

# Putting equality at the heart of Glasgow City HSCP

## Mainstreaming & Equality Plan 2016-18

Glasgow is a city of diversity in its people, places, cultures and well-being.

The Glasgow City Health and Social Care Partnership (HSCP) has a critical role to play in fostering a fairer and inclusive Glasgow.

Part of this contribution is our first Equalities Mainstreaming & Equality Outcomes plan. This sets out our equality ambitions, actions and outcomes over the next two years as a new public sector body. In publishing this plan we recognise that there may be other outcomes identified as needed during the course of this plan. We will work to continually progress our approach and deliver at least the outcomes contained here.

## Glasgow People

*What you might not know;*

- Across health and social care interpreting services are regularly used for over 80 languages. The top 4 most asked for languages are Polish, Mandarin, Arabic and Urdu.



*"I have neighbours who are Asian, their children describe having doors closed whilst trick and treating at Halloween"*

*Right Here Right Now*

- Over 20,000 adults in Glasgow have a Learning Disability



- Our minority ethnic population has more than doubled in the last decade, with growth across most ethnic groups, significantly amongst African, Polish and Roma communities.
- Glasgow formally receives people seeking asylum, in this capacity we welcome and support around 3000 people seeking asylum a year.
- Glasgow has nearly as many children under 4 years of age (35,000) as adults over 74 years of age (39,000). This is a unique young age profile within Scotland
- Almost one in every four residents live with a disability (substantially higher than any other city in Scotland), and many more people live with limiting illnesses.
- We understand that around one in every fourteen residents are Lesbian, Gay, Bisexual or Transgender (LGBT), although we have further progress to make in making it easier for service users/patients to let us know their identity.
- More than a quarter of the children under 4 years of age in Glasgow are from BME communities. This reduces to only 3% of residents over 74 years of age.

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## Glasgow Places

*Govanhill has the highest concentration of Eastern European Roma migrants in Scotland*

The likelihood of you living in poverty in Glasgow is very often based on your address. The ethnic diversity of the city also varies markedly across neighbourhoods and communities. As an example, more than half of our people from ethnically diverse backgrounds in the city live in just twelve neighbourhoods, shown below.

*"Glasgow is my place. I'm surrounded by some wonderful people. We come together, I teach them various eastern European songs, they teach me Ye Banks and Braes o' Bonnie Doon and Comin' thro' the Rye."*

