



DUMFRIES AND GALLOWAY
Health and Social Care

Integrated Joint Board

Mainstreaming and Equality

Outcomes Report

2016 - 2017

Accessibility

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INTRODUCTION

The Public Bodies (Joint Working) (Scotland) Act 2014 requires Health Boards and Local Authorities to integrate planning for, and delivery of, certain adult health and social care services. In Dumfries and Galloway, the Health Board and the Local Authority have chosen to establish a third body called the Dumfries and Galloway Integration Joint Board (IJB).

The following report is intended to inform people who use services, carers, visitors, staff and partner organisations on how the new IJB for Dumfries and Galloway Health and Social Care will carry out its responsibilities under the Equality Act 2010. It also details the proposed IJB equality outcomes for 2016/17 and existing and future mainstreaming activity.

The IJB is not starting with a blank sheet with regard to the development of equality and diversity but instead building on existing good practice, established through a range of high profile programmes across Dumfries and Galloway.

By providing regular updates, we will evidence how we have sustained, and will continue the commitment and drive towards equality and diversity in health and social care in Dumfries and Galloway.

It is important to acknowledge that the timescales for developing, mainstreaming and reporting on equality outcomes pre date the legislation for integration. The flow chart overleaf shows how the equality and diversity requirements for the IJB sits against the timescales for the equality monitoring and reporting of the Equality Act 2010.

This report is the first report on the Equality Act produced by the IJB and provides some examples of how equality is being mainstreamed across the region. It includes the shared outcomes and will attempt to 'set the scene' with regard to how equality will continue to be mainstreamed as we move forward.

Specific duties reporting timetable

05.12.11

Public sector equality duty came into force

22.05.12

Specific duties came into force in Scotland – a listed authority was required to:

- assess and review policies and practices
- gather and use employee information
- consider criteria and conditions in procurement

30.04.13

By this date a listed authority was required to publish:

- a mainstreaming report (which included employee information)
- equality outcomes, prepared using involvement and evidence
- gender pay gap information
- a statement on equal pay and occupational segregation

31.12.13

By this date Scottish Ministers needed to publish proposals for activity to enable better performance of the duty by listed authorities.

2014-2015

- Duties of Integration added to Public Bodies Act
- IJBs added to Equality Act

01.04.15

- A listed authority is required to publish a mainstream report (which includes employee information and the use made of previously gathered employee information)
- a report on progress towards achieving equality outcomes
- gender pay gap information

ABOUT US

Dumfries and Galloway Council, established under the Local Government etc (Scotland) Act 1994 and having its principal offices at English Street, Dumfries DG1 2DD (“the Council”);

And

Dumfries and Galloway Health Board, established under section 2(1) of the National Health Service (Scotland) Act 1978 (operating as “NHS Dumfries and Galloway”) and having its principal offices at Crichton Hall, The Crichton, Dumfries DG1 4TG (“NHS Dumfries and Galloway”);

The main purpose of integration is to improve the wellbeing of people who need health and social care and support services, particularly those whose needs are complex and involve support from health and social care at the same time.

It is intended that integration, and therefore the work of the IJB, will achieve the nine National Health and Wellbeing Outcomes prescribed by the Scottish Ministers in Regulations under section 5(1) of the Act, namely:

National Health and Wellbeing Outcomes

People who work in health and social care services are supported to continuously improve the information, support, care and treatment they provide and feel engaged with the work they do

Resources are used effectively in the provision of health and social care services, without waste

People who use health and social care services have positive experiences of those services, and have their dignity respected

People are able to look after and improve their own health and wellbeing and live in good health for longer

People who use health and social care services are safe from harm

Health and social care services are centred on helping to maintain or improve the quality of life of service users

People, including those with disabilities, long term conditions, or who are frail, are able to live, as far as reasonably practicable, independently and at home or in a homely setting in their community

Health and social care services contribute to reducing health inequalities

People who provide unpaid care are supported to reduce the potential impact of their caring role on their own health and well-being

LEGISLATIVE CONTEXT

The Scottish Government added IJBs to Schedule 19 of the Equality Act 2010 and to The Equality Act 2010 (specific duties) Regulations 2012 in April 2015.

All IJBs are subject to the Equality Act 2010.

Integration Legislation

The Public Bodies (Joint Working) (Scotland) Act 2014 (the Act) requires Health Boards and Local Authorities to integrate planning for, and delivery of, certain adult health and social care services. The Act provides a choice of ways in which they may do this.

This Dumfries and Galloway Integration Scheme sets out the detail as to how the Health Board and Local Authority will integrate services and includes the matters prescribed in the Regulations underpinning the Act. You can find it here:

<http://www.dg-change.org.uk/wp-content/uploads/2015/07/Dumfries-and-Galloway-Integration-Scheme.pdf>

The IJB is responsible for the strategic planning of the functions delegated to it and for ensuring the delivery of its functions through the locally agreed operational arrangements set out within the Integration Scheme.

Equality Legislation

The Equality Act 2010 was developed in order to standardise the different equality duties and to extend them across the protected characteristics (race, disability, sexual orientation, religion or belief, sex, gender reassignment, age, pregnancy and maternity and marriage and civil partnership). It consists of a general equality duty, supported by specific duties which are imposed by secondary legislation.

All listed public bodies across Scotland are required to comply with the General Equality Duty of the Equality Act 2010 and the (Specific Duties) (Scotland) Regulations 2012.

