



# Item No. 8

Meeting Date Tuesday 12<sup>th</sup> December 2017

## Glasgow City Integration Joint Board Performance Scrutiny Committee

**Report By:** Susanne Millar, Chief Officer, Planning, Strategy, Commissioning / Chief Social Work Officer  
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**IJB EQUALITIES MAINSTREAMING AND OUTCOMES PLAN**

<b>Purpose of Report:</b>	To report on progress following publication of the first Glasgow City Integration Joint Board Equalities Mainstreaming and Outcomes Report in April 2016.
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<b>Background/Engagement:</b>	Integration Joint Boards (IJBs) were required to publish Equality Mainstreaming and Outcomes plans by the end of April 2016.  Glasgow City Health and Social Care Partnership (the HSCP) undertook an engagement process (involving over 300 people and organisations) to determine the first IJB Equalities Mainstreaming and Outcomes Plan (the Plan), which was approved on the 21st March 2016.
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<b>Recommendations:</b>	The IJB Performance Scrutiny Committee is asked to:  a) note progress and reflections on the key areas for future work for the remainder of the current plan.
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**Relevance to Integration Joint Board Strategic Plan:**

Core component of the Strategic Plan across all teams.

## Implications for Health and Social Care Partnership:

<b>Reference to National Health &amp; Wellbeing Outcome:</b>	All
<b>Personnel:</b>	None
<b>Carers:</b>	As relates to equalities.
<b>Provider Organisations:</b>	As relates to equalities legislation.
<b>Equalities:</b>	This will improve equalities outcomes across services and engagement on equalities issues
<b>Financial:</b>	Within existing resources.
<b>Legal:</b>	There is a requirement to report on progress within our annual reporting and complete and publish the outcomes at the term of the action plan (April 2018).
<b>Economic Impact:</b>	None
<b>Sustainability:</b>	This programme of work will be sustained within existing resources and progress formally published in 2018 in line with requirements.
<b>Sustainable Procurement and Article 19:</b>	None
<b>Risk Implications:</b>	Compliance with the Equalities Scotland Act 2010.
<b>Implications for Glasgow City Council:</b>	To be determined in partnership with Council colleagues.
<b>Implications for NHS Greater Glasgow &amp; Clyde:</b>	To be determined in partnership with Health Board colleagues.

### 1. Background

- 1.1 The Equalities (Scotland) Act 2010 has enabled a wide range of public sector organisations to plan and report on equalities outcomes. Integration Joint Boards (IJBs) were added to the Act during 2015 and required to publish Equality Mainstreaming and Outcomes plans by the end of April 2016.

- 1.2 Glasgow City Health and Social Care Partnership (the HSCP) undertook an engagement process (involving over 300 people and organisations) to determine the first IJB Equalities Mainstreaming and Outcomes Plan (the Plan), which was approved on the 21<sup>st</sup> March 2016. This paper summaries the first year's progress.
- 1.3 The Act requirements relating to employee policies, equal pay reporting and procurement continue to be reported through the two employing bodies. As such the Equalities Outcomes of Greater Glasgow and Clyde NHS Board and Glasgow City Council continue to relate to and influence the actions listed in the IJB's Plan but are not reported here.

## **2. Glasgow IJB's Equalities Mainstreaming and Outcomes Plan (2016-18)**

- 2.1 The Plan, available at <https://www.glasgow.gov.uk/CHttpHandler.ashx?id=33417&p=0>, set out our aim to *"Promote social justice and deliver equality in collaboration with the people of Glasgow"*. This ambitious statement was developed with partners and Glasgow Equality Forum (GEF) members.
- 2.2 Human rights principles were articulated in the Plan and poverty was included as an additional protected characteristic in recognition of the inequalities challenges in Glasgow.
- 2.3 The plan set out actions and outcomes in relation to three priority areas;
- To foster good relations and remove discrimination
  - To contribute to closing the gap and
  - To listen to, and work with, people and communities

## **3. 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

- 3.1 In relation to assessing the equalities impacts of our strategies and services the IJB approved the use of the NHS web-platform for tracking and publishing IJB EQIA's. There were 8 EQIAs published on the NHS web-system for HSCP service change areas last year <http://www.nhsggc.org.uk/your-health/equalities-in-health/equality-impact-assessments/>, including the Strategic Plan and Participation & Engagement Strategy. A range of actions arose from these EQIAs, most frequently relating to strengthening data collection to identify the gaps and to address barriers created by some internal processes.

