Glasgow City Health and Social Care Partnership - Equality Progress Report 2024

Equality Mainstreaming Report

and

Progress towards the Equality Outcomes 2020 to 2024

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Equality Mainstreaming Report 2022 to 2024

Introduction

Mainstreaming equality refers to the efforts made by an organisation to integrate equality into the day-to-day working of all its services, this recognises that in some cases this requires a bespoke response from the organisation. It is a long-term commitment to ensuring that equality and diversity is part of the structures, behaviour and culture of the Glasgow City Health and Social Care Partnership (GCHSCP) led by the Integration Joint Board (IJB) Glasgow City HSCP endeavours to mainstream equality for all by using a holistic approach, demonstrating equality in all that we do, ensuring that all functions consider equalities when assessing and reviewing policies and practice.

This report is the second monitoring report aligned to the 2020-24 ambitions, covering a range of work undertaken across Glasgow City HSCP to mainstream our equality duties covering the period April 2022 and March 2024.

Including activity in the following areas;

- Equality Governance
- Equality Impact Assessments
- Working with Partners
- Benchmarking Progress
- Training and Development
- Accessible Services
- Procurement and Commissioning
- British Sign Language (BSL) Local Plans
- Domestic Abuse Strategy
- Mitigating the Impact of Poverty
- Workforce
- Examples of Mainstreaming in Service Delivery

Equality Governance

<u>Glasgow City HSCP Equalities Working Group</u>

The HSCP Head of Health Improvement and Inequality chairs the Glasgow City HSCP Equality Working Group. The group is comprised of members from across the partnership as well as representatives from the Glasgow Equality Forum, Glasgow City Council and NHS GG&C Equality and Human Rights Team. This group meets every 6 weeks and is responsible for coordinating the HSCP response to the Equality Act and driving the Equality Outcome and Mainstreaming activity across the HSCP, sharing best practice for wider learning.

The Group and the Equality Outcome and Mainstreaming is supported by the Lead for Equalities and Fairer Scotland.

Equality Impact Assessments

Equality Impact Assessments (EQIAs) are a key way of ensuring that equality is considered in all aspects of policy development and decision making. Equality and Fairer Scotland considerations are highlighted on the cover template for all IJB reports and published to a dedicated webpage here.

During 2022 and 2023, a total of 35 EQIAs were undertaken and published as part of Glasgow City HSCP's legislative duties. This included a report considering cumulative impact of budget proposals. Assessments include equality, Socio Economic and Human Rights considerations.

Work has been ongoing to improve organisational capacity and capability in undertaking of EQIAs. Following formation of working group, an action plan has been developed and will be monitored through the HSCP Equality Group. Activity to date has included:

- Development of a Teams channel to host a range of equality data and research to inform assessments.
- Development of an EQIA tracker to provide oversight across the partnership, promote undertaking of EQIA's, ensuring the process is supported.
- Introduction of a report on potential cumulative impact as part of the budget setting process.
- Promotion of access to NHS GG&C EQIA training,
- One on one sessions with the Lead for Equalities to support completing robust assessments
- The Lead for Equalities works closely with Business Development to provide support and guidance on EQIA's for those with an IJB paper scheduled.

An audit was undertaken on the changes as a result of EQIA's, this highlighted key themes across the changes, including:

- Introducing routine collection of equalities data
- Introducing routine analysis of equalities data
- Further involvement of people with lived experience in shaping the service.
- Training for staff and commissioned services
- Work collaboratively with particular equalities groups
- Referrals to support income maximisation, recognising the intersections of protected characteristics and socio-economic disadvantage

- For strategies, it was highlighted the importance of encouraging, supporting and monitoring the additional EQIAs undertaken by individual workstreams, programmes and services in the future.

Further information on this can be found at Outcome 5, action 3 of the Equality Outcome Progress Report.

Working with Partners

Local Partners

We work closely with both the NHS GG&C Equality and Human Rights Team and the Glasgow City Council Equality Working Group, to share learning and co-ordinate activity and responses, where appropriate, in order to achieve improved outcomes for the people of Glasgow.

HSCP representatives, attend the Glasgow Community Planning Partnership Equality Group to support the city-wide partnership approach to equalities and its links to Locality Action Planning and support to third sector organisations.

We actively engage with communities to understand experiences of people across the range of protected groups. We regularly engage with members of the Glasgow Equality Forum (GEF), in particular the Glasgow Voluntary Sector Race Equality Network (co-ordinated by CRER), Glasgow Disability Alliance, Women's Voluntary Sector Network (co-ordinated by Wise Women) and LGBT+ Voluntary Sector Network, to ensure there is a platform to share concerns and priorities.

National Partners

In 2022, the Equality and Human Rights Commission (EHRC) initiated a programme of work to support IJB's with equality improvement work. During these sessions it became apparent that there was a support gap for IJB's and the work of HSCP's to be able to share information and collaborate with peers.

The Glasgow HSCP Lead for Equalities and Fairer Scotland worked with the Independent Scottish Care Lead, within Scottish Borders IJB to pilot a Scottish IJB/HSCP Equality Peer Support Network. The Network met throughout 2023, initially to support responses to compliance requests from the EHRC and then moving into a structured peer support network.

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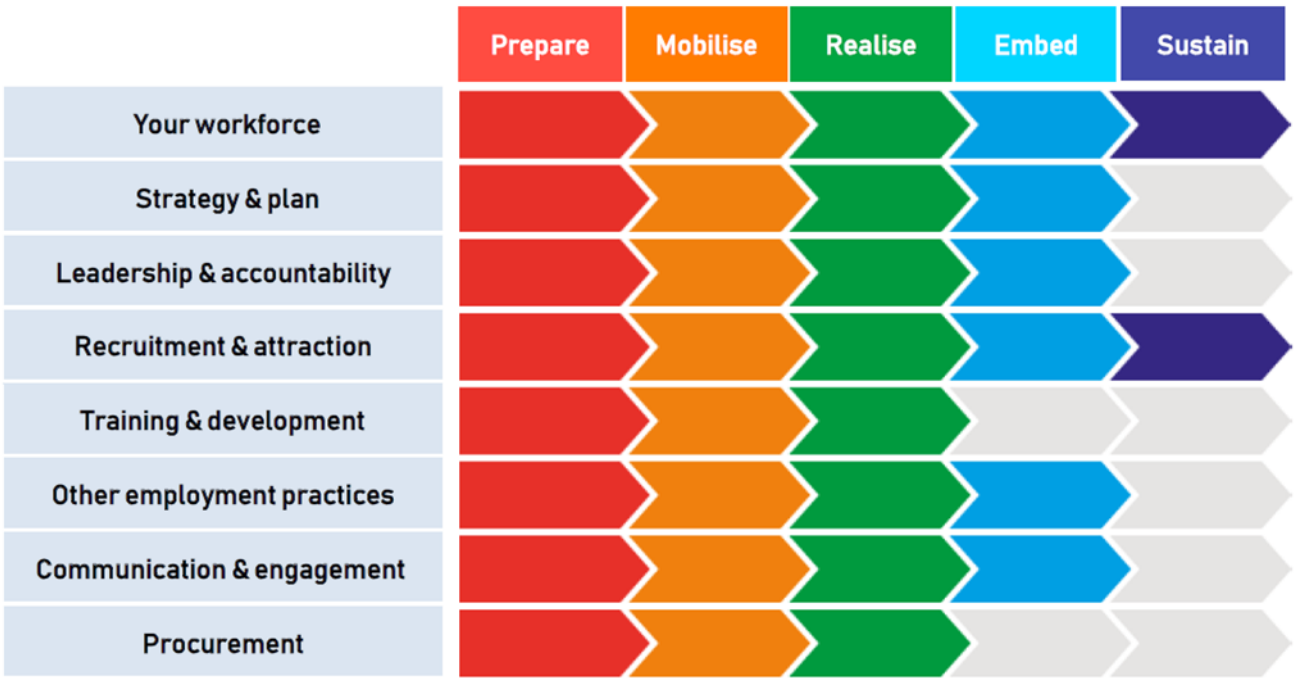
The Network meets every two months, is co-chaired by the Glasgow City and Scottish Borders equality leads, agendas are structured around a formalised presentation on issues of national priority, for example the Racialised Health Inequality Commission, NHS Education Scotland training developments, Public Sector Equality Duty review and the EHRC. This is followed by an opportunity to share good practice and raise issues of shared concern for peer support and guidance. The Network was reviewed in December 2023 and received positive feedback with agreement to continue the network and the piloted structure.

So far, the Network has had a positive impact on Glasgow's work, increasing information sharing with the EHRC and Equality Unit of the Scottish Government, as well as opportunities for shared learning and collaboration, including developing our new Equality Outcomes linking to the new British Sign Language Local Plans.

Benchmarking Progress

In 2021, Glasgow City HSCP participated for the first time in the Employers Network for Equalities and Inclusion (ENEI) Talent Inclusion and Diversity Evaluation (TIDE). The TIDE mark allows organisations to assess their status in equalities and inclusion across eight mainstreaming domains. The HSCP repeated the assessment for 2023 and achieved an overall score of 69%, an increase on the 2021 score of 65%.

The organisation have maintained or made improvement across each of the categories and have demonstrated that we have realised practice for all.



There has been particular progress for procurement as a result of targeted activity by the Commissioning Team.

The average score across the participating organisations was 58% in 2023, showing that we are progressing well but still have a lot to do. We will consider how to make further progress and identify priority areas. Future action will be taken forward through the Glasgow City HSCP Equality Group.

Training and Development

Regular equality training is important for all Glasgow City HSCP staff, it gives us a sound understanding of equality, diversity and human rights and provides examples of good practice to support how we interact with service users and with one another. It is important to keep this information up to date and we encourage everyone to refresh their training, every year, through the employing organisations e-learning platform.

- Across NHS GG&C HSCP staff 88.9% have completed their statutory mandatory Equality and Human Rights module.
- Across Social Work HSCP staff 1,317 staff have completed their Equality and Diversity Awareness module.

There have been a number of training opportunities over the last two years, some of which are included under the Equality Outcomes Progress Report. In addition, there have been key developments to improve understanding of equalities and equalities sensitive practice.

We have introduced regular monthly equality training communications to promote the learning opportunities available to staff and to encourage everyone to keep this information up to date. This includes the core e-learning module, other training opportunities through third sector partners, NHS Education Scotland and Employers Network for Equality and Inclusion (ENEI). 267 staff have registered for ENEI, it is noted that staff may have accessed multiple webinars and training through their registration.

A range of face to face equality and diversity training is available for staff, which is covered throughout this report.

Equality is a key theme of our Promoting Positive Behaviour training, delivered to children's houses, older people residential and day care, homeless residential and learning disability staff. This training is a core course as part of induction and then an annual refresher. During 2022 and 2023, this training was delivered to approximately 400 staff across all care services and approximately 360 staff as part of induction.

Dementia Training

In response to the Scottish Government's Dementia Strategy and to ensure that training is in line with the Promoting Excellence Framework, Glasgow City HSCP developed a course with Glasgow Caledonian University. The course is a 2-day skilled programme, accredited with 3 Scottish Credit and Qualifications Framework (SCQF) points. Completion of this course is recognised as prior learning for other qualifications staff will undertake as part of their professional development. This course was paused due to Covid-19, but restarted in September 2023, with 19 people attending the course. This will be further rolled out in 2024, with one course a month and 144 places available.

Social Work homecare staff induction includes a half day of dementia informed training. 461 new starts received this training in 2022 and 2023.