In summary, those subject to the equality duty must, in the exercise of their functions, have due regard to the need to:



Case Studies - There are case studies throughout this report which highlight existing practice or services which are meeting one or all of the Equality Act aims. These are detailed by this small icon in each corner of the case study

The Act explains that having due regard for advancing equality involves:

- Removing or minimising disadvantages suffered by people due to their protected characteristics.
- Taking steps to meet the needs of people from protected groups where these are different from the needs of other people.
- Encouraging people from protected groups to participate in public life or in other activities where their participation is disproportionately low.

Specific duties

The specific duties are to:

- report progress on mainstreaming the general equality duty
- publish equality outcomes and report progress
- assess new or revised policies and practices
- gather, use and publish employee information*
- publish gender pay gap information*
- publish an equal pay statement*
- consider award criteria and contract conditions in relation to public procurement.

**The duty which relate to employees do not apply to the IJB as it is not a delegated function*

A further duty is imposed on Scottish Ministers to publish proposals for activity to enable listed authorities to better perform the general equality duty.

Compliance with the timescales is important as failure to mainstream equality or comply with this legislation risks enforcement action, legal challenge, loss of reputation and damage to the legitimacy of the IJB. Members of the IJB are individually liable for prosecution in relation to the decisions they take.

The implementation of the legislation will be monitored by the Equality and Human Rights Commission (EHRC) in Scotland.

MAINSTREAMING

Mainstreaming equality and diversity is one of the specific duties for public bodies implementing the Equality Act 2010, and which now includes IJBs. Mainstreaming is defined as integrating equality into the day to day working of the IJB, and considering equality as part of everything we do.

The IJBs recognises the benefits of mainstreaming equality which include:

Mainstreaming

- **Equality becomes part of the structures, behaviours and culture of an organisation**
- **An organisation knows, and can demonstrate how, in carrying out its functions it is promoting equality.**
- **Mainstreaming equality contributes to continuous improvement and better performance.**

By mainstreaming equality, IJBs will work towards improved quality of service design and delivery i.e. equitable access, equity of informed, person centred care. This leads to improved outcomes for patients and service users, as well as staff.

The Specific Duties require IJBs to report on the progress they have made to make the general equality duty central to the delivery of equality throughout the delivery of its services.

Publishing a mainstreaming report provides us with an opportunity to present the work that the IJB has done to meet the general equality duty and what future activity is planned.

The IJB Performance Management Framework, currently in draft, will include details of the public performance reporting arrangements to meet our Equality Duties

ORGANISATIONAL COMMITMENT

Since the 2013 requirement for public sector authorities to set out their commitment to 'mainstream' equality and diversity, there has been progress within both Dumfries and Galloway Council and NHS Dumfries and Galloway.

Both organisations recognise that equality means treating everyone as an individual with equal dignity and respect, taking account of protected characteristics. Achieving equality requires the removal of the discriminatory barriers that limit what people can do and achieve.

Mainstreaming equality into the IJBs will continue to be an incremental process of change which will not happen overnight. This will allow managers and staff to take time to build their knowledge and skills and then put this into practice.

It is proposed that to further embed and promote the function of equality and diversity in improving quality of service delivery and accessibility for our wide and diverse population, equality and diversity training will become an integral part of the IJB. It should be delivered through officer training and development programmes to ensure the Duty is met.

Dumfries and Galloway has an Equality and Diversity Working Group which reports to the Community Planning Partnership. Current membership is made up of representatives from local statutory organisations as well as local diversity groups.

The aim of the Community Planning Equality and Diversity Working Group is: 'to ensure joint working between public sector organisations and communities of interest in relation to the duties within the Equality Act 2010'

The remit of the DWG is to:

- co-ordinate the delivery of the Diversity Working Group Work Plan
- identify opportunities for joint working between public sector organisations and communities of interest for the nine protected characteristics (age, disability, gender reassignment, marriage and civil partnership, pregnancy and maternity, race, religion or belief, sex / gender, sexual orientation)
- promote fairness and respect across our organisations and communities
- monitor performance of local equality outcomes and challenge where necessary
- monitor the quality of Impact Assessments carried out
- act as a forum for consultation, engagement and information exchange

There are good examples of pieces of work both in the Dumfries and Galloway Council and NHS Dumfries and Galloway that evidence how these organisations have committed to mainstreaming equality. These were detailed in the respective organisational reports of 2013 and 2015 and can be found here:

Dumfries and Galloway Council - <http://www.dumgal.gov.uk/index.aspx?articleid=1673>

NHS Dumfries and Galloway –

[http://www.nhsdg.scot.nhs.uk/About Us/Equality Diversity/Key Documents](http://www.nhsdg.scot.nhs.uk/About_Us/Equality_Diversity/Key_Documents)



CASE STUDY

White Ribbon

PSED 1, 2 and 3

The local Domestic Abuse and Violence Against Women Partnership (DAVAWP) has been working towards the elimination of violence against women in all its forms for over 15 years. The partnership group has a range of members including NHS Dumfries and Galloway, Dumfries and Galloway Council, Police Scotland, Women's Aid, Rape Crisis and Dumfries Prison.

The White Ribbon movement was launched in Canada in 2001 with a focus to provide men with a platform to speak and to take action against violence against women i.e. domestic abuse, rape and sexual assault, forced marriage, FGM, so-called 'honour' crimes, sexual harassment, stalking and commercial exploitation in the forms of prostitution and sex trafficking. The campaign has subsequently been promoted across many countries. It recognises that the majority of men are not abusive and would choose to help with the elimination of such violence and asks men to pledge "to never commit, condone or remain silent about violence against women".

