

Equality Impact Assessment Tool: Policy, Strategy and Plans (Please follow the EQIA guidance in completing this form)

1. Name of Strategy, Policy or Plan
Glasgow City Integration Joint Board Property Strategy 2019-22
Please tick box to indicate if this is: Current Policy, Strategy or Plan New Policy, Strategy or Plan
2. Brief Description – Purpose of the policy; Changes and outcomes; services or activities affected
Glasgow City Integrated Joint Board (IJB) operates in a challenging environment where demand for services are high, and the resources and the finances at our disposal to meet this demand are limited. Strategic asset management via a clear Property Strategy is essential to ensure that the IJB has the right property assets in the right place at the right time to meet service user and patient needs. This strategy requires to support delivery of our Strategic Plan (GCHSCP Strategic Plan 2019-2022) and help us to ensure meeting needs is affordable and supports service delivery in the most efficient way.
The responsibility and role of the IJB in utilising existing property assets and developing new assets is clearly defined by the Scottish Government: Scottish Government Financial Planning Guidance for Health and Social Care Integration. The IJB currently has a Property Strategy which was approved by in November 2017. The new strategy builds on this and will cover the period 2019-2022 in alignment with the IJB's Strategic Plan 2019-2022.
The property assets which the IJB uses to deliver services are managed either by Glasgow City Council or NHS Greater Glasgow and Clyde. This means that the Property Strategy for Glasgow City IJB does not sit in isolation, and is linked closely to both the Council's Property and Land Strategy 2019 - 2021 and NHS Greater Glasgow and Clyde's Property and Asset Management Strategy 2016 - 2020. Both of these strategies are focused on making the best use of the significant assets owned by the Council and the Health Board.
The scope of the Property Strategy is wide ranging and, like the Strategic Plan, has the potential to impact on every

service user/patient. The equality principles of the Property Strategy are closely aligned with those of the Strategic Plan and this EQIA should be read alongside the <u>Strategic Plan EQIA</u>. In addition EQIAs for other relevant Transformation programmes are available at the following link: <u>GCHSCP Equality Impact Assessments</u>.

The actions and proposals contained in the Property Strategy suggest that there will be multiple positive impacts for service users and patients in Glasgow. New purpose built accommodation adapted to meet the needs of service users, patients and staff is likely to have a positive impact in terms of improved accessibility and improved physical environment. The creation of health and care hubs designed to support more integrated working and the co-location of health and social work staff is also likely to have benefits. It is also possible that the new facilities may contribute to the regeneration of the surrounding area as well as improving access to health and social care services for the local population. Refurbishment of older properties will provide an opportunity to introduce improvements to those properties. All of these are likely to have a positive impact on our contribution to meeting the national health and wellbeing outcomes.

The strategy outlines the principles which the HSCP will take forward as well as a number of more concrete proposals. As this is a high level strategy all changes will be subject to scrutiny in their own right. So that while the strategy does not have a negative impact in and of itself each individual current and future proposal is likely to require an EQIA to measure the impact of the specific changes to be introduced. Where an individual EQIA highlights any negative impacts mitigating actions will be identified to address these.

3 Lead Reviewer

Margaret Hogg (Assistant Chief Officer – Finance)

4. Please list all participants in carrying out this EQIA:

Margaret Hogg (Assistant Chief Officer - Finance), Janice Smith (Senior Officer, Business Development), Craig Cowan (Business Development Manager).

5. Impact Assessment

A Does the policy explicitly promote equality of opportunity and anti-discrimination and refer to legislative and policy drivers in relation to Equality? Please provide excerpts from the document to evidence.

In line with the <u>General Duties (Equality Act (2010))</u> Glasgow City Health and Social Care Partnership believe that the City's people can flourish, with access to health and social care support when they need it.

Throughout implementation of the changes proposed in this strategy reference will be made to the <u>General Duties</u> (<u>Equality Act (2010)</u>) which will articulate how any proposed changes in service provision will meet the requirement to:

- Eliminate unlawful discrimination, harassment and victimisation and other conduct that is prohibited by the Act.
- Advance equality of opportunity between people who share a characteristic and those who don't.
- Foster good relations between people who share a characteristic and those who don't.