Sensory Loss Awareness Training

Aligned to the implementation of the See Hear Strategy, a training programme was developed to raise awareness of sensory impairment specifically in relation to blindness, visual impairment, deafness and deaf blindness and provide participants with the understanding and knowledge to influence work practice and service delivery with more positive outcomes for the service user. Prior to the in person course, staff were required to complete e-learning modules on Deaf Awareness, Sight Loss Awareness and Deafblind Awareness. During 2023, there were 7 courses delivered to 67 staff. Feedback for the course was very positive:

'I found the blindfolded practical very helpful as it gave me a sense of how to assist someone who is visually impaired and allowed me to practise the techniques I had learned. I found the eye condition practical helpful also as this allowed me to envisage what these conditions mean for people who have them.'

'It was useful to understand the difficulties present when communicating non-verbally. I also found it useful to learn about the different methods of communicating.'

Hate Crime Awareness Training

The Hate Crime Awareness training forms part of a multi-agency approach to tackle hate crime in the city and within the context of wider Public Protection aims to support staff increase awareness of the subject. Glasgow City Health and Social Care Partnership have committed to offering hate crime awareness training to staff and to social care providers across the city.

The course is delivered in partnership with Police Scotland, The Advocacy Project and staff from Glasgow Heath and Social Care Partnership. During 2023, 4 courses were delivered to 110 staff. Feedback for the course was very positive:

‘Very engaging and informative. Now more aware of what constitutes hate crime and where and how to report it.’

‘It was very insightful, and the case studies made it easier to understand how hate crimes can impact people's mental health.’

NHS Education Scotland – TURAS Learning

NHS Education for Scotland (NES) is an education and training body and a national health board within NHS Scotland. We are responsible for developing and delivering healthcare education and training for the NHS, health and social care sector and other public bodies. GCHSCP are committed to supporting our staff in learning and sharing best practice. The Lead for Equalities and Fairer Scotland is a member of the Equality, Diversity and Inclusion Trainers Network, with other members of Public Bodies to develop shared resources and share good practice. During 2023, the network supported the development of the new Equality, Diversity and Human Rights Module, led by NES.

Primary Care – Listen and Learn

The Primary Care Improvement Team in Glasgow City HSCP organises monthly Listen and Learn sessions chaired by Gary Dover, Assistant Chief Officer, Primary Care and Early Intervention. These sessions give HSCP and primary care contractor staff the opportunity to hear about work taking place which may be of interest to them or help them in their jobs. Staff are based throughout the city in many different locations and it is not easy for them to take time out of their busy roles to attend talks. Therefore, these are informal sessions which are held for an hour over lunchtime on MS Teams. The topics are wide ranging and have included overviews of GG&C and HSCP strategies such as Moving Forward Together (MFT) and Maximising Independence (MI). There have also been a number of sessions to support primary care equalities outcomes such as sessions on 'Improving Health Outcomes for Deaf People' and 'An Overview of Health Inequalities'. Future sessions include Gender Identity, Hate Crime, and an Overview of Equalities Training Resources. The format is a presentation for around 40 minutes on a topic of interest and some time at the end for questions and discussion.

Accessible Services

The HSCP has taken several steps to address barriers to communication in participation and accessing services. We want to ensure that people do not experience barriers when accessing our services. One way we do this is by making reasonable adjustments so that information is available in a suitable language and format that our service users can understand.

In 2023, we introduced all staff communications to raise awareness of the guidance that is available on how to request a piece of information in an alternative language or format. This includes spoken languages, British Sign Language and formats such as audio, large print or braille.

The Linguistics team, as part of the HSCP, provides face to face interpreting, telephone interpreting and translation for citizens accessing Social Work Services. The service currently supports around 70 languages across the city. We continue to support the increased diversity of communication in the city and respond to requests for certain languages. For example, the demand for Ukrainian interpreters has increased dramatically, due to the number of Ukrainian refugees within the City.

Total interpreting provided;

- During 2022 - 8,061
- During 2023 – 9,056

NHS GG&C Interpreting Service provide interpreter and translation support for NHS services within the HSCP. From January 2023 to December 2023 there were 714 written translations across Primary Care and Mental Health Services.

Procurement/Commissioning

We have been working to improve knowledge and understanding of Equality Impact Assessments (EQIAs) across the section and ensure that actions arising from the assessment are included in procurement and contract management activity. We also implemented a revised Contract Management Framework and Provider Service Return which places more explicit focus on monitoring compliance with equalities policies and training in purchased services. We are working with the Supplier Development Programme to increase diversity within the supply chain, to include businesses led by, for and with people with protected characteristics as defined by the Equality Act 2010 and the Fairer Scotland Duty. We also intend to develop an Annual Equality Return for partner providers to monitor numbers of diverse providers and give them an opportunity to share any equality monitoring data to inform service delivery, review and procurement. Further information can be found in the Market Facilitation Plan including; promoting sustainability, fair work practices and the importance of equality, human rights and maximising independence for those accessing support.

The work to improve knowledge and understanding of EQIA's by commissioning services, was evidenced in a review of changes resulting from EQIA's. Across a range of EQIA's undertaken as part of the tendering process a range of equality actions were identified and incorporated, including;

- Tender quality scoring actively addresses equalities issues, have an ethos that shows understanding of and empathises with, the circumstances and experiences of service users.

- Requirement that the provider staff recruitment and training reflect an understanding of and a commitment to the above.
- The service specification, along with the scoring process will require providers to evidence how equality issues are addressed for those with protected characteristics.
- Measures to ensure that equality data is routinely recorded will ensure equitable access to and uptake of the service can be evidenced.
- For the Joint Advocacy Strategy 2023 - 2026, there was also a commitment to employ a specific worker to meet with local Black and Minority Ethnic groups and to progress work with asylum seeking communities to ensure ease of access. This will also be within any future tendering process

Implementing the British Sign Language (BSL) Scotland Act

Work has continued to deliver the BSL (Scotland) Act. GCHSCP promote and support British Sign Language (BSL), through actions outlined in the Glasgow City Council's BSL Action Plan and the NHS Greater Glasgow and Clyde's BSL Action Plan. Below is outlined an overview of key progress within GCHSCP over the reporting period.

Staff training and awareness

The BSL Practitioner regularly provides BSL awareness and training sessions across the HSCP. Over the last year there have been targeted sessions with Health Visitors, Mental Health professionals, GP Forum and Primary Care Lunch and Learn. Feedback for the sessions is very positive.

'I think it was a useful session and feel reassured the organisation is taking steps to support staff and subsequently service users who are deaf.'

'Receiving information from someone who lives with hearing loss and gaining insight from their perspective.'

Lifelink

Lifelink is commissioned by Glasgow HSCPto provide counselling and wellbeing groups. As part of this service Lifelink is able to provide the service for Deaf People, and offers a crucial avenue for Deaf individuals in Glasgow to access counselling with a unique and highly beneficial approach. Lifelink's service ensures that Deaf clients can connect with a counsellor who not only possesses professional expertise but also shares their lived experiences. This alignment allows Lifelink to cater to the diverse communication needs of Deaf individuals, whether it involves British Sign Language (BSL), Sign Supported English (SSE), or lip-reading. It's important to note that, while Lifelink's Deaf counsellors are skilled in adapting to various

communication methods, clients are always given the choice to have a BSL interpreter present during their counselling sessions if they prefer.

The new advertising campaign by Lifelink targeted at the Deaf community in Glasgow appears to have yielded positive results. The campaign includes two types of content, a first-hand account video from a previous service user and an animated video explaining the counselling process with BSL translation. This approach caters to different preferences within the Deaf community.

From October 2022 to September 2023, Lifelink has received 25 referrals to their service. This represents a 20% increase compared to the previous year. This uptake in referrals can be attributed to the successful campaign and increased awareness of Lifelink's services within the Deaf community.

Deaf Peer Support Worker

A Deaf Peer Support Worker is employed to support a service user whose first language is BSL and who requires support from mental health services.
The role involves –

- Translation of tools and resources from English to BSL.
- Supporting patient activities and ensuring patients understand what has been conveyed by mental health professionals at their sessions
- Ensuring accessibility needs are being met across mental health services.

This role is promising with potential to improve access and support for deaf individuals. A review of the role was undertaken with key recommendations to further progress, including; an awareness campaign with mental health staff, a streamlined referral process and ongoing regular feedback and evaluation.

Social Work Services

- An external review of the Sign Language Interpreting Service has been undertaken. This review included engagement and consultation with local Deaf BSL users and staff. The results of this review and recommendations will be presented to the IJB in May 2024.
- The Sensory Services Team have facilitated delivery of 6 classes of 12 people for BSL for frontline social work staff, funded by See Hear strategy funding
- The Sign Language Interpreting Service have provided basic BSL awareness sessions for care home staff.
- Welcome video in reception at Centre for Sensory Loss explaining the service in BSL.
- Self-Directed Support Scotland Act 2013 information is available as a video in BSL for service users.

Domestic abuse Strategy

The Domestic Abuse Strategy 2023 - 2028 is the first strategy for Glasgow City HSCP that focuses on improving our services for people who are or have been affected by domestic abuse, and on improving our response to people who cause harm through domestic abuse.

The strategy describes what Glasgow City HSCP will do over the next five years to ensure people affected by domestic abuse receive the best possible care, and how we will continue to seek the involvement of people with lived experience of domestic abuse in the design and evaluation of domestic abuse services.

The strategy will make a difference for our service users and patients, for our own staff who provide services and support, and it will also make a difference to the way we engage and work with our partners in statutory and non-statutory sectors. All of this will ensure a more joined up, consistent, compassionate and timely approach to domestic abuse across the HSCP.

For the launch of the Domestic Abuse Strategy, a short film was developed. The video showcases the need for this strategy by telling the story of domestic abuse victims, perpetrators of domestic abuse and highlighting some of the services that are available to those affected by domestic abuse.

Mitigating the impact of poverty

The Fairer Scotland Duty places a legal responsibility on us to actively consider ('pay due regard' to) how we can reduce inequalities of outcome caused by socio-economic disadvantage, when making strategic decisions. We have continued our strategic priority to mitigate and reduce poverty for Glasgow and for our service users and patients. We have done this by including assessment of the impact of socio-economic disadvantage in our Equality Impact Assessments and resultant mitigation measures and through a variety of targeted programmes, including the following.

Child Poverty Action Plan

NHS GG&C and Glasgow City Council work in partnership to tackle child poverty in Glasgow. Glasgow's Local Child Poverty Action Report 2022/23 provides a snapshot of activity undertaken to contribute towards tackling child poverty in Glasgow and the impact these have made. The report's main focus is to describe work underway to better align our strategic approach to child poverty within the city. This will ensure that we maximise our resources to deliver a preventative and early intervention approach to reduce the scale, and extent to which, children, young people and families experience poverty.

Financial Inclusion Partnership

The HSCP is a key funding partner with Glasgow City Council for Financial Inclusion services across the City. This supports community based NHS staff to make direct referrals for patients who have money worries, to a range of dedicated Money Advice providers.

In Q1 to Q3 of 2023/24, NHS staff across the Financial Inclusion Partnership made 3506 referrals in total. This represents a slight decrease (9%) in referrals in comparison to referrals received in the same reporting period 2022/23.

Significantly, 70% (2,460) of the referrals were made by NHS staff groups (Health Visiting, Midwifery) engaging with families with children under 5 years old, therefore contributing to mitigation of child poverty.

In this reporting period there has been almost £3.9 million in Financial Gains for clients across the city. This was fairly evenly split between early year's clients and other NHS. £2m and £1.9m respectively.

In addition to this there has been nearly £1.14m in Debt Managed (£220k Housing debt, £917k non housing debt). This represents a decrease in debt managed, both housing and non-housing debt (9% and 16% respectively) in comparison to the same reporting period 2022/23.