In September and October 2012, papers were taken to both the NHS Board and the Council's Policy and Resources Committee which approved the Domestic Abuse and Violence Against Women Strategy and Action Plan and supported the White Ribbon campaign.

In December 2014, a presentation was given to the DAVAWP by staff from White Ribbon Scotland on the steps needed to become a White Ribbon Region. DAVAWP agreed that this would be a positive way forward and would support DAVAWP's aim of prevention.

During the annual 16 Days of Action for the Elimination of Violence Against Women (25 November – 10 December) the work to become a White Ribbon Area was launched. It is anticipated that we will become a White Ribbon Area in 2017, once the tasks within the action plan are complete. A White Ribbon Steering Group and an action plan have been developed and work has been planned over the next twelve months, which includes seeking to get 1000 men within Dumfries and Galloway to sign the White Ribbon pledge.

Within Dumfries and Galloway work already been undertaken to promote men's involvement in the work against domestic abuse and other forms of gender based violence. This included a campaign with the local football team, Queen of the South who took team photos with players wearing the white ribbons, and handed white ribbons out at a specific 'White Ribbon game'. Training has taken place with local White Ribbon speakers, a 'Take Action' pages has been added to the DAVAWP website and White Ribbon Scotland has been promoted at public awareness events.



CASE STUDY

Campaign Calendar PSED 1,2&3

Both Council and NHS forward plan for public relations and marketing uses a calendar of special days and weeks and this includes special dates relating to Protected Characteristics including e.g. Scottish Interfaith Week; LGBT History month; International Women's Day. These are celebrated by posters, social media campaigns and events.



CASE STUDY

Time for Reflection PSED 1, 2&3

The **Time for Reflection** at the start of regular Full Council meetings presents a non-worship spiritual message from a range of faith group and spiritual leaders. Over the last two years, this has been delivered by Pagan, Bahai, Christian as well as the Director of Interfaith Scotland.

The Council's progress in producing a Religious Observance Policy and raising its profile in the region was commended at the National Religious Observance Conversation Day on 25 March 2014.

EQUALITY IMPACT ASSESSMENT

An Equality Impact Assessment (EQIA) is a careful examination of a proposed policy, guideline, strategy, service or function to see if it may affect some groups unfavourably, especially minority groups who may experience inequality, discrimination, social exclusion or disadvantage. It applies equally to internal and external policy, strategy, functions and services.

Where any barriers are identified, a plan should be developed to ensure that any negative consequences are minimised and opportunities for promoting equality maximised.

Over the past twelve months, NHS Dumfries and Galloway and Dumfries and Galloway Council have been developing a joint IA toolkit which means that both organisations will be using a consistent approach for completing IAs. The toolkit includes assessment on the aims of the Equality Act 2010, the Human Rights Act 1998, the Climate Change Scotland Act 2009 and the Environmental; Assessment (Scotland) Act 2005. This shared toolkit will aim to streamline IAs. It will allow for easier sharing of knowledge and awareness of IAs between the two organisations. It is also hoped that the toolkit will allow third sector partners to enhance their understanding of the IA process, as their input is crucial into this process.

The single IA toolkit has now been developed and tested. Once the IA has been agreed as a shared toolkit, it is proposed to review existing training opportunities and how they can be offered in partnership between the two organisations.

All IJB documents are impact assessed and have an impact assessment section on the cover paper which all reports submitted to the IJB must complete.

The local Strategic Plan for Health and Social Care Integration and Locality Plans have been Impact Assessed.

EQUALITY AND EMPLOYEE INFORMATION

Although the IJB has no direct authority for the management of staff, there is still an interest from the IJB to ensure that staff from each organisation are Equality and Diverse aware.

The current draft workforce plan identifies “*the unprecedented opportunity to develop existing partnerships and for us to work more collaboratively and innovatively. Central to this is for those planning, providing and maintaining effective care and support (including communities, volunteers, people that use services, carers and families) to also be fully involved in planning and delivery of services in the future*”.

The full Integrated Workforce Plan is available to view [here](#).

To ensure that people are central to the core planning of the evolving workforce requires the consideration of the equality and diversity needs of the working population. The two go hand in hand.

Section 5.7 of Dumfries and Galloways Health and Social Care Strategic Plan outlines the commitment across the Integration Joint Board to achieve effective integrated models of care by supporting our collective workforce. This includes challenging barriers, working with diversity and addressing organisational culture.

The workforce plan continues to further outline the imminent challenge that “*Within our region we will face the challenge of supporting an ageing population, at the same time as experiencing a projected decline in the available working age population*”.

Therefore it is not a radical suggestion to work in partnership with our wider partners to maximise the skills of those who do live in the region and are actively looking for work at appropriate placements. Making workplaces accessible and providing equality and diversity trained staff and management should enable those people living in the region with protected characteristics better access to employment options through IJB services.



CASE STUDY

Specific employment initiative

PSED 1&2

Specific employment initiatives are in place supporting people with Protected Characteristics including our Modern Apprenticeships Scheme and Graduate Placement Scheme; and our recruitment arrangements follow the 'two ticks' Scheme where any applicant with a registered disability who meets the essential criteria is given an interview.

<http://connect.dgcouncil.net/index.aspx?articleid=2635>

Dumfries and Galloway Health and Social Care Integration Cultural Diagnostic

In 2015, the Organisational Development workstream undertook a cultural diagnostic survey.

Organisations often use the term it's "the culture" to explain the ways things work or the existing structures for change. The Organisational Development Workstream were keen to measure exactly what our *normal* culture is, and what you are expected to do, to 'fit in' to the organisation. The survey undertook a measurement of both the current culture and our desired culture.