Additionally the HSCP is mindful of its requirement to comply with the <u>Fairer Scotland Duty</u> to do more to tackle the inequalities of outcome caused by socio-economic disadvantage.

B What is known about the issues for people with protected characteristics in relation to the services or activities affected by the policy? For instance, a new flexible working policy might reflect on the additional burden experienced by carers or parents.

		Source
All	The equality principles of the Property Strategy are closely aligned with the IJB Strategic Plan. The research and demographic information presented in the Strategic Plan EQIA is therefore closely related to, and relevant to, the current strategy and reference has been made to this document throughout.	Sources in text

	The Glasgow City IJB Strategic Plan 2019- 2022 EQIA can be accessed here. Information about the population of Glasgow City – current and projected is given in Section 5.B of the Glasgow City IJB Strategic Plan 2019- 2022 EQIA. The Equality and Human Rights Commission (EHRC) report Is Scotland Fairer? (2018) highlighted that most of Scottish Government policy relating to inequality in health outcomes is largely framed through socio-economic inequality.	
Sex	Each section must be read within the context of the intersectionality of all the protected characteristics. Information about inequality in relation to gender is given in Section 5.B of the Glasgow City IJB Strategic Plan 2019- 2022 EQIA. The EHRC report Is Scotland Fairer? (2018) notes that on average women continue to earn less than men and the gender pay gap has changed very little in recent years.	Sources in text
Gender Reassignment	Each section must be read within the context of the intersectionality of all the protected characteristics. Referral statistics in relation to Scottish Gender Identity Clinics (GICs) and the findings of the 2017 Stonewall LGBT Survey are detailed in Section 5.B the Glasgow City IJB Strategic Plan 2019- 2022 EQIA. Information in relation to older people and gender reassignment can be found at the links below. These papers document the profound challenges which older transgender adults may experience in accessing heath, social care and housing services. • Age UK factsheets 16 (2018) Web Link: Transgender Issues and Later Life	Sources in text

	 (2018) The Dementia Challenge for LGBT Communities (2014) LGBT Older People with Dementia should not be forced back into the closet. Expanding Housing and Services for LGBT Older People Improving the Lives of Transgender Older Adults (2012) 	
Race	Each section must be read within the context of the intersectionality of all the protected characteristics. Glasgow has the most ethnically diverse population in Scotland. Section 5.B of the Glasgow City IJB Strategic Plan 2019- 2022 EQIA details the potential issues which act as barriers to the BME community in accessing services and highlight some of the results in relation to the BME community from the Scotlish Health Survey (2015). Demographic information in relation to race and ethnicity in Glasgow and Scotland can be accessed via the following links Social Works Demographics Report 2014 and Scotland's Census - Ethnicity, Identity, Language and Religion respectively. Scotlish Government: Ethnic Group Demographics web link: http://www.gov.scot/Topics/People/Equality/Equalities/DataGrid/Ethnicity/EthPopMig Additional reports which document the challenges which BME citizens may experience in accessing heath, social care and housing services: Joseph Rowntree Foundation Report on BME People's Views on Research Findings Current and Future Challenges of Family Care in the UK (2015) - reports that people over 65 from Black and Asian communities are	Sources in text

Disability	disproportionately affected by poorer health and higher rates of limiting long term illness. Each section must be read within the context of the intersectionality of all the	
	Section 5.B of the Glasgow City IJB Strategic Plan 2019- 2022 EQIA provides details in relation to the proportion of people with a disability and the number of carers in Scotland. The Equality Act 2010 imposes a duty on service providers including Local Authorities, to make reasonable adjustments to their policies, practices and premises and provide auxiliary aids to improve accessibility of services for disabled people. People with disabilities have important rights of access to everyday public services. Access to services is not just about installing ramps and widening doorways for wheelchair users - it is about making services easier to use for all people with disabilities. So in addition to physical access, disabled people can also face issues with communication and obtaining advice and support, particularly those who have a learning disability. Intersectionality between disability and other protected characteristics - further information: • Around 21,000 people over 65 in Glasgow consider themselves to have a physical disability, and around 5,400 consider themselves to have a mental health condition. (Social Works Demographics Report 2014). • Ageing with Disability: What do they expect after all these years? (Zarb, G. and Oliver, M. (2003) • Ageing & Disability – UN Division for Social Policy and Development: United Nations - Ageing and Disability • People with learning disabilities face many disadvantages in relation to health (Emerson and Baines 2011) Health Inequalities and People with Learning Disabilities in the UK. • Alzheimer Scotland Statistics: Alzheimer Scotland: Estimated numbers with	Sources in text