Case Study

Client was referred by health visitor as client had recently had her second baby and has recently gained indefinite leave to remain status.
Client is part of a couple with two children. The eldest child is 2 years and has ASD. Partner has recently been on sick leave from work due to new illness

A benefits check revealed that the client is eligible for Universal Credit (UC), Child Benefit for second child, Scottish Child Payment and Best Start Grant (Baby and nursery). Client is also able to apply for Child Disability Payment.

The application was then made for UC, Child Benefit, Child Disability Payment & Scottish Child Payment

- Child Disability Payment – £268 per month/annual award - £3,216.00
- Universal Credit - £944.95 per month/ annual award - £11,339
- Child Benefit 2nd Child element - £14.45 per month/ annual award – £751
- Scottish Child payment - £25 per week x2/ annual award - £2,600
- Best Start Grant Baby payment - £354 (one off payment)
- Best Start Grant Early learning payment - £294.70 (one off payment)
- Total annual award - £18,555

<u>Welfare Advice Health Partnerships (WAHP)</u>

Scottish Government investment enabled delivery of an embedded Welfare Rights service in 84 GP Practices across 21 GP Clusters in Glasgow City serving deprived communities. This two year funding commitment came to end in January 2024. Funding has been secured to extend provision until September 2024
The impact of the service continues to be positive for patients. In Q1- Q3 there have been 3207 referrals made to WAHP across Glasgow City resulting in 7970 individual welfare rights and money advice cases. This achieved financial gains for patients of over £6.4m with a further £1.3 in debt managed. The majority (£800k) of debt managed was non-housing debt; this included utility arrears, personal loans and credit card use to cover essential living costs.

WAHP is a test and learn programme and Health Improvement will be working with the Improvement Service and GP Practices to evaluate the service. The national evaluation is anticipated by Summer 2024. Early findings indicate that:

- 87% of those individuals had never previously sought advice
- A third have a household income of less than £10,000
- Almost three quarters live in rented accommodation
- A third live in families with children
- A little over a third sought advice because they were unable to cope financially and about a third because they were unable to work for health reasons
- Over 80% sought advice because it was suggested by practice staff

CASE STUDY

Patient referred in for assistance to complete Adult Disability Payment review form. The patient suffers from significant mental health issues and severe anxiety about going through the review process as all previous applications had been refused and had to go through the appeal process to get award.

Adult Disability Payment review form was completed as per information provided by the patient. Patient gave consent to access medical records and appropriate medical evidence to aide completion. To ease the patient's anxiety going through the review process for Adult Disability Payment it was agreed to draft up a supporting letter from the GP to support the application. The letter was drafted and signed by the GP. This was forwarded to Adult Disability to support application.

Patient states struggling with mental health as no support in place. Discussed Community Links Worker role and they agreed to a referral being made to their Community Links Worker to see what support is available for them.

The patient contacted the WHAP advisor to get update on application as extremely upset by the process. The advisor agreed to contact Adult Disability Payment team to get update. A conference call to Adult Disability was arranged to confirm form received and with case manager to process. The advisor could then provide re-assurance to client that review is going ahead as normal and well within the time frames to re-assess claim. Advisor was also able to advise the client that payments

would continue as normal until decision made.

Adult Disability Payment review completed and the client remained on Enhanced Rates of Daily Living and Mobility and awarded until 2028. The client was extremely pleased with the award and stated medical evidence and GP support letter assisted in the re-award of her claim.

Total Financial Gains: -
Adult Disability Payment:
£172.75 x 52 weeks = £8,983.00
Total Financial Gains for all claims: £8,983.0

Workforce

Glasgow City HSCP continues to feed in to NHS Greater Glasgow and Clyde and Glasgow City Council reporting duties as required, these are not reported here to avoid duplication, in line with the requirements of the Equality Act 2010 (Specific Duties) (Scotland) Regulations 2012.
Glasgow City Council – Employee Diversity Information
NHS GG&C – Employee Diversity Information

In addition to the range of equality related supports for staff provided by the employing partners. Glasgow City HSCP undertakes a range of activity to support staff.

- Staff are actively encouraged to engage with the National Health and Well Being Hub to manage their own health and well-being and that of their colleagues.
- In November 2022, the IJB approved its' Workforce Plan, which included a focus on staff wellbeing and builds on the principles of the Staff Mental Health and Wellbeing Action Plan. An update on the plan was presented in November 2023.

Menopause Support

Work to support staff has included work around menopause support. Around 80% of the workforce in our HSCP are women who are around the age at which peri-menopausal and menopausal symptoms may occur. To help support our staff the Staff Mental Health and Wellbeing group asked various staff focus groups for ideas of how we could support staff experiencing menopausal symptoms. Feedback was that they wanted informal support with champions they could talk to and a structured educational programme.

In response to this feedback, we are running in partnership with Lifelink an online informal drop in coffee catch up for staff on the last Friday of every month, to discuss anything menopause related with peers, what has worked, what is challenging for individuals and the opportunity to share advice.

Since the sessions began in August 2023 to April 2024 there have been 19 sessions, attended by 417 members of staff, including a session for Men's Guide to Menopause targeted at male leaders.

Other examples of mainstreaming service delivery;

Culturally Informed, Anti-Racist Practice in Children and Young People's Mental Health Care

This programme of work has continued to develop following the scoping report and recommendations reported on previously. Funding was provided to a number of small, local third sector partner organisations who have delivered mental health and wellbeing prevention and early intervention work to children, young people and families in the communities they work with. This has included mental health awareness sessions for parents and carers, a weekly mental health support group for Black and Minority Ethnic young people, and culturally informed, anti-racist mentoring provision.

We have completed some initial work with one of the city's CAMHS teams including completing some reflective sessions on anti-racist practice. We will also be providing training opportunities to school counselling providers.

In February 2023 we worked in partnership with Intercultural Youth Scotland's Mental Health Project to deliver an event bringing together 100 people from mental health and youth work providers to listen to the experiences of People of Colour. The discussions were wide-ranging and powerful, and participants reported leaving with increased understanding of the issues and an intention to make changes within their practice or their organisation. During spring 2024 we will be offering further learning and networking opportunities on a more local basis, for providers to come together, share experiences and develop better practice.

A video on building a culturally informed, anti-racist mental health system has been produced.

CASE STUDY

Baba Yangu Foundation was supported through funding and partnership with Health Improvement to deliver a Healthy Minds awareness session to a group of 24 parents and carers from African and Afro-Caribbean backgrounds.

"For our community to have a space and a structure (through the healthy minds resources) to talk about mental health, discuss and share their own experiences and gain an understanding of how mental health was of particular significance for our attendees, many of whom expressed they have not experienced a space to talk about mental health in this way.

By combining food, community, a gift bag, resources and money towards travel, we created an environment that was based on care and support. It was important to us that attendees left feeling supported, heard and having gained an understanding of mental health. We firmly believe that these aspects not only enriched the experiences of our attendees but also played a part in the demand."

The providers recognised a gap in resources that recognise and address how racism affects mental health, and in response added information on racism, as well as diverse pictures to the PowerPoints and a video specific to Black young people's experiences of growing up in current times, to add context for group discussions and awareness.

Gender Friendly Nursery

The Gender Friendly Nursery (GFN) is an early year's staff training and development programme developed and delivered by Health Improvement. It involves staff training and awareness raising on gender equality and equity and reducing gender stereotypes as a public health prevention tool. The programme was evaluated in October 2022 and included recommendations and opportunities for development and progressing.

A key evaluation recommendation included developing further links with Education Services in Glasgow to take forward the work. Health Improvement have worked collaboratively with the Head of Early Years and Equalities Team within education services to agree the next iteration of GFN ensuring that it can continue to be embedded and supported by existing education structures and links with wider equalities work delivered by education.

The audit and accreditation model of GFN will no longer be offered following CPD inputs, as many early years' establishments found this onerous due to time constraints. The value of reflection was recognised as beneficial, therefore Early Years establishments will now be supported to reflect on good practice and areas of improvement, supported by the Leaders of Early Learning Team, recording improvement planning as appropriate. Learning and practice will be shared across establishments via the Leaders of Early Learning Team and Education Equalities Team. Sharing learning will further be supported via the recently developed collaborative thinking networks for Early Years establishments.

Following the evaluation, it is recognised that the name Gender Friendly Nursery could be seen as confusing. Therefore, an updated name for the CPD training (formerly GFN training) for Early Years staff, which focuses on awareness raising of gender equality and equity, and challenging gender stereotypes will be considered alongside education.

Period Dignity Update

The Period Products (Free Provision) (Scotland) Act 2021 places a duty on local authorities to make period products obtainable free of charge with a particular focus on education providers. This universal provision is not based on economic need. Glasgow City Council are responsible for implementing work and overseeing the local authority budget for this work. A Glasgow City Council Period Dignity Steering Group was set up to support this.

In late 2022 the HSCP were asked to provide a representative to attend the Glasgow City Council Period Dignity Steering Group and support considerations of period dignity product provision for HSCP venues.

Health / HSCP venues are not covered within the statutory responsibilities of The Act, however health improvement has worked with the Glasgow City Council Period Dignity Steering group with an inequalities focused lens and agreed provision for main public facing HSCP sites.

In January 2023 Health Improvement produced a paper for the HSCP Property Strategy Group to consider recommendations for provision of period dignity products for HSCP venues. A short life HSCP working group was established comprising of both health and council staff to progress implementation. A proposal was produced in July 2023 with recommendations to take this work forward in the HSCP.

In January 2024, 50 main HSCP venues received delivery of Period Dignity Products. Usage will be reviewed in 3 months and will support the Period Dignity Steering group to consider usage and future bulk order amounts for HSCP venues. The HSCP Business Development team are pursuing funding options for wall mounted dispensers via NHS endowments. Posters and signage will be displayed in HSCP venues highlighting product provision which also link to an app detailing wider community provision across Glasgow.

Dissemination of Vitamin D Supplements by Glasgow City Health Improvement to Black, Asian and Minority Ethnic (BAME) Communities within Glasgow

The opportunity of an excess supply of Vitamin D from Scottish Government Shielding boxes became available across Scotland and were distributed in Glasgow from January–June 2022.

Staff worked in partnership with NHSGG&C public health and community dietetic staff to target and deliver this opportunity for the best public health impact and to reach equalities groups who would benefit most. BAME groups were targeted as at heightened risk of Vitamin D deficiency. It was also noted that there were networks in Glasgow of community organisations/religious groups to assist with distribution.

NHSGG&C already provide free Vitamin D supplements to all pregnant women, breastfeeding women and those under 3 years old. By offering this short supply of

Vitamin D tablets to adults within the BAME community the aim was to inform and normalise Vitamin D use, potentially improve the knowledge of current free vitamin programmes, and future use for those eligible. It was recognised that some recipients may currently be eligible and receiving free vitamins and support to manage any overlaps were part of the distribution process.

This work enabled staff to engage with over 37 organisations in the city who work with diverse communities and to distribute a four week supply of Vitamin D tablets to 2922 adult beneficiaries. Further information can be accessed in the report to the IJB Public Engagement Committee.

Glasgow Intensive Family Support Service Group Supervision process

In a collaborative effort to enhance professional development of Glasgow Intensive Family Support (GIFSS) staff, a group supervision process has been developed involving a multi- disciplinary team that includes Speech Language Therapy practitioners.

GIFSS Group supervision sessions are held weekly and are attended by all practitioners supporting families. Each pod (team) has approximately 12 staff in attendance, and four staff each week have the responsibility to complete paperwork in advance about a particular family they are working with, in order to support reflective thinking about next steps. The paperwork is collated by the pod lead (who is a 3rd sector manager) who has responsibility for setting up the session, collating the paperwork, preparing practitioners to present the family's circumstances, and facilitating the discussion.