The overall aim of this work is to create a common culture across all integration partners to meet our shared goals. The IJB wish to enhance and encourage the ability of all staff to demonstrate:

- Innovation – coming up with new ideas
- Putting those we serve at the heart of all we do
- Making the most of our collective resources
- How to support one another
- Encourage a 'can do' attitude
- Improved communication between all of us

Why Are We Doing This?

Changing organisational culture – “how things are done around here” -is key to the success of major change that is a vital part of making Adult Health and Social Care Integration work.

It will help support us to **influence staff engagement** and **performance**.

Results are now due and should identify what staff have told us, and more importantly how we will work together to help achieve our desired culture. This will help ensure that we develop a workforce that can achieve the best outcomes for communities and the people that use our integrated services.

Dumfries and Galloway has a diverse and multi cultural population, therefore investing in developing a diverse and multi cultural workforce will embed good practice and the ability to embed organisational change.

CASE STUDY



Staff Listening Service/Values Based Reflective Practice

PSED 2

Staff listening is a service which is offered by NHS Dumfries and Galloway's Spiritual Care Team and it aims to help staff to build their ability to manage their circumstances.

A person centred approach is taken with staff listening. It provides a flexible framework to enable staff to reflect on any diversity issues that impact on them and identify what actions, if any, they need to consider. This is done in a confidential safe space. Research confirms that the wellbeing of staff is affected by personal and environmental factors including bereavement, trauma and work-related stress. Staff listening uses a 'strengths based approach' which aims to support and empower staff in all aspects of their lives.

In addition to staff listening, the Spiritual Care team offers training and support to staff groups in Values Based Reflective Practice (VBRP). VBRP is a method of reflecting on practice and aims to help staff (re)connect with their core values and motivations, enhance their person-centred practice, deepen their relationship with colleagues and develop resilience and wellbeing at work. It encourages consideration of whose needs are being met or overlooked by our practices, whose voices are being heard /silenced, included/excluded from our practices and who/what is being valued/undervalued/overvalued in our practice. Outcomes include enhanced staff fulfilment and engagement and improved patient experience.

These services are currently being piloted with NHS staff and if successful, it is hoped that these services will be rolled out to staff from Dumfries and Galloway Council.

EQUALITY OF ACCESS TO SERVICES

Physical Access

The IJB will not own any physical assets, such as buildings. Yet the IJB has invested interest in the appropriate fixtures, fittings and functions of the properties that the IJB utilises in the delivery of services even though it is not the direct resource owner / employer.

Therefore the IJB will aim for the premises that it uses to deliver public services will have disabled parking and toilet facilities; hearing loop systems and signs and decoration that is consistent with best practice guidelines.

Information

The IJB will access advice and guidance from graphic design to ensure the use of positive images of all diverse and inclusive community members and of representing all Protected Characteristics. Translation and interpretation services are available through Language Line at all NHS and Local Authority public facing offices and buildings. Some leaflets are published in other languages however all IJB publications will carry a note that the information is available in other formats including: Languages, large print, Braille and audio books.

The IJB understand that written information is not always the best form of communication for some people as not everyone can read, see or understand English.

Communication should not be a barrier for people who cannot communicate in English, in spoken word or those who have a sensory impairment that prevents them from using standard methods of communication. Every effort will be made to present information in ways that are accessible for specific groups across the population.

The strategic plan and locality plans for health and social care integration were provided in Easy Read version throughout the consultation and as part of the final published suite of documents.



CASE STUDY

Participation and Engagement

PSED 1,2&3

The IJB Participation and Engagement Strategy contains within it specific commitments and statements about engaging hard to reach groups and in particular sees an important role for the representative bodies of hard to reach groups, including protected characteristics' minority communities, people experiencing poverty, those who have mental health conditions and Carers.

This work builds on a strong foundation of work by the Council and NHSD&G in having adopted the National Standards for Community Engagement, engaging with representative groups for different Protected Characteristics and particularly providing support for, and participating in, the Community Planning Equality and Diversity Working Group.

The IJB Participation and Engagement Strategy has four Objectives:

Objective 1: To engage with people, communities and organisations that may have a view or opinion relating to the planning and delivery of health and social care and support in Dumfries and Galloway.

Objective 2: To communicate and engage with people through a number of different methods to provide a range of opportunities to express views.

Objective 3: To optimise the resources available for participation and engagement activity.

Objective 4: Monitor and report on the effectiveness of our participation and engagement activity

In all of these Objectives there are references, tools and stakeholders identified that will ensure equalities issues have a high profile in all of this work e.g. there is a commitment to using the equality monitoring form for all engagement and using that information to support engagement with any under-represented groups; and the Strategy recognises the importance of using plain language and icons/easy read versions of key documents and making information available in different formats and languages.

The development of the IJB Strategic Plan has been a good example of the way in which the IJB is undertaking its work – a range of different methods and opportunities to engage were advertised; the invitation to the Impact Assessment went to all members of the Community Planning Equality and Diversity Working Group; and a Statement of Consultation was produced which makes the engagement work transparent and public.

RESEARCH AND EVIDENCE

Strategic Needs Assessment

The IJB is aware that many people face difficulties in either accessing healthcare services, getting information or communication due to language, literacy or disability barriers.