*Marzanna, Migrant Voices, Glasgow*

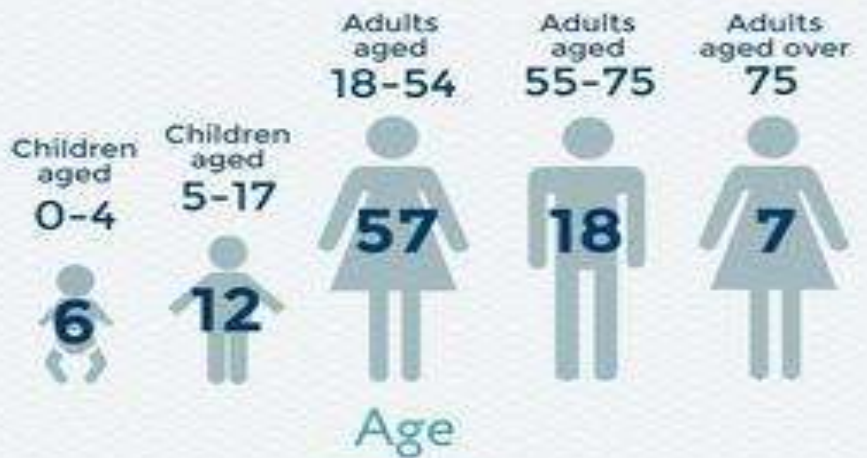
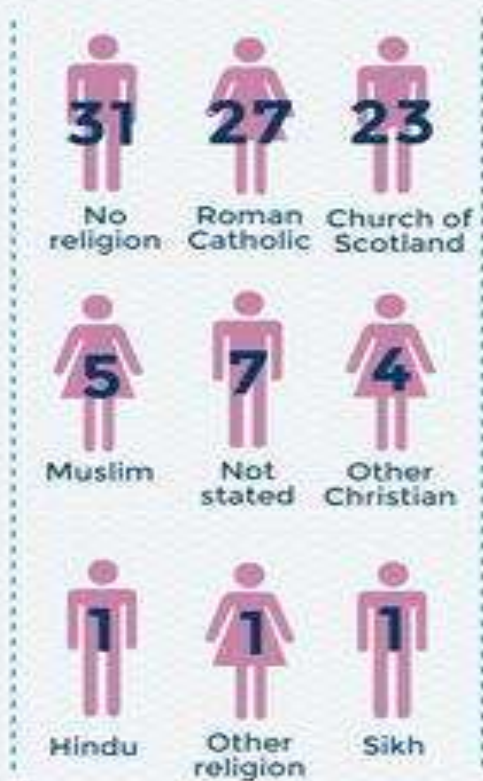
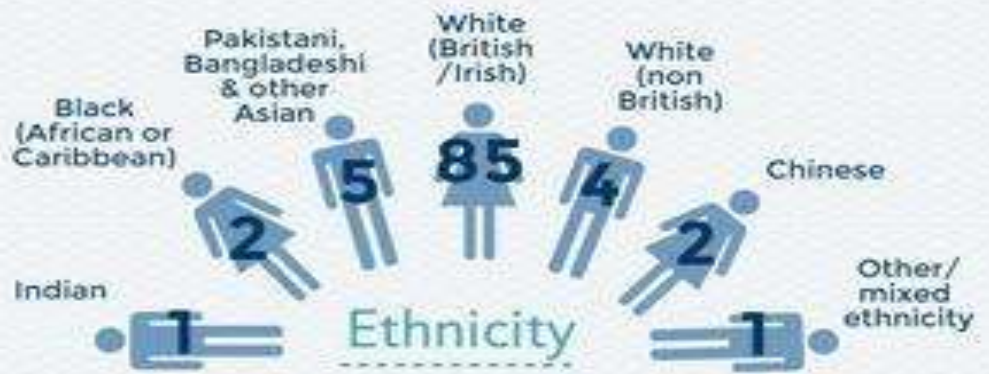
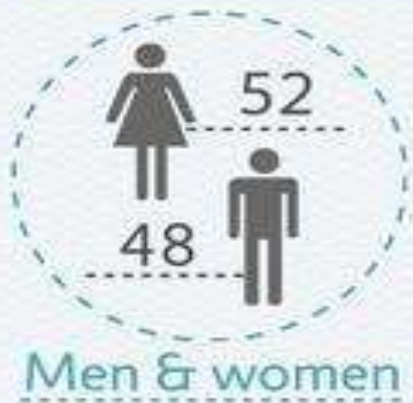


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What if Glasgow was a village of 100 people?  
 What would the population look like?

There are almost 600,000 people living in Glasgow.  
 Represented in 100 people, the population of the city looks like this:



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## The Equality Act

The Equality Act (2010), and further legislation ((*The Equality Act 2010 (Specific Duties) (Scotland) Regulations 2012*)), hold public bodies accountable for advancing equality within Scottish society.

Local Authorities and NHS Boards are listed in this legislation. In June, 2015 Integration Joint Boards (IJBs), the governing bodies of Health and Social Care Partnerships (HSCPs), were added to the Equality Act (general and specific duties).

The Act makes specific reference to groups of people who are understood to be at highest risk of discrimination. The groups are referred to as 'Protected Characteristic groups' and are defined in law as:



Glasgow City Council (GCC) and Greater Glasgow and Clyde NHS Board (GGC NHS) have published Equalities Mainstreaming Action Plans and Outcomes.

By 30<sup>th</sup> April 2016, IJBs must publish their first set of Equality Outcomes.



This provides health and social care services in Glasgow the opportunity to develop as inclusive and fair from the start.

The requirements relating to employment policies, equal pay reporting & purchasing will continue to be reported through GGC NHS and GCC, as responsibilities in these areas remain with them as employers.

As such the Equalities Mainstreaming and Outcomes of both employing bodies will inform and complement those of the HSCP.

“Every one of us is protected by equalities legislation. Some protections are life long, others protect us through certain events and circumstances”

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## Developing our mainstreaming and outcomes plan

During the development of this plan we sought to consider;

### **1. What we still need to do to tackle discrimination?**

- **To remove discrimination at all times in our services and for our staff**
- **To challenge discrimination by others**

### **2. What we can do to close gaps in access, care, treatment and outcomes for equalities groups?**

### **3. How do we better hear and work with more marginalised groups and those working with them?**

### **4. How we work with community planning partners and others to tackle wider inequality in the city?**

A draft Equalities plan was consulted on between November 2015 and February 2016. During this period 307 people provided feedback.

32 people completed an electronic survey with specific questions.