- 3.2 With regard to championing cultural change within and beyond our organisation, a combination of awareness raising and discrete cultural change programmes have been taken place. An example of this is the work to achieve the LGBT Youth Charter Mark. Five service areas across health (CAMHS, Youth Health Service), Social Care (LAC and residential units) and in partnership (all services within the Pollok Civic Realm) are participating in the development of a network of champions, awareness raising amongst staff groups, action planning and practice development. We are the first HSCP in Scotland to be seeking to achieve the mark during the course of our equalities plan.
- 3.3 As well as equalities learning events the HSCP Staff newsletter had at least one aspect of equalities covered in every publication last year. Specific feature items were included on the LGBT community and disability.
- 3.4 In relation to IJB membership as of June 2017 the IJB membership reflects the gender balance in Glasgow city. We will continue to work in partnership with the organisations represented on the IJB to foster a stronger ethnic mix of membership, wherever we can.

#### **4. 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

- 4.1 In the last year equalities training (through a mix of on-line and face-to-face formats) had 1126 attendees/completers from staff within the HSCP. This suggests that up to 1 in every 10 staff members within the HSCP engaged in learning last year. More recently localities have been undertaking 'equalities in brief' sessions for a mix of HSCP and partner staff to foster joint learning. These sessions have covered a wide range of subjects from transgender issues through to Sickle Cell Anaemia and Thalassemia.
- 4.2 In terms of equalities reporting a review of eight data systems within the HSCP has been undertaken. Six of the nine protected characteristics (age, gender, ethnicity, marital status, religion and disability), and poverty are included across all these systems. Sexual orientation and gender re-assignment is collected in some assessment processes. Although available for use, completion of these fields is variable across the HSCP and further work is being undertaken to understand and address this.

- 4.3 Work was also undertaken to make it easier for service users to report on equalities characteristics. As an example the Health Improvement service developed an 'equalities monitoring form' for all users of their direct and commissioned services. Last year there was an 84% completion rate achieved across all protected characteristic categories. This high level of completion has enabled more informed performance scrutiny and offers opportunities to foster enhanced routine equalities disclosure for other services.
- 4.4 In relation to having equalities sensitive conversations and carrying out routine enquiry on gender based violence, money worries and employability a range of 'markers' are being tracked. This includes 3,641 referrals by NHS staff within the HSCP to financial advice services last year alone. The HSCP Welfare Rights team represented clients at 971 social security appeal tribunals (53% related to disability benefit appeals and 40% to incapacity for work). The overall success rate for the concluded appeals was 66%, with an average annual gain per successful appeal of £7,300.
- 4.5 In relation to routine enquiry around employment staff enabled 2700 people with health and social care needs to directly access employability support services last year. An independent review of the HSCP Employability Support Services (direct and commissioned) was undertaken last year and demonstrated comparable employability outcomes, and value for money with the wider sector in Scotland. The review highlighted the significant part played by GHSCP to inclusive growth, which would not be possible without routine enquiry and action. An HSCP Employability Board has now been established to enhance this further.

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

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

- 5.1 The HSCP has continued to chair the Glasgow Community Planning Partnership (CPP) Equalities Partnership, extending membership to include the learning sector, with the colleges and universities refreshing their Equalities Plans for April 2017. There are a number of key equalities themes that the CPP partners are working together on:
- With an increase in the ethnic mix of the city's population, there are a number of work areas. There are particular challenges in the provision of English as a second language (ESOL) delivery in Glasgow, with early work to establish a single register of those awaiting provision suggesting that as many as 10,000 people may be currently awaiting provision.
  - Engagement with HSCP, Housing Providers & others as key partners in the Thriving Places programme, with an equalities focused community development model about to be trailed.
  - Engagement of partners in the Glasgow Equalities Forum (GEF). GEF have established an LGBT network for the organisations supporting members of

these communities to share, learn and engage with partners to better address need.

- There is continuing work to inform the 'New Scots Strategy' which is being refreshed this year. As part of this a national event on the health domain of the strategy, held in Glasgow in the spring, was predominately attended by health and social care staff from GHSCP.
- Hate crime – partnership across the CPP to raise awareness of hate crime, increase reporting and reduce incidents.