The strategic needs assessment for integration is a collection of evidence from a wide range of sources which was pulled together to inform the development of the Dumfries and Galloway strategic plan for health and social care integration. It reflects the background in which integration needs to operate. It acknowledges the complexity of the Dumfries and Galloway health and social care system at the time the evidence was pulled together: spring and summer of 2015.

When drawing all the information together certain themes emerged from the evidence.



The strategic needs assessment also highlights gaps in local knowledge which could be preventing services from being developed to meet the needs of our population such as:

- The challenges faced by third sector
- Housing needs for vulnerable people
- The needs of gypsy, traveller and ethnic minority communities
- Physical health of people with mental health issues
- Social capital and community strength
- The effect of obesity

You can find statistics, figures and more detailed information on the strategic needs assessment here: - <http://www.dg-change.org.uk/strategic-plan/>

Dumfries and Galloway Community Survey 2014

The Dumfries and Galloway Community Survey 2014 was led by the Community Planning Equality and Diversity Working Group. The aim of the survey was to assess general satisfaction with a wide range of public services provided and to identify changes to public opinion since the 2011 community survey.

Independent analysis was provided by the NHS Department of Public Health. The aim was to develop an understanding of whether there were different outcomes for people with protected characteristics and to inform the Equality Outcomes and Action Plans of local partners.

Survey respondents were a reasonable representation of the local community, but the respondents were skewed towards older women and carers, who might be over-represented. There were some issues including very low numbers of respondents in some protected characteristics . It is therefore important to see the Community Survey as one of a range of sources to inform decision-making.

Despite small numbers in certain categories, early indicative discussions with the data analysis team have shown that there are statistically significant differences between people with certain protected characteristics and the mainstream of respondents. People with a disability in particular were regularly significantly less satisfied with public services across a range of issues, similar to the results in the previous survey carried out in 2011.

Differences between the 2011 survey and the 2014 results include the following highlights:

- **Many people appear to feel safer in their communities**
- **Accessibility of services and being able to have a say in services has worsened**
- **Getting the care and support needed to be in good health has worsened**
- **Satisfaction with public services has worsened across all services mentioned, particularly education, library, council customer services, NHS and police.**

The results from the Community Survey will be further analysed and used to inform the development of the Council, NHS and IJB equality outcomes from 2017.

| | | |
|--|---|--|
| | It is proposed that the IJB explore how to better addresses the issues raised here to improve the satisfaction of the population accessing services and to increase ease of access to more services | |
|--|---|--|

PARTNERSHIP WORKING

Health and Social Care integration means that partners will be working more closely together than ever. Partnership working and engagement must be at the heart of how the IJB will operate.

The IJB is comprised of five members from appointed posts in NHS Dumfries and Galloway and five elected members from Dumfries and Galloway Council, unpaid Carers, service users and various third sector organisations that provide health and social care. The IJB must be in a position to respond effectively to the views, needs and opinions of the local community and stakeholders.

It is recognised that significant engagement and working with individuals, communities and partner organisations is required to fulfil the Equality Act Duties.

People that work in health and social care are our biggest assets. How we work and communicate our approaches is key to the success of engagement and involvement across the region. The IJB will ensure extensive networking within our region and at national level to maximise our collaboration and embed equality and diversity awareness into all its functions. There is currently a Communication and Engagement Plan for Integration under development that will further inform and embed good practice across the region.

Integration is much more than simple joining services together. It is about fully involving people in planning and delivering care and support. The Dumfries and Galloway strategic plan for health and social care commits to looking to develop groups and structures that enable us to do this in a meaningful and consistent way.

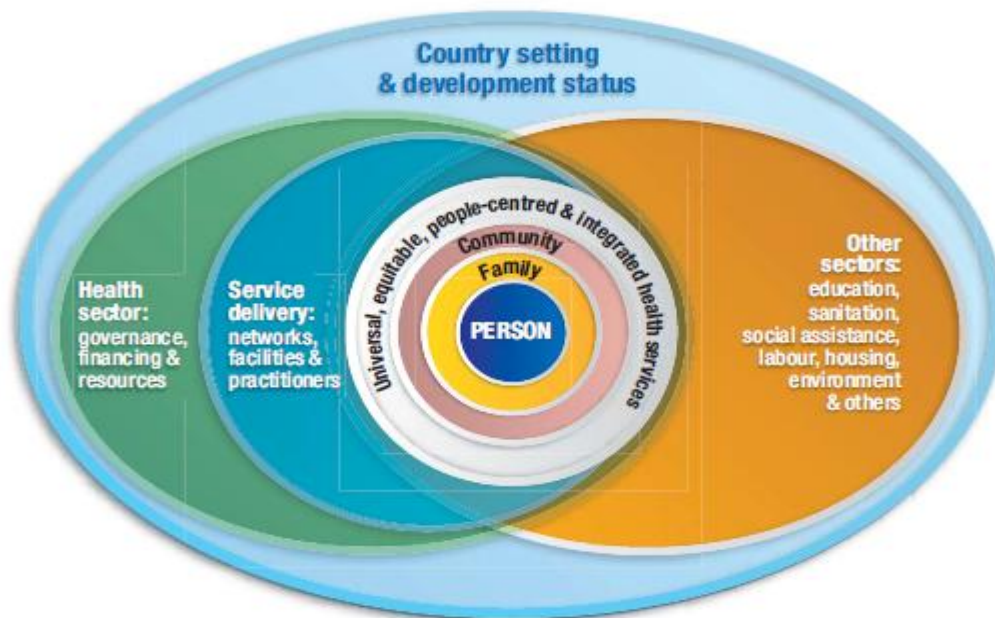
The Dumfries and Galloway Carers strategy has a number of commitments and actions points which refer to both the support of carers as 'equal partners in care' and to improve staff knowledge and awareness of the importance of Carers contribution to health and social care. The care provided by unpaid Carers saves the Scottish taxpayer more than £10billion a year, the cost of a second NHS.