	 Dementia 2017 The LSE has published a review paper on LGBTQI+ Disabled people and self-directed social care support: <u>LGBTQI+ Disabled People and self-directed social care support</u> 	
Sexual Orientation		
Religion and Belief	Each section must be read within the context of the intersectionality of all the protected characteristics. Section 5.B of the Glasgow City IJB Strategic Plan 2019- 2022 EQIA references the Equality and Human Rights Commission (EHRC) report which highlights the complexity, and cross-cutting relationships between religious prejudice and 'protected characteristics'. Where there is a concentration of particular religious groups, this reinforces the need for religious and cultural sensitivity in the provision of services and initiatives. Key statistics from Scotland's Census (2011): Religion Demographics: 2011 census are also reported. A breakdown of the 2011 Scotland Census figures by religion and by local authority can be accessed via the following link: Scotland's Census	Sources in text

Age	Each section must be read within the context of the intersectionality of all the protected characteristics. Section 5.B of the Glasgow City IJB Strategic Plan 2019- 2022 EQIA provides an overview of the age demographics of people in Glasgow and details research around this protected characteristic. Around 82,000 people (13.9% of the population) are aged 65 and over, and around 403,000 (67.9% of the population) are aged between 18 - 64. Between 2016 and 2026, the population of Glasgow City is projected to increase from 615,070 to 639,657. This is an increase of 4.0%.(Glasgow City Population Profile) Section 5.B of the paper EQIA Older People's Transformational Change Programme 2018-21 documents the significant challenges which older people face. Other key sources in relation to Older People: • Dementia: Equity and Rights • The 2011 census research briefing on Growing Older in Scotland: Health, Housing and Care (2015). • The Government paper on the Future Of Ageing looks at attitudes to ageing.	Sources in text
Pregnancy and Maternity	Each section must be read within the context of the intersectionality of all the protected characteristics. Section 5.B of the Glasgow City IJB Strategic Plan 2019- 2022 EQIA provides information about the birth rate in Glasgow and notes that Health care experiences and outcomes for pregnant women can differ on the basis of their youth/age, ethnicity, migrant or asylum seeking status, mental health or learning disabilities.	Sources in text

	Statistics are also provided in relation to the prevalence of smoking in pregnancy and obesity. Information is also provided in relation to the pregnant women seeking asylum in the UK who may be particularly vulnerable. Research and statistics is also cited in relation to pregnancy discrimination in the workplace. <u>Equality and Human Rights - Pregnancy and Maternity Discrimination Research Findings</u>	
Marriage and Civil Partnership		
Social and Economic Status	Each section must be read within the context of the intersectionality of all the protected characteristics. Section 5.B of the Glasgow City IJB Strategic Plan 2019- 2022 EQIA details research in relation to Social and Economic Status and discrimination and the barriers to accessing services. Links to reference documents: • The Joseph Rowntree Foundation Poverty in Scotland 2018 suggests that close to one in four children in Scotland are in poverty.	Sources in text

	 The Poverty Overview by <u>Understanding Glasgow</u> suggests that Glasgow remains the most deprived city and local authority area in Scotland. <u>EHRC Is Scotland Fairer? (2018)</u> <u>Migrant Health Report (2016)</u> (Scottish Public Health Network, 2016). The Age UK briefing <u>Working with Older Travellers</u> reports that this community has significantly poorer health outcomes than the general population of older adults. Their experiences of stigma, poverty and illiteracy have placed them in a disadvantaged position in seeking support from services. They also felt that services, as a whole, are not sensitive to their culture. According to Scottish Parliament Equal Opportunities Committee report on <u>Gypsy/Travellers and Care</u> there is a link between living conditions that affect the overall physical wellbeing and mental health. Policy recommendations suggests that addressing the social determinants of health and health outcomes can play an important part in improving health of the population by reducing health inequalities among different groups of 	
Other marginalised groups (homeless, addictions, asylum seekers/refugees, travellers, ex- offenders	See Social and Economic Status section above.	