162 people participated in larger sector and citywide HSCP equalities consultation events

87 people participated in targeted meetings with specific interest groups e.g. Waverley Care, Corner Stone, LGBT Youth

A handful of written responses were received from individuals and organisations.

Equalities monitoring of some of the above activities indicated a good range of protected characteristics groups involved in the consultation.

An Equalities Impact assessment (EQIA) was undertaken on the draft HSCP Strategic Plan during the same period. This identified issues such as;

- How we recognise and work with 'intersectionality' issues (people with multiple protected characteristics)?
- How we intend to engage with equalities groups?
- Each service area should have clear equalities outcomes.

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## What we heard

The Glasgow HSCP equalities mainstreaming approach and draft Equality Outcomes were widely endorsed. The e-survey asked about perceptions of discrimination within the HSCP and there was a general sense that some form of discrimination still existed for every protected characteristic group.

The 2015 adult health and well-being survey in Glasgow involved interviewing 4,343 people (over 16 years of age) in their home. The survey asked about discrimination and 5% of respondents indicated that they had been discriminated against in the last year. When those respondents were asked who had discriminated against them they indicated;

- 46% unknown person in a public place
- 22% employer
- 17% known person in public place
- 10% police/judiciary
- 8% health care services
- 7% social services

The Glasgow approach and draft Equality Outcomes were widely endorsed. The e-survey asked about perceptions of discrimination within the HSCP and there was a general sense that some form of discrimination still existed for every protected characteristic group.



Many felt **staff understanding of equalities** could be better. Examples of **'a lack of sensitivity and patience from staff'** were shared by some during events and training on equality.

Most respondents felt **poverty** should be included, with a few responses cautioning that inclusion of poverty could dilute action on other protective characteristics.

A lot of people said: **'we want to know what it means to us'**. Some people were concerned that services will change or reduce.

Considerable feedback was given around **'better understanding on how to access services'**. Different groups suggested preferred ways for us to do this.

Most people said: **'we want information that we can understand'** including in accessible formats. High numbers of people in the e-survey wished newsletters (74%), website (58%), events (39%) and social media (39%) as means of sharing equalities developments and updates. 8 people expressed a preference for an Equalities Public and Staff Forum.

There was a small group that was interested in **representation** and said 'how are 3<sup>rd</sup> sector organisations fitting into this?' How can we influence the IJB to have a gender balance?

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## We also heard...

The issue of having the right information to assess equalities practice was raised. This included the routine collection of protected characteristic **data**.

There were a range of specific issues raised e.g. the LGBT Age reference group raised issues for older LGBT people regarding accessing care homes.

Many comments received have led to changes in the mainstreaming and equalities report here. We aim to ensure that the above themes are prioritised as we roll out our Equality Plan over the next two years.

## Our Vision

Health and social care services are part of community planning in Glasgow. We wish to adopt this vision with our community planning partners.

**To promote social justice and deliver equality in collaboration with the people of Glasgow**

**We include poverty** (those living in the worst 15% of places on the Scottish Index of Multiple Deprivation (SIMD)) as a protected characteristic group. Although this is not required in law this action has been undertaken to tackle health inequalities related to poverty,

## We will take a human rights approach.

Human Rights are the fundamental freedoms and rights to which everyone is entitled. They are built on universal values such as dignity, equality, freedom, autonomy and respect. We will apply human rights principles throughout our mainstreaming and equalities outcome plan.

## Our objectives

### To Foster Good relations and remove discrimination



- Assess the equalities impacts of our strategies and services and act on the results
- Champion Cultural change within and beyond our organisation
- Empower those using our services and staff to report and challenge discrimination in all its forms
- Work towards IJB membership which reflects the characteristics of Glasgow, starting with gender and ethnicity

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## To contribute to closing the gaps

- Staff continue to become more equalities aware through training, support and supervision, so that they can better meet the needs of the people they care for
- We can measure our performance by routine equalities reporting, where possible and relevant
- We use equalities sensitive conversations - caring conversations, in all our prevention, care and treatment services, and carry out routine enquiry on gender based violence, money worries and employability

## Listening to, and working with, people and communities;

- We work with people to develop a participation and engagement strategy that connects with equalities groups, communities and those historically less well-represented.
- We contribute to the community planning equalities programme for Glasgow as active partners

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## Mainstreaming and Equalities Outcome Plan