Indeed both the Scottish Social Services Council and Education for Scotland have produced a Career and Personal Development module which include six core principles for staff working with carers and young carers and is linked to existing career

development frameworks. This further indicates the commitment that unpaid Carers are valued members of the health and social care partnership.

Integration aims for services to become personalised with the person being in control of their own care or 'person centred' and being an equal partner in their own care. The IJB can facilitate this by ensuring that our diverse and multi-cultural population is complimented by a supportive diverse and multi-cultural workforce. Person centred is an international supported exemplar model of care as shown by the diagram below from the World Health Organisation.

Fig 1. Conceptual framework for people-centred and integrated health services





CASE STUDY

Building Valued Relationships: Enabling Meaningful Integration Event

PSED 3

It has been acknowledged that Health and Social Care Integration would face a number of challenges, not least the challenge of integrating very different cultures and building on the experience of the third and independent sectors and strengthening their roles in promoting wellbeing.

In May 2015, a local event took place in Dumfries called “Building Valued Relationships: Enabling Meaningful Integration.

There was a recognition between partners that developing opportunities for the promotion of wellbeing and resilience or spiritual health in all our communities, particularly those suffering from health inequalities, is a shared agenda and relies on health and social care practitioners working together with voluntary organisations, community members and faith communities.

The event hoped to encourage the formation of new networks between communities, voluntary agencies and health and social care systems, increase the availability of more tools for articulating and processing the integration of differing value systems and start to foster a deeper understanding of the connection between meaningful relationships and better care for people

This was also an opportunity to showcase some of the best work we are doing both on values based reflective practice and on community health and wellbeing and aspire to share, learn from, improve and embed it.

On the day 155 participants attended, ranging from practitioners, volunteers, managers and leaders working within any sector in the Dumfries and Galloway region to promote wellbeing.

This highly interactive event incorporated a ‘marketplace’ with various stalls showcasing some of the work being undertaken in the local community. This included stalls from Alzheimer Scotland, SANDS (Stillbirth and neonatal death charity), Caring Conversations, Relationships Scotland, Dumfries and Galloway Carers Centre, Spiritual Care amongst others.

There was also a specific Equality and Diversity stall which was a chance to draw attention to the equality duties which apply to the local public bodies and the work which has been undertaken to support these. It also aimed to highlight some of the headline results from a local community survey carried out in December 2014. The survey aimed to assess general satisfaction with the wide range of public services provided and to develop an understanding of whether there were different outcomes for people from a minority protected characteristic group.

PROCUREMENT

The IJB recognises that where a contractor is carrying out a public function on behalf of NHS Dumfries and Galloway or Dumfries and Galloway Council, the legal liability for the duties in relation to that function remains with the IJB as the contracting organisation for the function. The degree to which equality and diversity requirements are specified and incorporated within procurement documentation will vary according to the goods, services or works being purchased and should be assessed on a case by case basis.

OUTCOMES

Outcomes are not what we do, but the beneficial change or affect which results from what we do. These changes may be for individuals (both staff and service users), groups, families, organisations or communities. It is important that as outcomes are developed locally they measure benefits and not service activity.

EQUALITY OUTCOMES

An Equality Outcome is 'a result which you aim to achieve in order to further one or more of the needs mentioned in the General Equality Duty.' By focusing on outcomes rather than objectives, this Specific Duty aims to bring practical improvement in the life chances of those who experience discrimination and disadvantage.

The Specific Duty also requires the IJB to take reasonable steps to involve people who share a relevant Protected Characteristic and their representatives.

The IJB has considered the government guidelines along with current local equality outcomes from both organisations. Some of the existing outcomes have been re-aligned as these are now the responsibility of the IJB.

For the purpose of this matching exercise the councils Key Performance Indicators (KPIs) have been matched against the NHS Outputs to highlight common themes and shared goals.

MAPPING THE OUTCOMES

In developing the IJB Outcomes, the existing Outcomes of the partners is clearly the foundation. While the intention is to create new and more focussed Outcomes for the IJB as a separate body, the current Equality Outcomes provide a good place to start.

Therefore it is proposed that the IJB Equality Outcomes for 2016 are as follows:

1. Healthcare services, developments and policies are better able to meet the diverse health needs of local communities, promote well-being and reduce health inequalities, and those who require health services will have more equal access to them
2. The people who are deemed most at risk from harm will be identified, supported and protected
3. Person centred care is delivered and meets best practice standards in relation to equality and diversity, where patients can be confident that health services delivered and staff will respect their dignity and identity
4. The life chances of our people will be improved by providing opportunities, information, advice and support from our most vulnerable and disadvantaged people
5. The people of Dumfries and Galloway, including those with protected characteristics experience an improved sense of community cohesion through working in partnership across local public and third sector organisations
6. The ageing population of Dumfries and Galloway is supported to lead healthy lives in their own community

DEVELOPING THE NEW IJB OUTCOMES

The existing performance information provides a solid foundation for the continuation and reporting of the current 2016 Equality Outcomes for both partners.

Bringing together the current equality outcomes of both Dumfries and Galloway Council and NHS Dumfries and Galloway highlighted a number of challenges that require consideration for the next stage of equality and diversity outcome development.