C Do you expect the policy to have any positive impact on people with protected characteristics? Where you expect no impact please note None in all boxes.

	Highly Likely	Probable	Possible
General	It is likely that this strategy will have multiple positive impacts for service users, patients and staff. All change activity will involve carrying out individual EQIAs to measure impact and identify actions required to mitigate any negative impacts identified. This will ensure change activity is sensitive to the needs of all groups with protected characteristics.	It is probable that people in general will be positively impacted by and benefit from increased accessibility to services. Having integrated health and social care facilities in the three localities will benefit those who would otherwise need to attend separate venues to have their needs met.	
Sex	The activity outlined in the Property Strategy is likely to benefit the health and social care outcomes of Glasgow citizens, irrespective of sex. All change activity will involve carrying out EQIAs to measure impact and identify actions required to mitigate any negative impacts identified. This will lead to services that are responsive to the needs of men, women and non-binary stakeholders, patients and staff.		

Gender Reassignment	The activity outlined in the Property Strategy is likely to benefit the health and social care outcomes of Glasgow citizens, irrespective of gender status. All change activity will involve carrying out EQIAs to measure impact and identify actions required to mitigate any negative impacts identified. This will lead to services that are responsive to the needs of Trans-men and Trans-women stakeholders, patients and staff. The EQIA of the Strategic Plan outlined the difficulty that Transgender people in Scotland experience when accessing services. Through effective equality impact assessment GCHSCP will promote equality of access to services amongst all groups.	
Race	The activity outlined in the Property Strategy is likely to benefit the health and social care outcomes of Glasgow citizens, irrespective of ethnic group. All change activity will involve carrying out EQIAs to	

	measure impact and identify actions required to mitigate any negative impacts identified. This will lead to services that are responsive to the needs of stakeholders, patients and staff from Black and Minority Ethnic communities. Through effective equality impact assessment GCHSCP will promote elimination of such discrimination in service development and delivery, irrespective of ethnic group and will ensure that ethnic group is not a barrier to accessing services or information about them.		
Disability	The activity outlined in the Property Strategy is likely to improve the health and social care outcomes of the estimated 12.8% of Glasgow citizens whose day to day activities are limited and 7.5% who have disabilities. All change activity will involve carrying out EQIAs to measure impact and identify actions required to mitigate any negative impacts identified.	It is probable that people with disabilities will be positively impacted by and benefit from increased accessibility to services. Having integrated health and social care facilities in the three localities will benefit those who would otherwise need to attend separate venues to have their needs met.	

	This will lead to services that are responsive to the needs of stakeholders, patients and staff with disabilities. Through effective equality impact assessment GCHSCP will promote elimination of such discrimination in service development and delivery for people with disabilities and ensure a person's disability is not a barrier to accessing services.	
Sexual Orientation	The activity outlined in the Property Strategy is likely to improve the health and social care outcomes of LGBT citizens. All change activity will involve carrying out EQIAs to measure impact and identify actions required to mitigate any negative impacts identified. This will lead to services that are responsive to the needs of LGBT stakeholders, patients and staff. Section 5.B highlighted the higher health risks, isolation, prejudice and discrimination within social care experienced by LGBT people	

	and the specific impact dependent on their age, disabilities, ethnic group, sexuality and mental health status. Through effective equality impact assessment GCHSCP will promote elimination of such discrimination in service development and delivery for LGBT people.	
Religion and Belief	The activity outlined in the Property Strategy is likely to improve the health and social care outcomes of Glasgow citizens with religious beliefs and non-belief. All change activity will involve carrying out EQIAs to measure impact and identify actions required to mitigate any negative impacts identified. This will lead to services that are responsive to the needs of stakeholders, patients and staff with religious beliefs and non-belief. Section 5.B highlighted the complexity and cross-cutting and relationships between religious prejudice and other protected	