Glasgow HSCP Equality Outcomes & Proposed Performance Measures			
Public Sector Equality Duty		Performance Measure	
1. Eliminate unlawful discrimination, harassment victimisation and other conduct prohibited by the Act			
<b>HSCP Outcome 1</b> Barriers to HSCP services are removed for people with relevant protected characteristics	1.1	Develop and deliver the GHSCP requirements for a common communication plan, ensuring that accessible information, interpreting/translating and other communication support policy guidelines (BSL etc) are included.	1.1a Communication Strategy developed, implemented and subject to regular review. Evaluated through planned audits of service user and employee feedback via: <ul style="list-style-type: none"> <li>▪ Website</li> <li>▪ Outward facing documents</li> <li>▪ Patient/service user information</li> </ul>
			1.1b Monitor uptake and feedback on Interpretation Services to gauge service user satisfaction.
	1.2	Improve collection and usage of service user equality data to support service development	1.2a
<b>HSCP Outcome 2</b> Age discrimination in services is removed	2.1	Review services to ensure access and eligibility is based on need rather than age, unless objectively justified.	2.1a Audit services where there are existing age-related inclusion/exclusion criteria and apply objective justification assessment for each.
<b>HSCP Outcome 3</b> A Participation and Engagement strategy which is inclusive of people with protected characteristics, coproduces and works collaboratively with the HSCP to shape service development	3.1	Further develop methods to meaningfully engage with people with protected characteristics and those who are socially and economically disadvantaged.	3.1a Audit representation of service users in involvement of HSCP strategic planning.
			3.1b Monitor participation of service users in equalities learning.
			3.1c Establish systematic process to demonstrate involvement of people living in areas of multiple deprivation.
	3.2	Engage service users and carers to implement the Participation and Engagement Strategy as approved by the IJB.	3.2a

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Public Sector Equality Duty			Performance Measure	
2. Advance equal opportunity between people who share a relevant protected characteristic and those who do not share it				
<b>HSCP Outcome 4</b> Gender balance of Integration Joint Board	4.1	Encourage nominating bodies (Council and HB) to consider gender balance when appointing voting members to the IJB.	4.1a	Gender balance of the voting membership of IJB
			4.1b	Encourage uptake of equality and human rights training for IJB
	4.2	IJB to consider gender balance of membership when appointing non-voting members	4.2a	Gender balance of the non-voting members of the IJB
<b>HSCP Outcome 5</b> Diversity of individuals and groups engaged through Participation and Engagement activity	5.1	Engagement and service delivery at a local level which acknowledges and reflects the diversity of the local population	5.1a	Planned audits of service users using: <ul style="list-style-type: none"> <li>▪ Website</li> <li>▪ Outward facing documents</li> <li>▪ Patient/service user information</li> </ul>
			5.1b	Monitoring diversity of membership of representative groups engaging with IJB, HSCP and localities
<b>HSCP Outcome 6</b> Protected characteristics and wider circumstances that affect health and wellbeing are effectively addressed in HSCP services	6.1	Equality Impact assessments carried out on all new or revised plans, policies, services and strategies presented to the IJB	6.1a	Regular performance monitoring reports to IJB
			6.1b	All EqlAs published on public facing site.
			6.1c	6 monthly reviews of EqlAs
	6.2	Review Equality impact assessment to ensure that significant inequalities are identified and appropriate plans/actions put in place to mitigated its impacts.	6.2a	Review Equalities Action Plans
	6.3	Work with Community Planning Partners through multi-agency groups to increase understanding and address poor health outcomes relating to gender-based violence, unemployment/underemployment and low levels of resilience.	6.3a	Evidence of health improvement policy, plans and interventions within the Local Outcome Improvement Plan as a result of multi-agency working.
	6.4	Strengthen pathways and referrals to financial inclusion services and employability opportunities.	6.4a	Provide multi-agency training to raise awareness of referral pathways and collate and analyse uptake to determine gaps and develop improvement plans as necessary.

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Public Sector Equality Duty			Performance Measure	
3. Foster Good relations between people who share a protected characteristic and those who do not				
<b>HSCP Outcome 7</b> Positive attitudes and interactions with everyone, regardless of their characteristics, are increased among employees, service users and communities	7.1	Through our commissioned services monitor participation levels for people with different characteristics.	7.1a	All third sector community engagement contracts will be equality proofed to ensure explicit reference to the need to engage with protected characteristic groups.
			7.1b	Volunteers reflect the population profile/service user profile
	7.2	Increase the understanding of Carer Reference Group members about enhancing good relations between people who share a protected characteristic and those who do not.	7.2a	Participants in Carers Reference Group participate in equality training and increase their understanding of their responsibilities.
			7.2b	Monitoring of disaggregated data in relation to community participation.