eliminating unlawful discrimination, harassment and victimisation			X	No evidence of a differential impact identified at this time

Advancing equality of opportunity			X	No evidence of a differential impact identified at this time.
Promoting good relations			X	No evidence of a differential impact identified at this time.

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

Marriage and Civil Partnership	Positive	Negative	None	Reasons for your decision
Eliminating unlawful discrimination, harassment and victimisation			X	No evidence of a differential impact identified at this time.
Advancing equality of opportunity			X	No evidence of a differential impact identified at this time.
Promoting good relations			X	No evidence of a differential impact identified at this time.



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