During the group supervision session, the GIFSS practitioner outlines the background, highlighting the strengths and goals of the family. All staff present then provides feedback, coaching each other to consider the implications and opportunities associated with the Framework for Practice. SLT colleagues join the group supervision on a monthly basis, providing an opportunity to work collaboratively to meet the needs of families with neurodiverse and additional support needs. Although this is a relatively new arrangement, feedback from workers suggests that including SLT practitioners within the group supervision process has been particularly helpful in supporting effective and consistent approaches to communicating with neurodiverse young people.

CASE STUDY

Family A was first introduced to the service because the young person (aged 15 years) was displaying violent behaviour towards their parent, was frequently running away from home and showing disinterest in school engagement. There was specific emphasis on the young person's relationships at school. During the group supervision session, the practitioner raised concerns about this as a starting point for intervention and highlighted the positive relationship between

the young person and their sister.

SLT contribution:
The Speech and Language Therapist played a pivotal role in encouraging the team to develop a strategy to leverage positive outcomes from the relationship between the young person and their sister. They suggested engaging the young person in a discussion to explore the aspects of the relationship that were particularly beneficial and could possibly be a focus for improving the young person's social interactions at school.

Additionally, the SLT practitioner enriched the discussion by exploring neurodiversity within the wider family. This aspect prompted a valuable exploration of how understanding and responding to neurodiverse needs could contribute to a more comprehensive approach in supporting the young person and the family as a whole.

Collaboration and Lessons Learned:
A collaborative approach during group supervision improved problem-solving, leading to a targeted strategy that recognised and built upon the positive aspects of the young person's existing relationship with their sister. Additionally, the young person was connected with the Glasgow Virtual School to ensure ongoing support following their involvement with the GIFSS service.

The team's heightened awareness of neurodiversity within the family played a crucial role in adopting a more personalised and inclusive support approach. This showcases the efficacy of a collaborative group supervision approach in understanding and addressing the complex needs of families, contributing to more tailored, whole family support with improved outcomes for all family members.

Reaching Milestones

Reaching Milestone's is an Empower Women for Change project which commenced in November 2022 and was funded by Glasgow City Health and Social Care Partnership (HSCP) as part of the Maximising Independence programme. The purpose of the project was to engage with women from the BME and refugee and asylum-seeking communities regarding their experiences of accessing and utilising health and social care services within Glasgow.

The Reaching Milestones project conducted eight art workshops that encouraged creative expression and dialogue around health and well-being. The workshops used a range or art mediums including; Mandala Art, Acrylics on Wood, Stencilling, Felt Brooches, Acrylic Painting on Wooden Circles, and Glass Painting. These activities enabled participants to express themselves and facilitated meaningful discussions. The workshops were inclusive, bringing together individuals of various ages, nationalities, and geographic backgrounds,

enriching the exchange of perspectives and experiences.

Key themes that emerged included; lack of awareness of cultural needs; language barriers to accessing services; a sense of urgency if life threatening condition but not experiencing a preventative approach. Broader issues were identified such as stigma in education and the resilience of the community- a sense of hope that change is possible.

The launch of The Reaching Milestones report and art exhibition took place on the 27th February 2024 at the Gallery of Modern Art (GOMA) where the key findings and recommendations were highlighted and feedback received from participants on how the project has positively impacted on them.

Progress towards the Equality Outcomes

Introduction

Under the Equality Act 2010, public sector organisations are required to publish a set of Equality Outcomes every four years and publish progress towards the outcomes every two years. In 2020, the IJB published its second set of Equality Outcomes for 2020 – 2024, the outcomes were developed in engagement with stakeholders, citizens and staff. A progress and mainstreaming report was published in 2022, at the mid-point of the Outcomes.

This report presents the final progress update towards the Equality Outcomes for 2020 – 2024.

The seven equality outcomes are:

1. That family support strategy beneficiaries report good person-centred support and delivery that improves children's outcomes across those with protected characteristics and experiencing poverty.
2. Through the Maximising Independence Programme more users report that they are supported to live an independent life in a homely way, via the delivery of supports and advice.
3. Improved patient experience of primary care for people with protected characteristics and experiencing poverty.
4. Improved use and experience of Mental Health Services of BME patients in need.
5. Improved care and health outcomes through advancing equalities practice across all HSCP services.
6. The planned 'Parkhead Hub' (the integrated social and primary care, mental health and community hub) will be developed to have equalities at the heart of its culture and design.
7. The IJB members and Senior Management Team provide leadership in progressing the equalities culture of the organisation.

A progress update against each of the actions to deliver the outcomes is presented below. This represents progress for 2022 to 2024, further detail on previous activity to deliver on the equality outcomes can be accessed in the progress and mainstreaming report 2022.

Equality Outcomes Progress

This section presents detail of activity for 2022 to 2024. Further detail on previous activity to deliver on the equality outcomes can be accessed in the progress and mainstreaming report 2022.

Outcome 1: That family support strategy beneficiaries report good person-centred support and delivery that improves children's outcomes acrossthose with protected characteristics, and experiencing poverty.
Action 1. A published Family Support Strategy which responds to the published EQIA, with specific consideration of gender based violence and wider gender issues, pregnancy, culture and language and disability related family support issue.
Complete. A full progress update, including a case study can be accessed in the Glasgow City HSCP Equality Outcome Progress and Mainstreaming Report 2022. Glasgow's Family Support Strategy 2020-2023 is available on our website along with the EQIA. As part of ongoing work to deliver the Strategy, a Family Support tender was developed. This commissioning framework has a focus on early intervention and prevention and intensive family support. Regular monitoring for equalities was put in place to monitor accessibility of services for all of our families across the city. Through this monitoring some gaps in provision across the City were identified, which have been addressed through investment in community mental health and wellbeing supports, continued increased investment in health visiting, development of a new domestic abuse strategy, and alignment of the Child Poverty Pathfinder and Whole Family Wellbeing development work to work towards the full and effective implementation of GIRFEC. GCVS coordinated research during 2022/23 to understand families' needs as part of the Children's Services Planning Partnership's efforts to keep the Promise. This involved exploring families' needs and reinforced the direction of travel which is focused on consistent strengths-based practice and trauma informed support for families, taking into account the diverse range of needs of families in Glasgow. The research also highlighted that needs have been further exacerbated by Covid and the cost of living crisis, and in particular in relation to mental health. A refresh of Glasgow's family support strategy for 2024-2027 is in progress, with work ongoing to align the strategy with the Glasgow Promise Plan, Child Poverty Pathfinder and Whole Family Wellbeing work, continuing to focus on supporting families within communities using strengths-based approaches and building families' readiness to engage by addressing sources of immediate stress and distress.
Action 2. Deliver two commissioning frameworks: Early Intervention (pre-birth to 12 years of age) and Intensive Family Support (12+) that provides routine equalities monitoring and reporting from all funded organisations within this multi million investment programme.

Complete. A full progress update can be accessed in the Glasgow City HSCP Equality Outcome Progress and Mainstreaming Report 2022.

The Intensive Family Support Service (12+) has been embedded delivering strengths-based support to families based on the STRENGTHS principles and Voice, Validation & Hope model. Early Intervention (pre-birth to 12 years of age) providers are delivering their own models of strengths-based support across the city aligned to the Voice, Validation and Hope model developed by the HSCP and third sector partners within the Glasgow Intensive Family Support Service. Both services are working alongside families to promote participation, voice, seeing families as experts in their own lives and promoting choice for families.

Following the full implementation of the early intervention (0-12) family support service (EIFS) provision in October 2021, there was additional investment in March 2022 to open up the referral pathway to Health Visitors citywide to support families with children aged 0 – 5 years, providing the opportunity to address the needs of families with protected characteristics through a non-statutory route. This decision was taken in response to a consultation survey with Health Visitors in December 2022 which highlighted the need to improve the accessibility, range and quality of family support available to meet the full range of families' needs at the point they first emerge.

A refresh of the Family Support tender to deliver Locality and Intensive Family Support Framework Contracts for Early Intervention (pre-birth to 12 years of age) and Intensive Family Support (12-18 years) for 2024-2028 (with flexibility to continue for an additional 3 years) has been completed. This builds on the successful elements of the current commissioned Family Support services and is also taking into account learning from supporting families throughout the pandemic and cost of living crisis. The tender process is now complete, and the new contract will be awarded to the successful bidders with a commencement date of June 2024.
Full evaluation of the Early Intervention and Intensive Family Support services is in progress. Current data available suggests that families accessing family support services are disproportionately affected by multiple deprivation, based on the Scottish Index of Multiple Deprivation (SIMD) for 2020. Around 55% of families supported during the current contract (2021 – 24) reside in areas that are amongst the top 10% most deprived in the country, compared to the Glasgow average of 30%. Ten percent of families supported to date reside in areas in the top 1% of the most deprived in Scotland.

Information and learning from an informal review conducted with the six individual Family Support Service Providers who deliver family support for both Early Intervention and Prevention and Intensive Family Support services suggested that family support services meet a range of needs of families with protected characteristics, including families at higher risk of impact associated with poverty. The main needs of families identified by practitioners related to poverty, mental health needs of parent and/or child, additional support needs, neurodiversity and English not first language. Collating equalities data on all of the family members is

being explored, with an aim of having a process in place for the commencement of the new services.
Action 3. To open HSCP equalities training opportunities to all organisations funded through the frameworks and host family support equalities learning events for each framework in 2021.
Ongoing. Seven out of 23 training places for Fear-Less Triple P Programme have been allocated to third sector practitioners delivering Family Support Services commissioned by the HSCP; a remaining 2 places have been allocated to third sector practitioners delivering family support to Glasgow families under a different funding arrangement. A review has been carried out to capture the learning from the development and delivery of the family support services so far, which has fed into the new tender and has also informed the development of a more robust approach to capturing equalities data and analysis and use of this of this data to shape services moving forward. The intensive Family Support Service (12+) now delivers group supervision to all 3rd sector practitioners to encourage reflective practice and ensure that the framework for practice is embedded. In addition, formulations and sequencing tools have been introduced to support a robust understanding of families' needs and the most sustainable interventions to support them, particularly for those families with protected characteristics. NHS Education for Scotland (NES) has launched the Introduction to Equality, Diversity and Human Rights training on TURAS, which is now available to HSCP staff and partners. The informal learning review conducted with the six individual Family Support Service Providers highlighted that the partners continue to be proactive at sharing learning and training, particularly around additional support needs and mental health. The HSCP is looking to develop a more formal platform for HSCP and partner agencies to share best practice and learning between both GIFSS and EIP services. The review also highlighted the value of the intensive Family Support Service (12+) group supervision, coaching and formulation framework. Feedback from providers suggests that this integrated approach to working is highly beneficial for shared learning and benefits families facing particular challenges because it facilitates a deeper level of understanding of families' needs and fosters collaboration on appropriate intervention and support. GIFFS have recently broadened their framework by introducing a Speech Language Therapy representative who participates in group coaching on a monthly basis to offer additional support for families with neurodiverse children.
Action 4. To establish the best mechanism for equalities reporting 2022 and 2024 on the strategy and framework outlining progress made and key emergent issues to be addressed in the next period.
Further work required, ongoing. Establishment of a system for data collection that

provides baseline data for routine monitoring of equalities in relation to service impact and outcomes and the planning for future service delivery has been hindered due to issues around the capacity to make the necessary changes in the CareFirst care management systems, and the planned migration to Eclipse.

The Family Support data working group has now been established and work has commenced to look for interim solutions to establish and maintain robust collection of data for new Family Support providers going forward following the transition in June 2024.