5.2 The IJB's Participation and Engagement Strategy was approved 31 October 2016. An action plan was then approved by the IJB Public Engagement Committee on 28 November 2016. The action plan included actions to increase the involvement of historically less well-represented groups including protected characteristic groups. Locality Engagement Forums are taking forward this work, with the Public Engagement Committee also expressing a desire to improve links with young people through appointing a youth representative.

5.3 Staff have contributed to many of the cities equalities festivals and engagement activity to raise awareness of HSCP services and build relationships. Last year the HSCP contributed to the cities 'Black History Month' programme for the first time. Working with African Challenge Scotland social care staff within children's services hosted a 'People Powered Prevention' session to share how the children's care system works in Scotland and Glasgow, and to generate interest in social care as a career choice.



**Thursday**  
**10 August 2017**  
**People Powered Prevention**  
in partnership with  
Social Service Glasgow

**Venue:** 139 Saracen Street, Saracen House, Possilpark, Glasgow, G22 5AZ  
**Time:** 1.00 pm - 3.00 pm  
**Format:** Short presentation & interactive discussion.

African Challenge Scotland working at the grassroots levels are best suited to deal with vulnerable and ethnic minority groups in Glasgow and wider Scotland.

African Challenge Scotland has put in place an empowerment workshop in partnership with the Social Service in Glasgow to help these people to lead a decent life. Also, the involvement of local community leaders and volunteers reinforce the sustainability of the programme.

This event provides an excellent opportunity for participants to consider a career as a registered carer with Social Services in Glasgow.

5.4 A progress event was held in the Maryhill Integration Network offices on the 17<sup>th</sup> June, 2017. Forty two staff and partners attended the event, including members of the Glasgow Equalities Forum. The programme included presentations on different aspects of the equalities work undertaken in the last year;

- The Roma Peer programme in Govanhill
- The Glasgow Disability Alliance event and follow-up in North East Glasgow
- The equalities 'bites' learning and development sessions developed for staff and partners in the North West locality
- The analysis of the youth health survey for LGB young people and the launch of the report with members of LGBT Youth in Glasgow in the spring.

5.5 Participants were asked for their views (using a keypad voting system) on how well they felt the HSCP was doing on equalities. 72% agreed with the statement that 'equality is valued in the HSCP'. Through the subsequent discussions participants felt the focus must continue to be on mainstreaming equalities further, from very clear senior ownership through to embedded practice across all services. It was felt that some very progressive work is being undertaken but that this relied on a few 'organisational champions' suggesting that further effort is required to embed equalities throughout HSCP business areas.

*“renewed my energy and enthusiasm for this work. It will be more to the fore for me in my daily work”*

## **6. Health Board and Council Equalities Mainstreaming and Action Plans**

- 6.1 Greater Glasgow and Clyde Health Board (April 2016) published: A Fairer NHS Greater Glasgow and Clyde 2016-2020: [http://www.equalitiesinhealth.org/public\\_html/equality\\_scheme.html](http://www.equalitiesinhealth.org/public_html/equality_scheme.html). This report related only to the specific functions of the Health Board and not the new integrated bodies. It covered 7 themes from planning and leadership through to fairer health outcomes, through 18 actions. There is one action that relates to HSCPs specifically: develop innovative ways to engage with equality groups in partnership with voluntary sector organisations that support them.
- 6.2 Glasgow City Council (March 2017) published: Glasgow City Council Equality Outcomes 2017 to 2021: [Equality Outcomes 2017-2021](#). This report presents the Council Family’s second set of 14 Equality Outcomes, which build on the existing set and establish some new priorities. The outcomes are structured around four improvement aims, which were developed from the feedback received through consultation. These outcomes are not meant to encompass all the work the Council Family does to reduce social inequality in the city. Instead, they reflect what are considered to be the priorities. GCC recognised the on-going work on equality by the HSCP. In this Equality Outcomes, there is no specific work allocated to HSCP however it will be expected that our equality activities and actions will bring added value.

## **7. Recommendations**

- 7.1 The IJB Performance Scrutiny Committee is asked to:
- a) note progress and reflections on the key areas for future work for the remainder of the current plan.