	characteristics. Through effective equality impact assessment GCHSCP will promote consideration of this to seek elimination of discrimination in service development and delivery for people based on their religious beliefs.		
Age	The activity outlined in the Property Strategy is likely to improve the health and social care outcomes of Glasgow citizens of all ages. All change activity will involve carrying out EQIAs to measure impact and identify actions required to mitigate any negative impacts identified. This will lead to services that are responsive to the needs of stakeholders, patients and staff of all ages. Through effective equality impact assessment GCHSCP will promote the development and delivery of services that are accessible and responsive to the needs of citizens of all ages.	It is probable that Older People will be positively impacted by increased accessibility to services. Having integrated health and social care facilities in the three localities will benefit those who would otherwise need to attend separate venues to have their needs met.	

Marriage and	The activity outlined in the	
Civil	Property Strategy is likely to	
Partnership	improve the health and social	
	care outcomes of citizens in	
	marriage and civil partnerships.	
	All change activity will involve	
	carrying out EQIAs to measure	
	impact and identify actions	
	required to mitigate any	
	negative impacts identified.	
	This will lead to services that	
	are responsive to the needs of	
	stakeholders, patients and staff	
	in marriage and civil	
	partnerships. Section 5.B of the	
	Strategic Plan EQIA highlighted	
	the lack of empirical evidence regarding the discrimination	
	and inequalities faced by same-	
	sex couples entering a civil	
	partnership. Through effective	
	equality impact assessment	
	GCHSCP will promote the	
	development and delivery of	
	services that are accessible	
	and responsive to the needs of	
	citizens in marriage and civil	
	partnerships.	
Drognono		
Pregnancy and Maternity	The activity outlined in the Property Strategy is likely to	
and materinty	Froperty Strategy is likely to	

	care outcomes of citizens that are pregnant and on maternity leave. All change activity will involve carrying out EQIAs to measure impact and identify actions required to mitigate any negative impacts identified. This will lead to services that are responsive to the needs of stakeholders, patients and staff that are pregnant and on maternity leave. Section 5.B of the Strategic Plan EQIA highlighted that health care experiences and outcomes can differ for pregnant women, particularly when combined with having a baby at a young age. Through effective equality impact assessment GCHSCP will promote the development	
	and delivery of services that are accessible and responsive to the needs of citizens who are pregnant or on maternity leave.	
Social and Economic Status	The activity outlined in the Property Strategy is likely to improve the health and social care outcomes of citizens from	

	all socio-economic backgrounds. All change activity will involve carrying out EQIAs to measure impact and identify actions required to mitigate any negative impacts identified. This will lead to services that are responsive to the needs of stakeholders, patients and staff from all socio-economic backgrounds. Through effective equality impact assessment GCHSCP will promote the development and delivery of services that are accessible and responsive to the needs of citizens from all socio-economic backgrounds.	
Other marginalised groups (homeless, addictions, asylum seekers/refug ees, travellers, ex-offenders	The activity outlined in the Property Strategy is likely to improve the health and social care outcomes of citizens from marginalised groups. All change activity will involve carrying out EQIAs to measure impact and identify actions required to mitigate any negative impacts identified. This will lead to services that are responsive to the needs of	

stakeholders, patients and staff from marginalised groups. Through effective equality impact assessment GCHSCP will promote the development and delivery of services that are accessible and responsive to the needs of citizens from marginalised groups.	
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D Do you expect the policy to have any negative impact on people with protected characteristics? Where you expect no impact please note None in all boxes.

	Highly Likely	Probable	Possible
General			In general, people with protected characteristics can be negatively impacted by changes to services. There is no information as yet in relation to specific negative impacts as a result of any of the activity contained within the Property Strategy. Through effective planning and EQIAs any negative impacts will be identified early in the process and actions identified to mitigate these will be included in the associated planning.