Quarterly contract monitoring meetings based around completed contract monitoring and outcome evaluation forms have now been rolled out. It is the expectation that providers will provide routine equalities data as part of the contract monitoring process and work is currently underway to support providers to develop their data collection mechanisms to support the collation and standardisation of this enhanced dataset across all providers in order to inform continuous development and improvement.

Additional progress to date:

- From November 2022, third sector providers delivering the Intensive Family Support Service (12+) have been able to access and utilise CareFirst systems as a case record management system allowing for more consistent data collection and reporting on families' specific needs going forward.
- The contract management and outcome evaluation process routinely collect information from both the Early Intervention and Intensive Service Family Support providers on barriers to achieving good outcomes for families.
- Engagement with service users is routinely captured on the contract monitoring and evaluation form for both Early Intervention and Intensive Family Support Services.
- The Intensive Family Support Service (12+) has implemented a monitoring and evaluation framework for the service that includes seeking feedback from families on best practice, to actively inform service improvement that includes tools aimed at listening to families' voices and encouraging family co-production by considering families' strengths in care planning and identifying an outcome evaluation and rating progress (as demonstrated in GIFSS strengths-based assessment eform, exit reports, smart survey and exit surveys).

A number of further developments are planned, including:

- Implementation of routine equalities monitoring on protected characteristics as part of the referral process to both Early Intervention (0-5) and Intensive family Support Services (12+) and for referrals via the non-statutory Health Visiting pathway (0-5).
- Inclusion of e forms in Carefirst to include routine standardised reporting on equity of access to services and assessment of impact and outcomes for families with protected characteristics.
- Establishment of an Intensive Family Support working group to refine and

develop more effective data systems, which capture the range of children, young people's, and families' needs, and support future resource planning and service improvement. This will also be used as a blueprint for progressing data collection for Early Intervention Family Support services going forward.

Outcome 2: Through the Maximising Independence Programme more users report that they are supported to live a healthy and independent life, via the delivery of support and advice.
Action 1. To deliver an equalities inclusive public participation and empowerment programme for the Maximising Independence Programme, with focused and resourced engagement and ongoing dialogue with disabled people which embeds lived experience in planning and designing Health and Social Care.
Ongoing. Maximising Independence (MI) has facilitated 13 events throughout the year, engaging 425. Themes included older people's views on service provision; personalised care; ethical commissioning of services; compassionate approaches; health and social care partnerships strategic plans relating to engagement and participation. We are working closely with community organisations who are challenging the label of 'underprivileged' and 'disadvantaged' and working towards a strengths based approach. Asset and Strengths based training is being utilised as part of the Maximising Independence input to the HSCP's HSC Connect call handling and referral system. HSCP Connect staff both Social Workers and Support staff have undergone CPD relevant training via the Thistle foundation. Core MI programme have also undertaken the STILT trauma informed training. Discussion is now underway with Learning and Development and Organisational Development regarding scaling this up to offer relevant training in Asset and Strengths based approaches plus Trauma informed training opportunities to the majority of the HSCP workforce plus relevant 3rd sector partners. This will be phased over 3 years from late 2023. We are continuing to take an inclusive approach to events. Utilising transcript technology, BSL translators when appropriate, enabling time for participants to receive info prior to events in order to translate, use software to make accessible for their individual needs. A GCVS working group on accessibility is now underway and exploring best practice; supportive technologies and approaches to increase participation and access to opportunities. Respecting Covid is still here and impacts participation for people with health conditions/compromised immunity. We are continuing to provide events online as well as start to offer in person events. Work is ongoing to refresh the vision and brand for MI. Qualitative work has recently been undertaken with 30-40 service users which will inform this process. GCVS on behalf of the Maximising Independence programme continue to facilitate networking events involving organisations who represent service users with Protected characteristics. This includes work with the Flourish partnership and the three Voluntary sector networks who cover the 3 Council/HSCP areas of the City.

Action 2. To deliver a 'communities' work programme that recognises and responds to protected characteristic needs between communities, inclusive of equality networks.
Ongoing. The MI Communities workstream seeks to upskill communities and create co-operative approaches to change. In early 2021, the Workstream commissioned the Health Improvement team to develop profiles for potential 'demonstrator areas' – localities where MI could begin to engage communities in conversations about health and social care. Demonstrator areas were identified in Haghill and Carntyne and scoping conversations are under way. Themes are emerging from the work in Haghill and Carntyne. These include, Transport and how to link the local community into the development of the Parkhead hub via Outreach activities. Several locally based organisations including Peek and St Paul's Youth Forum are working with GCVS to take forward community involvement. Castlemilk Seniors Centre and Kingsway connections have now been identified to take forward demonstrator work in the South and North West of the city. This work will be aligned to the Maximising Independence Make it Local community Hubs programme and commence by summer 2024. Three specific groups have been identified to collaborate with in order to better understand the needs of those furthest from design and decision making relating to health and social care services. The first of these has begun with Empower Women for Change (EWfC) facilitating conversations with asylum seeking and refugee women. A celebration event was held to showcase the work done by Empower Women for Change on the Reaching Milestones Project in February 2024. Work to publicise the findings from the research and how these findings can influence future decision making and policy setting by public bodies such as the HSCP, NHS GG&C and Glasgow City Council is underway. Another two programmes of workshops will be facilitated this year with BME people who are deaf and the LGBT+ community. Work is now underway with LGBT Health and an initial meeting has taken place involving representatives from LGBT health, GCVS and the HSCP. A programme of training and awareness raising for a mix of third sector and HSCP staff will be delivered between April-June by LGBT Health. This will target up to 30 people face to face and around one hundred people online. Work will commence later in 2024 with the BME deaf community. In response to the identified need for more in-depth stakeholder engagement, we carried out qualitative research among people who currently, or would potentially, use health and social care services in Glasgow City. We particularly focussed on involving people from groups identified as having 'protected characteristics'. The work was undertaken by Snook consultants and findings presented in July 2023. This involved over 50 people and organisations including service uses from the third sector and HSCP staff. The findings are being utilised to inform a range of HSCP projects including the Make it Local community hubs programme and circles of support which is based on Family Group decision making.
Action 3. Deliver change care delivery models and develop further family support models with and for carers.
Ongoing. The Carer's Strategy 2022 – 2025 was approved and published in May 2022. Equalities Data was a key consideration of the strategy and influenced the

eqia, language and imagery.

Post pandemic, a key action has been to update and distribute Carer Aware leaflets. There was a focus of ensuring they reached Carers that were not digitally included and People from Black and Minority Ethnic Communities. They are available for download or as a hard copy and plans are in place to provide easy read versions of the guides, Summer 2023.

The Carer Aware resources have been created to encourage Glasgow to be a carer friendly city. The majority of unpaid carers are women and the initiative aims to reduce the negative impacts of caring responsibilities. Similarly for children, the carer strategy aims to reduce the negative impact of caring roles.

A programme of Family group decision making is being developed involving Carers and service users. This will involve linking Carers and service users up with Community based resources including Local Area Co-ordinators and staff from the HSCP's Technology Support Team. This aims to assist people to gain access to community based support services and activities. Up to 100 service users and families will be supported via family group decision making during 2024.

Tec Clinics named as Helpful Hints with Home Technology are in progress in partnership with Glasgow Libraries. This programme is a 6 month pilot that aims to support a range of people and targeted at those with Protected Characteristics to make more use of everyday technology such as Smart Phones. The pilot will be evaluated in September 2024.

Action 4. Report on the equalities outcomes resulting from the Well-being for Longer Programme in 2021 and 2023.

Complete. The Wellbeing for Longer Fund supports adults most at risk of social isolation and loneliness. This years funding was for one year for the period 1st April 2022 to 31st March 2023. Organisations that were funded in 2021/22 were invited to apply for another year's continuation funding. All 21 organisations re-applied with £580,000 being distributed.

During this period there were 3576 beneficiaries, and the following equalities information was captured:

- Beneficiaries by gender - male (948), female (1860), prefer not to say (208), do not know (531), other gender (29), transgender (46) and intersex (3). Similar to previous years, majority of beneficiaries identify as female (52%)

- Beneficiaries by age - 16-24 years (194), 25-44 years (701), 45-54 years (474), 55-64 years (497), 65-74 years (473), 85-94 years (169), Prefer not to say (188) and do not know (487). Those over age 55 years and over are still largest group of beneficiaries at 43%

- Beneficiaries by group - minority ethnic people (727), disabled people (1310) and carers (264). These figures are consistent with previous funding rounds that

disabled people make up the highest percentage of beneficiaries at 37% and minority ethnic beneficiaries at 20%. Both of these figures decreased from the previous funding period 2021/22, 44% and 24% respectively. As in the previous year beneficiaries identified as being a carer (7%). This continuous to be a low percentage and it is believed that not everyone who has caring responsibilities identifies as a carer.
Action 5. Ensure service planning and delivery takes full account of equality principals and that equality practice is embedded in service delivery and practice by engagement in our EQIA processes.
Ongoing. The MI programme is being refreshed and will have two Delivery Groups focusing on Changing the Nature of Care and Communities and Wellbeing. The groups will report on progress on Equalities outcomes, including numbers involved and representation on a 6 monthly basis. People's Panels are being undertaken with service users and communities. These will be heavily focused on Service Users with protected Characteristics. Initial work is being trialled in the Haghill and Carntyne area and this will inform the Development of the Community Hubs programme, as outlined in action 2. This activity will be ongoing throughout the life of the Maximising Independence programme.

Outcome 3: Improved patient experience of primary care by protected characteristics and by those experiencing poverty.
Action 1. Vaccination uptake equalities reporting and action required resulting from the shift from General Practice to GCHSCP delivery, reported through the Primary Care Strategic Planning Group
Ongoing. Glasgow City HSCP has continued to work with stakeholders and independent contractors including General Practice and NHSGGC Vaccination service to deliver a vaccination programme to the general population with key focus of protecting those with protected characteristics at greater health risk. NHS GG&C approach for winter programme of co-vaccination of Flu & Covid booster delivery is through mass clinics delivered by NHS GG&C central vaccination team. Provision is made at board and local level for those most vulnerable and unable to access local mass clinics. Delivery by care group when required via targeted venues to improve service accessibility and uptake. This has included: • Local engagement with GP practices and local venues i.e. Health Centres. • The vaccination bus, provides drop-in clinics promoted on NHS Inform and through general practice. • Vaccination sessions at the Mosque. There are dedicated HSCP vaccination teams to target those with protected characteristics, specific needs, most at risk and have difficulty accessing vaccination through mass clinic programme. This has included: • Dedicated GCHSCP Vaccination team has been recruited for older people and adult residential care home settings. Achieving a 95% Covid and Flu vaccination rate in 2022-23. • In-patient services and residential care homes specialist teams deliver to mental health and learning disabilities patients. • Dedicated GCHSCP vaccination team delivering vaccinations to people at home with mobility issues. The service was extended in 2023 to people with learning disabilities. • Targeted outreach clinics for those experiencing homelessness • Asylum Health Bridging Team initial assessment includes immunisation status check and vaccination uptake support. • Specialist team delivering to children / young carers. Targeted promotion and support for immunisation uptake for children who may be marginalised being addressed due to a drop in uptake in 2022-23. Child Immunisation Report. • Translation of invitations to vaccination in different languages and use of interpreting services where required for non-English speaking patients and those using sign language. • A non-routine referral pathway has been created for children and young people under aged 18 years. Staff meet weekly to review non routine referrals and arrange clinic appointments (or domiciliary visit where necessary) close to child/young person's home to ensure appropriate person centre care. • Steps have been taken to improve public vaccination messaging, ensuring vaccinations posters are available and accessible to parents and carers. Having

dedicated team available for parents/carers to call with queries regarding immunisations. We routinely engaging with health visitors/family nurses to provide update to colleagues on immunisations to support positive conversation with parents. School team are engaging with peer worker to support conversations in school around vaccinations and importance of returning completed consent forms. Additionally, immunisation team working with PHS and Young Scot to create a video and shorter social media clips which is a question and answer session between young people and staff nurse on concerns regarding immunisations.