A set of Equality Outcomes along with an Action Plan based on research, consultation and evidence should be created to define the new Equality Outcomes for the IJB beyond 2016.

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| | During the next year it is proposed that work takes place to involve people with different Protected Characteristics, partners and members of the public in developing a set of outcomes for the following 4 years. This work will be based on lessons learnt, local evidence of need and national guidance and duties. | |
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CONCLUSION

Since the setting of the Council and NHS equality outcomes 2013 -2017 a considerable amount of progress has been made in achieving these however the outcomes still remain valid and work is ongoing during the second half of this statutory cycle to ensure they continue to progress. Dumfries and Galloway IJB have opted to adopt the relevant parts of the existing equality outcomes from the two organisations and to use 2016 as a lead-in year to develop robust and evidence based outcomes for the IJB (2017 to 2021). This will allow a timely and genuine dialogue to inform the development of new equality outcomes that will meet the needs of the people of Dumfries and Galloway and the publishing requirements of the Equality Act 2010 which is April 2017

Outlined below are the gaps identified from the evidence contained in this report. It shows some of the key areas of work to be addressed going forward.

Gaps in service table

| Strategic Needs Assessment Gaps | Community Survey Gaps |
|--|---|
| <ul style="list-style-type: none">• The challenges faced by third sector• Housing needs for vulnerable people• The needs of gypsy, traveller and ethnic minority communities• Physical health of people with mental health issues• Social capital and community strength• The effect of obesity | <ul style="list-style-type: none">• Many people appear to feel safer in their communities• Accessibility of services and being able to have a say in services has worsened• Getting the care and support needed to be in good health has worsened• Satisfaction with public services has worsened across all services mentioned, particularly education, library, council customer services, NHS and police. |

RECOMMENDATIONS

Considerable work needs to be undertaken to meet the Equality Act 2010 requirements by April 2017. Where possible this work should be done in partnership with other public sector and equality groups to ensure a set of outcomes is developed that complement each other.

In addition to the identified gaps, this paper also makes proposals for key items of development that must be considered in due progress if the IJB are to develop a new set of outcomes over the coming year for publication on the 1st April 2017.

1. Review gaps in community need
2. Review accessibility of buildings
3. Review of the current outcomes
4. Create new set of outcomes
 - Explore learning outcomes from current status
 - Provide development sessions to inform staff on next steps
 - Consultation with the staff and the public over a period of months
 - Draft 2017 outcomes based on staff and public conversations
 - Ensure outcomes are not outputs
 - Review and refine final document
 - Launch final document and supporting resources
5. Reviewing training and awareness options

LINKS

Commissioning of Public Services -

<http://www.scotland.gov.uk/Resource/Doc/352649/0118638.pdf>

Dumfries and Galloway Integration Scheme -

<http://www.dg-change.org.uk/wp-content/uploads/2015/07/Dumfries-and-Galloway-Integration-Scheme.pdf>

you can view all Outcomes for Dumfries and Galloway Council here -

<http://www.dumgal.gov.uk/CHttpHandler.ashx?id=12337&p=0>

You can view all Outcomes for NHS Dumfries and Galloway here -

http://www.nhsdg.scot.nhs.uk/About_Us/Equality_Diversity/ED_Files/Equality_Outcomes_2013-17.pdf

The following table combines the relevant equality and diversity outcomes from the following active reports:

- NHS Dumfries and Galloway Equality Outcomes 2013-2017
- Dumfries and Galloway Council Equality Outcomes Update

| NHS EQUALITY OUTCOMES | COUNCIL EQUALITY OUTCOMES | Protected Characteristic |
|---|--|--|
| 3 | 3.1 | Age |
| Healthcare services, developments and policies are better able to meet the diverse health needs of local communities, promote well being and reduce health inequalities, and those who require health services will have more equal access to them | The people who are deemed most at risk from harm will be identified, Supported and protected | Disability |
| Outputs | Key Performance Indicators | Gender |
| <ul style="list-style-type: none"> • Improved evidence base, including increase in recorded data of protected characteristics • Increased patient data used to make services more appropriate and better able to meet the needs of patients • New Impact Assessment process implemented. • Campaigns delivered, increased uptake of local health services by vulnerable and hard to reach people i.e. | <ul style="list-style-type: none"> • SOA5.1.4a - Number of repeat incidents (domestic violence within 6 months) • P3C4SWS17 - % of Level 2 and 3 MAPPA cases reviewed within required timescales | Reassignment Race Religion or Belief Sex Sexual Orientation Marriage and civil partnership Pregnancy and |

| <p>increase in breastfeeding rates, immunisations etc</p> <ul style="list-style-type: none"> • Campaigns delivered, analysis shows that we have reached out to those people with protected characteristics | | <p>Maternity</p> |
|--|--|------------------|
| <p>Actions</p> | <p>Progress to April 2015</p> | |
| <p>Become involved in the development of a local evidence base.</p> <p>Develop and implement a system to record protected characteristics of patients, whilst ensuring confidentiality, and inform patients of the benefits of identifying protected characteristics. This will allow us to track issues such as 'Did not attends' and look at where barriers lie</p> <p>Implement new joint D&G Council and NHS D&G Impact Assessment process and toolkit and consider training options for staff</p> <p>Providing outreach clinics to vulnerable individuals and communities, e.g. gypsy travellers, Provision of onsite</p> | <p>Social Work Services as a core member of the Adult and the Child Protection Committees, the Domestic Abuse Violence Against Women Partnership and the Alcohol and Drug Partnership is committed to raising public and staff awareness across the agencies to ensure that children and adults who are deemed most at risk from harm will be identified, supported and protected.</p> <p>Existing public information material for all the partnerships can be accessed across the region areas in all areas including public libraries, social work offices, primary care settings, schools and education centres, NHS settings, carers centres, activity and resource centres community centres.</p> | |