Sex		In general, men, women and non-binary stakeholders can be negatively impacted by changes to services. There is no information as yet in relation to specific negative impacts as a result of any of the activity contained within the Property Strategy. Through effective planning and EQIAs any negative impacts will be identified early in the process and actions identified to mitigate these will be included in the associated planning.
Gender Reassignment		In general, Trans-men and Trans- women can be negatively impacted by changes to services. There is no information as yet in relation to specific negative impacts as a result of any of the activity contained within the Property Strategy. Through effective planning and EQIAs any negative impacts will be identified early in the process and actions identified to mitigate these will be included in the associated planning.
Race		In general, people from black and minority ethnic communities can be negatively impacted by changes to services. There is no information as yet in relation to specific negative

		impacts as a result of any of the activity contained within the Property Strategy. Through effective planning and EQIAs any negative impacts will be identified early in the process and actions identified to mitigate these will be included in the associated planning.
Disability		In general, people with disabilities can be negatively impacted by changes to services. There is no information as yet in relation to specific negative impacts as a result of any of the activity contained within the Property Strategy. Through effective planning and EQIAs any negative impacts will be identified early in the process and actions identified to mitigate these will be included in the associated planning.
Sexual Orientation		In general, LGBT people can be negatively impacted by changes to services. There is no information as yet in relation to specific negative impacts as a result of any of the activity contained within the Property Strategy. Through effective planning and EQIAs any negative impacts will be identified early in the process and actions identified to mitigate these will

		be included in the associated planning.
Religion and Belief		In general, people with religious belief, or those with no belief can be negatively impacted by changes to services. There is no information as yet in relation to specific negative impacts as a result of any of the activity contained within the Property Strategy. Through effective planning and EQIAs any negative impacts will be identified early in the process and actions identified to mitigate these will be included in the associated planning.
Age		In general, people of all ages can be negatively impacted by changes to services. There is no information as yet in relation to specific negative impacts as a result of any of the activity contained within the Property Strategy. Through effective planning and EQIAs any negative impacts will be identified early in the process and actions identified to mitigate these will be included in the associated planning.
Marriage and Civil Partnership		In general, people who are married or in civil partnerships can be negatively

		impacted by changes to services. There is no information as yet in relation to specific negative impacts as a result of any of the activity contained within the Property Strategy. Through effective planning and EQIAs any negative impacts will be identified early in the process and actions identified to mitigate these will be included in the associated planning.
Pregnancy and Maternity		In general, people who are pregnant or on maternity leave can be negatively impacted by changes to services. There is no information as yet in relation to specific negative impacts as a result of any of the activity contained within the Property Strategy. Through effective planning and EQIAs any negative impacts will be identified early in the process and actions identified to mitigate these will be included in the associated planning.
Social and Economic Status		In general, people from a range of socio-economic groups can be negatively impacted by changes to services. There is no information as yet in relation to specific negative impacts as a result of any of the

		activity contained within the Property Strategy. Through effective planning and EQIAs any negative impacts will be identified early in the process and actions identified to mitigate these will be included in the associated planning.
Other marginalised groups (homeless, addictions, asylum seekers/refugees, travellers, exoffenders		In general, people from marginalised groups can be negatively impacted by changes to services. There is no information as yet in relation to specific negative impacts as a result of any of the activity contained within the Property Strategy. Through effective planning and EQIAs any negative impacts will be identified early in the process and actions identified to mitigate these will be included in the associated planning.

		Responsibility and Timescale
1 Changes to policy	There is no requirement to change the current policy.	
2 action to compensate for identified negative impact	Where individual proposals subject to EQIA highlight any negative impacts we will identify mitigating actions to address these. In addition, service user and patient engagement will ensure that we understand the impact of the changes we make as part of this strategy.	
3 Further monitoring – potential positive or negative impact		
4 Further information required		

Lead Reviewer: Name: Janice Smith

Sign Off Job Title: Senior Officer, Business Development

Signature

Date: April 2019

Please email copy of the completed EQIA form to alastair.low@ggc.scot.nhs.uk

Or send hard copy to:

Corporate Inequalities Team, NHS Greater Glasgow and Clyde, JB Russell House, Gartnavel Royal Hospital, 1055 Great Western Road, Glasgow, G12 0XH