- We continue to work closely with the NHS GG&C Equality and Human rights team to support, educate and provide vaccination promotion within the Roma community. This has resulted in increased uptake rates. We are considering how we roll this out across other areas.
- Glasgow City HSCP's Adult vaccination team have successfully completed the Winter Flu and Covid programme. This was a positive programme and in total 10,295 people were vaccinated against Covid and 10,526 vaccinated against Flu. Those vaccinated were those who live in care homes and those who cannot leave their home to attend a clinic.
- Since January 2024, as well as continuing to offer Covid and Flu vaccines to those who were unwell, or in hospital, we began the Shingles programme. This programme is for those aged 65 as well as those over 70 years old plus also including people with a Weakened Immune System aged 18-49 who have had stem cell transplant and those 50 plus who are immunosuppressed. There is a specific age criteria for this programme and a calculator can be found on NHS Inform for those who wish to find out if they will be eligible. To date we have vaccinated 765 people with the Shingles vaccines.
- In February 2024, we began the Pneumococcal vaccine programme for those aged 65 years and over plus those aged 16 years onwards considered at risk. To date we have vaccinated 906 people and plan to continue this programme in the care homes for 765 residents during the Spring Booster campaign
- We will begin the Spring Covid booster campaign on 2nd April until 30th June for those 75 years and over or those between 16 and 75 with a weakened immune system.

Action 2. Community Link Worker equalities reporting and action resulting from any lower than expected use by protected characteristic groups and a learning review of the thematic link worker role for the asylum-seeking community. Reporting through the Primary Care Improvement Plan Implementation group.

Complete and ongoing. The Community Link Worker (CLW) programme delivers via contracted providers to 80 GP practices. Allocation models have been based on SIMD deprivation measures.

In 2022/23 the programme received 12,797 referrals with 43,847 appointments delivered. Glasgow City HSCP Community Link Worker Programme Annual Report 2022/2023 | Glasgow City Health and Social Care Partnership

A deep dive into mental health and wellbeing issues within the CLW programme was undertake in 2022. Community link worker programme - mental health and wellbeing deep dive (scot.nhs.uk)

CLW's routinely request participants to complete equalities monitoring forms. The programme captures equality monitoring data from client engagements and is able to determine service uptake by protected characteristic groups. For example, a high percentage of appointments are related to mental health and well-being related support.

During 2023/24 there was a review of population data in terms of the Asylum Seeker Populations and which GP Practices were eligible to receive support from the Thematic Community Link Worker. This resulted in a change of 3 practices across the city in line with higher population numbers.

With the closure of Hunter Street Homeless Clinic, the Homeless Thematic CLW assisted in the registration of patients who were being displaced. The available Homeless Population numbers across the city were reviewed and realigned the Homeless Thematic Community Link Worker support to those GP Practices who had the highest numbers of homeless populations. Close links were maintained with the Complex Needs Service and referrals continued during the transition period.

A revised EQIA was published in September 2023 in advance of a new contract commencing in April 2024. The new contract period (April 2024/25) has been designed taking into account key areas such as Trauma Informed Practice, requirements to complete and supply demographic and equalities data along with embedded routine enquiry* for patients who access the programme and support options will be based around need and these factors. There will continue to be monitoring of this data and as part of Contract Management to review service delivery and highlight any areas with gaps or opportunities.

All CLWs receive core & specialist training as part of their programmes Induction & training plan. Service user engagement data has supported the provision of a wide variety of staff training including: ASIST (Applied Suicide Intervention Skills Training); Safe to Say (adult survivors of Childhood Sexual Abuse); Financial inclusion: Alcohol Brief Intervention (ABI), Gender Based Violence; Vicarious trauma and NHS Interpreting Services including information and pathways regarding accessing translation services.

The programme reports to the Primary Care Leadership Group on a six-monthly basis via workstream reports and to the Scottish Government via the Primary Care Improvement Plan Tracker. Both reporting mechanisms requires consideration to be given to impact of funding on equalities.

* Routine Enquiry covers areas such as but not exhaustive of Gender Based Violence, any violence or abuse situations, abusive of financial situations, trauma experiences, health harm behaviours or any adverse life experiences.

Action 3. Equalities Training and staff development for HSCP primary care staff delivering the PCIP.

Ongoing. A variety of training and staff development has been actively promoted across primary care, including;

- HSCP newsletter and NHS GG&C Core Brief have provided all staff with opportunities to access and the requirement for equalities training. E.g. Neuro diversity and Workplace Inclusion, Domestic Abuse strategy & Inclusive Leadership.
- All NHS GG&C staff have been offered a series of training sessions on how to undertake EQIAs. Primary Care Improvement Team staff have attended.
- All Community Link Workers have completed the *NHS Equality Diversity and Human Rights* Learnpro module (although they are not HSCP staff), this is now a core component of Community Link Worker induction.
- An equalities training plan has been established and being delivered for PCIP funded contracted service providers.
- The Primary Care Improvement Team in Glasgow City HSCP organises monthly Listen and Learn sessions for HSCP and primary care contractor staff. The informal sessions provide an opportunity to hear about work taking place which may be of interest to them or help them in their jobs. There have also been a number of sessions to support primary care equalities outcomes such as sessions on 'Improving Health Outcomes for Deaf People' and 'An Overview of Health Inequalities'.

Steps have also been taken to increase uptake within General practice, including;

- A practical demonstration session to encourage Learnpro registration for GP practice based staff was held to support staff to access the learning site and the '*NHS Equality Diversity and Human Rights'* e-leaning Learnpro module.
- An overview of the range of available equalities training & development for staff including signposting to the *'Equalities & Human Rights'* module on TURAS.
- Support & possible solutions to equalities challenges was outlined at a Practice Manager's event e.g. Access to Work grant scheme & outline of the interpreting service & printed document translations.

Action 4. Promote and increase awareness of Hate Crime Campaign.

Ongoing. The Hate Crime Awareness training forms part of a multi-agency approach to tackle hate crime in the city and within the context of wider Public Protection aims to support staff increase awareness of the subject. The course is delivered in partnership with Police Scotland, The Advocacy Project and staff from Glasgow Heath and Social Care Partnership. During 2023, 4 courses were delivered to 110 staff. Feedback for the course was very positive. As part of activity to support our new equality outcomes, there is a commitment to widen access to the training across the Glasgow Health and Social Care Partnership.

Hate Crime Awareness Week 2022 and 2023 was promoted through Twitter and sharing of partner organisations communications.

Action 5. The development of an inclusive mental well-being programme within primary care to inform future HSCP service developments.

Ongoing. A range of mental health commissioned services are funded as part of PCIP and are embedded within Primary care. Services are open to all Glasgow GP practices for all Glasgow residents within age range & who meet service criteria. These services are: Lifelink (counselling and wellbeing classes), Compassionate

Response Distress Service (CDRS) (for those presenting in distress to primary care) and the Youth Health Service (providing holistic support to young people age 12-19).

As part of the work undertaken within the mental wellbeing programme, the commissioned services play a key role in supporting and connecting people into other supports and services such as housing, financial inclusion services, carers organisations, local groups and forums.

Appointment lengths and times with service users will vary between services and especially for those who require an interpreter in recognition of communication complexities. Lifelink have internal provision for counselling with a BSL counsellor. Across all services, there have been significant challenges within the provision of interpreting services in a timely manner. These issues are logged and flagged with the Interpreting Service.

Equalities data collection and monitoring is undertaken to continue to understand and improve service provision for users.

Work to develop and pilot of an inclusive mental well-being programme in primary care (mental wellbeing hubs) is no longer underway. Significant work took place to plan for this work including service mapping, literature reviews, community consultation and staff workshops. The funding aligned to this programme from Scottish Government is no longer available and work therefore is unable to proceed.

In 2022/23:
CDRS – 4,868 referrals were with 33,078 contacts. A young person's enhanced pathway for 16-25 was introduced and received 502 referrals.
YHS – 1,897 referrals with 1,229 people engaged in service.
Lifelink – 7,783 referrals with 19,275 appointments. 174 wellbeing groups with 1,720 attendees.

An evaluation of the Compassionate Response Distress Service was undertaken and published in December 2022.
Glasgow City Youth Health Service Annual Report 2022 - 2023 (scot.nhs.uk)
Health improvement annual report 2022-23 (scot.nhs.uk) details a number of work areas above.

Action 6. Production of an equalities report on the term of the PCIP funding, and progress across work streams, included within IJB papers on primary care.

Complete and ongoing. The Primary Care Action Plan (PCAP) 2023-26 was approved by the IJB in September 2023. As part of PCAP we have completed a strategic equality impact assessment (EQIA) on the plan.

To support the development of the PCIP and the EQIA, the Primary Care Improvement Team undertook a wide variety of engagement events to gather the views of primary care contractors, HSCP staff and service users on primary care services. The primary care improvement team staff have actively engaged with communities to involve a broad range of people, including those from equality

groups, to understand their perspectives, concerns and priorities when accessing and using primary care services. To ensure the engagement sessions and meetings were easily accessible, several methods were used to engage.

The PCAP and EQIA include equality actions. These will be included within progress reports on a 6 monthly basis. Actions are;

- General Equalities Staff Training.
- Specialist Equalities Staff Training.
- Increase Access to Healthcare for non-English Speakers.
- Equalities Data Collection.
- Shared Learning from EQIAs.
- Equalities Data Analysis.
- Community Engagement with Individuals & Groups with Protected Characteristics.
- Sharing Local Equalities Research & Learning.
- Equalities Monitoring

Scottish Government reporting on PCIP Tracker requires consideration to be given to impact of funding on equalities and this is reported on a six-monthly basis and published. Glasgow City HSCP has continued to use these reports to raise the challenges for the city.

Work streams are required to ensure consideration of equalities in all areas of service planning, including development and implementation, with evidence that some work streams have adapted their model to ensure effective access for hard to reach groups. This includes the example outlined at action 1 above. A number of services have been developed as part of the delivery of transformational change within Primary Care and the PCIP funding to respond to the equality challenges within Glasgow City e.g. phlebotomy and treatment room, CLW and VTP home visiting programme.

A number of the PCIP funded programmes & services have commissioned further local research to gain evidence about the experience of equality groups engaging with the service. Compassionate Distress Response Service (CDRS) service user evaluation data demonstrated a significant number of young service users. As a result, the service has expanded to include 16+ age group as part of a Young Persons CDRS with an enhanced referral pathway.

Outcome 4: Improve equalities sensitive practice in the design and delivery of specialist mental health services, HSCP services responding to distress and wider public mental health
Action 1. Improve data recording of ethnicity and LGBT status in mental health services and report on this.
Complete and ongoing. Since 2022, the percentage of individuals who have their ethnicity recorded when receiving care from Mental Health services has increased. From just under 65% in 2022 to 73.5% in February 2024. Work is ongoing to continue to make improvement. The EMIS Web lesson plans now include direction for admin and clinical staff to review all information contained within the Patient registration field and update as required. This field includes information on; Gender, Religion, Marital Status, Ethnicity, Country of Birth, Date of Entry to UK, Main Language and if an Interpreter is Required We have also created additional clinical templates to capture Veteran Status and Additional Patient Information such as Patient Proxy and Equality Monitoring. The aim is for these templates to be agreed and rolled out with communication and direction from the Mental Health Clinical Governance Group.
Action 2. Engage BME communities in reviewing patient pathways to make improvements where required.
Ongoing. Mental Health services has a Mental Health Network which is a contracted service to ensure we have a permanent voice for those with mental health issues in our planning and delivery of services. Following the audit of its members the Mental Health Network are actively trying to source group members from minority backgrounds. Network also support the delivery of the Scottish Patient Safety Climate Survey which has data on ethnicity and which, as a report, (pre-COVID) is considered by the clinical effectiveness meetings structure. Further work has progressed with the Mental Health Foundation and a local Springburn Group. This group will also be utilised to scope members for a proposed BME reference group. The Mental Health Network have secured additional funds to facilitate further focus groups, members of the Mental Health Foundation and Springburn Group will participate. The Mental Health Network are collating information monthly around protected characteristics. This followed on from the updated patient questionnaire across both inpatients and community services. Work is ongoing to look at methods of engagement/barriers to gaining feedback from BME communities.
Action 3. Develop wellbeing informed service provision within primary care and mental health services, considering patient needs and removing barriers.
Incomplete. Ongoing associated activity. Wellbeing Hubs were proposed in Glasgow City as a response to Scottish Government recovery and renewal priorities to develop Mental Health and Wellbeing in Primary Care Services (MHWPCS). Planning / development within NHS GG&C has been progressing but is now paused following guidance from the national MHWPCS Group (also paused Dec 22) which is

yet to be reconvened by the Scottish Government. Currently there is no direction on funding for 2023/24 (or beyond) and this affects all partnerships in NHS GG&C. Substantial slippage in timing and anticipated reduction in the level of national MHWPCS investment will require refreshed local plans to be developed.

While Mental Health is not one of the six priorities under the memorandum of understanding for the 2018 GP contract, urgent care, additional professional roles and community links workers all have components impacting on mental health. Glasgow City has elected to invest (equivalent to 5.7% of the Primary Care Improvement Fund) in services that contribute to mental health (separately to the Community Link Worker programme) enabling access to counselling and group work for patients, a compassionate distress response service (CDRS) for patients aged 16+ and a dedicated Youth Health Service in nine evening hubs across the city.

Community Links Workers (CLWs) are embedded in 57% of GP practices in Glasgow City (80/141) with allocation weighted towards deprivation. Almost three quarters of appointments relate to mental health and wellbeing, with CLWs linking patients to groups, activities and services, support with housing, welfare and financial support, support in distress and life structure. CLWs provide support for those who do not meet specialist mental health services thresholds, and provide support that complements specialist services where they do.

Action 4. Child and Adolescent Mental Health Services to achieve the LGBT Youth Charter Mark.

Complete. A full progress update can be accessed in the Glasgow City HSCP Equality Outcome Progress and Mainstreaming Report 2022.

A group has been established to allow NHS GG&C CAMHS to continue to work to be an inclusive service that welcomes LGBT+ young people to the service and to communicate to the public and to our patients and families that CAMHS is working to understand and support young people's mental health in this context. The group will also have an ongoing focus on inclusivity in the CAMHS workforce.

We are now starting the process of renewing this award in time for December 2024 when the current award expires. Due to the large size of our organisation we can only apply for the Foundations Charter Award but this does not reflect in any way a lesser level of award.

Action 5. Glasgow City Choose Life Partnership, supported by GCHSCP, delivers specific suicide prevention responses for protected characteristic groups, where appropriate.

Ongoing. The Glasgow City Suicide Prevention Partnership (GCSPP) has a Suicide Prevention Third Sector Sub -Group supported by GCVS.
There are a number of organisations on the SP Third Sector group that support people with protected characteristics:

- Glasgow Disability Alliance
- Scottish Refugee Council
- Community Connectors (support older adults)
- LGBT Health & Wellbeing

- Epilepsy Connections
- Muslim Bereavement Support Service
- Baba Yangu Foundation

GCVS held an online event recently to explore how the third sector can be more inclusive of the LGBT+ community, using the findings from the LGBT+ Health Needs Assessment. Through this the work of LGBT Health & Wellbeing, LGBT Youth Scotland and Pride Outside was connected to the suicide prevention work in Glasgow.

Action 6. Develop the capacity of primary care and mental health services to engage with BME community service receivers as equal partners of positive change.

Ongoing. The Expert Panel on Ethnicity and Mental Health has not met in the last 12 months due to overwhelming other demands on the chairs' capacity. A consultation planning event was held last year but resulting action has been paused linked to the implementation of the primary care based mental health hubs, as outlined at action 3 above.

Work has been ongoing to increase BME representation through targeted work by the Mental Health Network to ensure a permanent voice in our planning and delivery of service. Work is also underway to scope members for a proposed BME reference group. As outlined under action 2.

Action 7. Establish a mentoring scheme for HSCP staff with people with other protected characteristics.

Ongoing. This action was delayed during the pandemic and during this time there had been a number of developments in associated research and activity. The opportunity was taken to revisit the action and consider how best to progress activity in a meaningful way that best meets the needs identified in the Outcomes. An options paper was presented to the HSCP Equality Group providing an overview of emerging research and activity related to the experience of BME people in Mental Health Services, existing related equality activity, related mainstream activity and potential options to support the delivery of this action. Existing related programmes included;

Equality Activity

- **Staff Forums and Networks** - Staff led groups of employees, established to support colleagues in having their voices heard in respect of experiences working for each organisation. Each of the forums/networks enable constructive conversations and are a powerful source of influence that feed directly into our respective governance groups.
- **Staff Equality Action Plan** - Each employing organisation also has a staff equality action plan, which is influenced by the lived experience forums and networks. Current action plans have related targeted actions. NHS GG&C - Improved reporting around take up of training and leadership programmes by staff with protected characteristics. Glasgow City Council - Examining if there are barriers to employees advancing to senior level posts in relation to disability, ethnicity, gender or sexual orientation and if so identifying opportunities to take positive action.

Mainstreaming Activity

- Career Conversations
- Coaching Conversations Skills Development Programme for Leaders and Managers
- Peer Support Network

Consideration was given to if the existing programmes meet the objectives of the outcome and if there is scope to expand existing activity to support the outcome or if other specific action was required.

The decision was made to give the emerging activity and actions time to be embedded and would continue to monitor through mainstreaming activity. This action will be revisited if further action is required.

Outcome 5: Improved care and health outcomes through advancing equalities practice across all HSCP services.
Action 1. To develop meaningful participation processes for those with protected characteristics into our EQIA processes.
Ongoing. Work has been ongoing to improve organisational capacity and capability in undertaking of EQIAs. Following formation of working group, an action plan has been developed and will be monitored through the HSCP Equality Group. Activity to date has included: • Development of a Teams Channel to host a range of equality data and research to inform assessments. • Development of an EQIA tracker to provide oversight across the partnership, promote undertaking of EQIA's, ensuring the process is supported. • Introduction of a report on potential cumulative impact as part of the budget setting process. • Promotion of access to NHS GG&C EQIA training, • One on one sessions with the Lead for Equalities to support completing robust assessments • The Lead for Equalities works closely with Business Development to provide support and guidance on EQIA's for those with an IJB paper scheduled. Engagement is a key consideration of the EQIA process.
Action 2. To develop understanding and improve practice, through training, in relation to those who experience intersectional barriers v- and to take an intersectional approach.
Ongoing. The equalities e-learning modules for both GCHSCP Health and Social Work staff, includes intersectionality. Monthly emails have been introduced to actively encourage the uptake and refresh of this training on an annual basis. In addition to the core e-learning module, other training opportunities through third sector partners and ENEI are being promoted on a monthly basis. Training opportunities include sessions on intersectional approaches. NHS Education for Scotland (NES) have developed an Equality and Human Rights e-learning module that is available to all GCHSP staff as well as partner organisations. The training was launched in December 2023 and we are working to promote this training to commissioned partners as well as members of staff.
Action 3. To implement an annual report on changes resulting from published EQIA's.
Complete and ongoing. In January 2023, an audit was undertaken on the changes as a result of EQIA's. The EQIA's were examined for key considerations and resulting action. The audit took steps to identify planned activity that appears to be as a result of undertaking the EQIA and did not include positive equality related steps which were already planned and integral to each of the overall programmes. The key themes across the changes, included: • Introducing routine collection of equalities data • Introducing routine analysis of equalities data

- Further involvement of people with lived experience in shaping the service.
- Training for staff and commissioned services
- Work collaboratively with particular equalities groups
- Referrals to support income maximisation, recognising the intersections of protected characteristics and socio-economic disadvantage
- For strategies, it was highlighted the importance of encouraging, supporting and monitoring the additional EQIAs undertaken by individual workstreams, programmes and services in the future.

The report was well received by the members of the HSCP Equality Group and it was agreed that this would be repeated on an annual basis going forward. Following the audit, it was agreed that the Lead for Equality and Fairer Scotland would introduce a supported and robust 6 monthly review process, to support and encourage active review of EQIA's undertaken. The progress monitoring of this activity will be incorporated into the annual audit report going forward and monitored under future mainstreaming activity.

Action 4. Develop our involvement on equalities issues with the people of Glasgow through our public engagement strategy.

Ongoing. Since the departure of the Glasgow Equality Forum (GEF) co-ordinator the role of Equalities Advisor on the Public Engagement Committee has been vacant. The IJBs awaits confirmation from GEF on a replacement and whether they will continue to provide support to the Committee.

We are involving our key stakeholders, including representatives from equality groups, organisations and specific communities of interest when we undertake certain activity. Examples of this include the early contact made with stakeholders prior to the engagement activity on the strategic plan and the move to engage directly with the 3rd and independent sectors to plan the agenda for the IJB Public Engagement Committee (PEC).

The new IJB Strategic Plan 2023-26 was approved in June 2023. The new Plan includes an enhanced section on equalities and mainstreaming, which reflects comments received by participants in the engagement and consultation stage of the review of the Plan. The Strategic Plan has also expanded on it's commitment to meaningful participation with all stakeholders to reiterate the importance of involving groups, including equality groups, in service design and delivery.

The PEC now includes a standing agenda item to highlight the updated consultation and engagement log, in an effort to provide Members and the public with advance notice on areas where there will be engagement and consultation activity so there is transparency and the earliest possible opportunity to be involved.

Work will continue to involve equalities groups in a timely manner when planning for activity to plan, design and implement health and social care services

Action 5. To undertake a boosted survey of the five largest BME communities in Glasgow in the adult health and well-being survey in 2021 to inform HSCP and wider community planning forums of needs and issues and how these are changing for members of these communities.

The 2022/23 Adult Health & Wellbeing survey was published in January 2024. The BME booster has been approved to progress in 2024. Work is ongoing to commission the fieldwork for the boost. It is anticipated that the fieldwork will commence early June 2024 to October 2024 and the final report will be available February 2025.
Action 6. Complete a well-being survey of the LGBT+ community within Greater Glasgow and Lothian to understand more fully the health and well-being needs related to this protected characteristic to inform future needs and plans.
Complete. This action is complete. A full progress update, including a case study can be accessed in the Glasgow City HSCP Equality Outcome Progress and Mainstreaming Report 2022. The LGBT+ Health Needs Assessment. is available on our website A co-production event with LGBT+ organisations and wider stakeholders was held in the spring of 2022 to shape the 41 recommendations based on the findings. A programme of dissemination was undertaken to a wide range of strategic groups and for a both within the HSCP and with wider community planning and third sector partners. Based on the findings, a mental health and wellbeing support service has now been commissioned and a consortium of three LGBT+ providers is delivering the service. This consists of LGBT Youth Scotland, LGBT Health and Wellbeing and LEAP Sports.
Action 7. Promote best practice in all areas of the HSCP to tackle systemic discrimination.
Ongoing. Funding was secured from the Public Mental Health Remobilisation Fund to work with Mental Health Services staff and community members to explore and address micro aggression and its impact on the mental health and wellbeing of MHS staff and the community. Stage 1 was completed in 2022 and included a quantitative survey with Glasgow HSCP staff to capture experiences of micro aggression and racism. Stage 2 included qualitative work consisting of an interview with a member of NHS staff and 2 focus groups. One focus group of refugees and people seeking asylum and the other members of staff who work with organisations who work with black and minority ethnic communities. A findings report and recommendations were produced in February 2024. Recommendations included; Increase awareness and understanding of microaggressions and how to challenge microaggressions when observed or experienced. The recommendations from this report will be taken forward as part of the activity to deliver Glasgow HSCP Equality Outcomes 2024 to 2028.

Outcome 6: The planned 'Parkhead Hub' (the integrated social and primary care, mental health and community hub) will be developed to have equalities at the heart of its culture and design
Action 1. The building will meet the accessibility requirements, be DDA compliant and have a dementia friendly design.
Complete and Ongoing: The Architect and design team are continuing to work progressively through the Staged Building Warrant with the Local Authority and all necessary Equalities Act access is being checked and verified. The building is being constructed in strict accordance with the approved design which has full compliance with the Equalities Act embedded in it. The project team are engaging with relevant stakeholders including the Disability Access Panel and Community Representatives. For example, this includes dementia-friendly colour palette with continuous floor colouring to minimise tripping hazards; flush surfaces for wheelchair access; accessible changing places etc. Consideration is also been given to places to charge batteries for mobility aids. At present, this is available within the Parkhead Health Centre, and once closed community members have flagged availability / access within the Parkhead Hub. Focus over the coming months will attend to accessibility of outdoor spaces for family contacts.
Action 2. We will continue to engage with a wide range of people as part of the development process for the hub and we will continue to make concerted efforts to ensure that people with protected characteristics can participate in the consultation and involvement activities.
Ongoing: A community investment group has been set up to help to develop the social value plan for the North East Hub project. The priority groups at the core of the plan are care experienced individuals, rehabilitating offenders and people recovering from addictions. Local community groups were invited to submit applications for the Helping Hands initiative. The Helping Hands initiative was created to support an identified local community project with materials and labour to support the upgrading of an existing community building. The successful application was from a local mental health charity working with adults with mental health conditions who are socially isolated and digitally excluded with complex needs and conditions that have a substantial impact on their day to day activities. The work included complete refurbishment of their offices and café premises to support ongoing delivery of services in a nice environment for service users. The total value of the works, including labour and donations was £130,000 pounds. Another project that involved working with disadvantaged groups was the Parkhill and Ashton Additional Support Needs Schools Outdoor Classroom. Students from two local schools achieved SVQ Level 4 qualification by designing and building the

outdoor classroom. Support continued for students who completed the course to progress into employment, with two pupils securing apprenticeships.

Work based support was also offered to service users nominated by the Wise Group supporting service users with alcohol and drug addictions. Six individuals completed CSCS and mindset training and received support for interview preparation, and ongoing support to access employment opportunities.

The Wellbeing Programme involves delivery of a range of health and wellbeing sessions for the Parkhead Hub workforce covering areas such as mental health, drugs and alcohol and general awareness raising in relation to health and wellbeing.

One of the barriers identified by asylum seekers and refugees regarding their lack of involvement in formal participation structures of both the NHS and HSCP was their limited knowledge and understanding of decision-making processes. HSCP Community Engagement officers and third sector colleagues from the Mental Health Foundation therefore ran two focus groups explaining the main services, structure and engagement opportunities within both organisations. Following these sessions, a number of Asylum Seekers/Refugees have expressed an interest in becoming involved in future engagement opportunities.

There continues to be extensive creative engagement activity (over 1,600 community members participated across 90 events in 2023). Activity rolling across 2024 includes:

- Weekly play café for mums and pre-school age children which is led by a practicing artist; participants come from the local area with a number of mums speaking languages other than English.
- A weekly art club, specifically for adults feeling isolated, lonely and / or with poor mental health – also led by practising artist.
- Saturday Sewing, self-led group of all ages sharing skills and friendship includes kinship carers, asylum seekers, adults with multiple health conditions and poor mobility, those suffering anxiety and poor mental health – the group also focuses more on healthier snacks, moving away from prepacked sandwiches, biscuits and cakes which also enables learning about different foods that many participants won't have tried.

The creative engagement programme supports a local ESOL class with 20+ participants from 12+ countries. Participants are signposted to other activity and at 3 participates are now attending other groups.

Specially created holiday programmes and theme-based workshop activity tie in with Parkhead Hub's key commissions. A week of workshops ran with youth groups celebrating Children's mental health week 5 – 11 Feb 2024. More are planned through the year.

Much of the activity running is being piloted as 'social prescribing' activity that could run out of Parkhead Hub. The Hub has a 'community network' approach to social

prescribing which is a bottom up approach gaining insight and input from a wide range of local people.
Action 3. To support this engagement, we will work with Equalities Groups to seek their input in the proposed development.
Ongoing: The Architect (Hoskins) who was involved during the design stage has followed the project through to the construction stage so they have all of the embedded knowledge of the consultation through the preliminary stages. The Architect was involved in the design and delivery of other Health Centres for the HSCP/ NSS, moreover they have been involved in the lessons learned exercises for these earlier completed facilities and a consequence they are able to apply those lessons learned to the detailing, signage and final material selection at the NE Hub. The MEP designers have integrated the desired Induction Loop configuration into the schematic design and the details are being developed with the MEP sub-contractor (FES) and their suppliers.
Action 4. The community facilitates within the hub will be designed and managed to support access by all groups, inclusive of those with protected characteristics.
Ongoing: In incorporating a library and a café, the ethos of the Hub is to create a friendly and welcoming environment with open access and a range of community groups and activities available. The building has been designed to ensure that service users can access support in a non-stigmatised environment to ensure that groups with protected characteristics are accessing services without any labelling/ separate entrances for specific services (e.g. Alcohol and Drug Recovery Services; LGBT+ Services etc.).

Outcome 7: The IJB members and Senior Management Team provide leadership in progressing the equalities driven culture of the organisation
Action 1. The Integration Joint Board will consider mid-point and final outcomes achieved reports on Equalities
Complete and ongoing: The IJB reporting process includes a prompt to consider if an Equalities Impact Assessment (EQIA) is required to support decision making. This helps to ensure that all relevant papers are accompanied by an EQIA and that the impact on protected groups are taken into consideration when introducing changes to existing policies and services, or when designing and implementing new services. This includes consideration of required engagement with relevant equalities groups as part of service design. This report is the final report against Glasgow City's Mainstreaming and Equality Outcome Actions 2020-2024.
Action 2. Drive participation with equalities led groups and organisations
Ongoing: Since the departure of the Glasgow Equality Forum co-ordinator, the role of Equalities Advisor on the Public Engagement Committee has been vacant. The HSCP continues to send information related to the Public Engagement Committee for information to the Glasgow Equality Forum. A member of the Glasgow Equality Forum continues to regularly attend the HSCP Equality Working Group to maintain this link and to share priorities. As part of the engagement approach to the review of the Strategic Plan and development of a revised Plan for 2023-26 GCHSCP updated its contact lists to ensure the inclusion of equalities groups to support the review of the Plan and future engagement exercises. The review of the Strategic Planning Groups continues to be suspended whilst the impact of the delayed National Care Service Bill makes it way through the Stage 1 Parliamentary process. The HSCP will continue to monitor progress with this and consider the potential benefits of revisiting this work against the capacity it would require to complete it within the external environment. It is expected that guidance to support the Bill will include the role of communities in driving the priorities of reformed IJBs. In 2024 Glasgow City HSCP will re-launch the Disabilities Strategic Planning Groups following work to refresh the membership and to support stakeholders to influence the strategic planning of the HSCP The new IJB Strategic Plan 2023-26 was approved in June 2023. The new Plan includes an enhanced section on equalities and mainstreaming, which reflects comments received by participants in the engagement and consultation stage of the review of the Plan. The Strategic Plan has also expanded on it's commitment to meaningful participation with all stakeholders to reiterate the importance of involving groups, including equality groups, in service design and delivery.
Action 3. Develop the equalities breakdown of the HSCP Performance Framework.
Partially complete and ongoing: Consideration of the equalities breakdown in relation to the performance framework commenced in 2023. Initial discussions took place regarding the feasibility of developing recording additional equalities data to influence the performance framework in the areas of; disability; ethnicity and; recording of equalities-related training. The feasibility work undertaken indicated that the ability to rely on current

management information systems varied as a result of the different practices and systems used by Council staff and NHS staff working within the HSCP. Steps towards this are being carried forward under the new mainstreaming actions, with a commitment to improve equality data capture and reporting across our services. Data will be embedded into reporting and utilised as part of service design and delivery, ensuring service users are representative of the population. Equality activity has been incorporated into the new Strategic Plan monitoring process that will begin reporting to Finance, Audit and Scrutiny Committee twice a year from April 2024.
Action 4. Empower HSCP staff to deliver with kindness and respect at all times: through positive collaboration with equalities led communities, organisations & networks, including supportive equalities training to staff at all levels.
The HSCP Equalities Group continues to work with colleagues from across the sector to consider equalities issues and identify areas where staff can be encouraged to undertake development opportunities that encourage consideration of equalities issues and the promotion of positive health and well-being. Staff are actively encouraged to engage with the National Health and Well Being Hub to manage their own health and well-being and that of their colleagues. In November 2022 the IJB approved it's Workforce Plan, which included a focus on staff wellbeing and builds on the principles of the Staff Mental Health and Wellbeing Action Plan. The Action Plan in relation to delivery of the Workforce Plan is reported to the IJB. The most recent update was presented to the IJB Finance and Audit Scrutiny Committee in November 2023. We have introduced regular monthly equality training communications to promote the learning opportunities available to staff and to encourage everyone to keep this information up to date. Regular equality training is important for all of our staff, it gives us a sound understanding of equality, diversity and human rights and provides examples of good practice to support how we interact with service users and with one another. Working with partners, we have established an HSCP Equality Peer Support Network to share good practice and improve collaborative working to advance equalities practice.
Action 5. Offer equalities training for IJB members.
Elected Members on Glasgow City Council, including those sitting on the IJB, complete mandatory equalities training. Equalities training is also available to non-Executive members of the Health Board at NHSGG&C. In April 2023 IJB Members were invited to respond to a short survey designed to understand their development and training requirements, and incudes exploration of their requirements in relation to equalities training. In June 2023 the IJB's Finance, Audit and Scrutiny considered the recommendations of a CIPFA report in relation to audit committees and the areas of development recommended by the Internal Audit team. These included consideration of development of an annual training plan for all members of the Finance and Audit Scrutiny Committee to ensure that

training is provided on all aspects of responsibilities. In order to establish the training requirements Members will again be approached for their views to identify training requirements over and above those explored via the survey above. The results of both surveys will be considered to develop training plans for Members.
Action 6. Strengthen the diversity of our workforce and report on this through the GGC NHS and GCC equalities outcomes as set out in the Equalities Act
Complete. Glasgow City HSCP continues to feed in to NHS GG&C and Glasgow City Council reporting duties as required, these are not reported here to duplication is avoided, in line with the requirements of the Equality Act 2010 (Specific Duties) (Scotland) Regulations 2012. Glasgow City Council – Employee Diversity Information NHS GG&C – Employee Diversity Information