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| <p>health checks within community based centres. Flexible models of service provision</p> <p>Develop and implement specific health promotion activities for people with protected characteristics</p> <p>Develop inclusive and targeted preventative healthcare messages for hard to reach groups for example, cervical screening for lesbian women</p> | <p>The Council's Contact Centre offers a prompt and efficient response to people who make a telephone referral in relation to adult or child protection. Dedicated numbers have also streamlined the response, which offers a very efficient and effective response and can reduce the referrer's anxiety.</p> | |
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| NHS EQUALITY OUTCOMES | COUNCIL EQUALITY OUTCOMES | Protected Characteristic |
|---|--|--|
| 4 | 4.1 | Age |
| NHS D&G delivers person centred care and meets best practice standards in relation to equality and diversity, where patients can be confident that health services delivered and staff will respect their dignity and identity | Improve the life chances of our people by providing opportunities, information, advice and support from our most vulnerable and disadvantaged people | Disability Gender Reassignment Race |
| Outputs | Key Performance Indicators | Religion or Belief |
| <ul style="list-style-type: none"> • Increased staff awareness and understanding of person centred approaches and how equality and health inequalities are integral to this • Patient experience and levels of satisfaction recorded regularly and systematically and used to enhance services • Reduction in patient and carer complaints around staff attitudes and behaviour • Clearer guidance for staff on how to access communication support and increased awareness | <ul style="list-style-type: none"> • P3C1CCS03 - Crisis Grant Processing Time • P1C3CCS01 -Number of affordable new homes agreed through the SHIP process • P3C1CCS05 - Number of days to process Housing Benefit (New Claims) • P3C1CCS06 - Number of days to process Housing Benefit (changes) | Sex Sexual Orientation Marriage and civil partnership Pregnancy and maternity |

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| <p>amongst patients of the available options</p> <ul style="list-style-type: none"> • Improved patient experience • Patients report improved experience • Increase in number of GPs and reception staff trained • Transgender policy in place | | |
| Actions | Progress to April 2015 | |
| <p>Review equality and diversity training to meet individual, team and patient/client requirements</p> <p>Review/enhance arrangements to encourage feedback, comments, complaints so that patients have the opportunity to improve service development and learning within the organisation. Patient experience to introduce equalities monitoring, and reported as part of Board reports six monthly.</p> <p>Promotion of interpreting, translation and communication support arrangements for languages other than English, and those who are hard of hearing, deaf and deafblind people.</p> | <p>Policy development funding of £262,000 has been re-allocated to support three initiatives that will help deliver the Council's Financial Inclusion Strategy, including enhanced advice services and support for credit union development work. The Financial Inclusion Strategy was agreed on 16 July 2013 and a multi-agency working group has been established to deliver and monitor its action plan.</p> <p>The FIAT team during 2013/14 identified £6.3 million in unclaimed benefits for residents in the region, the money advice team assisted clients with £850K of debt, and the Financial Education team delivered 405 financial awareness sessions in local schools and a further 20</p> | |

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| <p>Individual treatment plans must be developed in conjunction with individuals and their families</p> <p>Develop and implement a programme of training and awareness raising with GP surgeries on registration policies, equality and diversity and communication, including sexual orientation and transgender awareness</p> <p>Development of our Transgender Policy and process for trans treatment, with short, easy to use version for staff to make use of alongside main policy</p> | <p>sessions to other groups.</p> <p>New claims for Housing and Council Tax benefit were processed in an average of 18 days ensuring payments in Housing support costs to the value of £50 million were paid correctly and on time.</p> <p>CCS funds English as a Second Language courses which are delivered through a partnership and is for community based, employability and family learning and SQA accredited courses are delivered through Dumfries and Galloway College. Budget comes direct from Scottish Government - £43,000.</p> <p>Adult Literacy Numeracy – delivered through a partnership and this is core funded in each locality - most Adult Literacy Numeracy support is delivered by Community Learning and Development and some are also provided by partners such as APEX Scotland, Support in Mind, Dumfries and Galloway College, the Barony College and some smaller third sector</p> | |
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| | <p>organisations.</p> <p>CCS is providing grants to the following organisations to support their ability to represent people with protected characteristics</p> | |
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| NHS EQUALITY OUTCOMES | COUNCIL EQUALITY OUTCOMES | Protected Characteristic |
|---|---|--|
| 5 | 4.2 | Age |
| The people of Dumfries and Galloway, including those with protected characteristics experience an improved sense of community cohesion supported by the contribution of NHS Dumfries and Galloway working in partnership with other local public and third sector organisations | Ensure that the ageing population of Dumfries and Galloway is supported to lead healthy lives in their own community | Disability Gender Reassignment Race Religion or Belief |
| Outputs | Key Performance Indicators | Sex |
| <ul style="list-style-type: none"> • Increase in involvement of local people and contribution to decision making within NHS D&G • Increase in awareness and reporting of hate crime in the region • At least one third party reporting centre developed within NHS D&G • Staff have an increased understanding of gender-based violence, shown and demonstrated in day to | <ul style="list-style-type: none"> • P3C2SWS03 - Number of adults accessing tele-care as % of total number of adults supported to live at home • P3C2CCS01 - Number of customers aged 60+ involved in CCS activities [regional] | Sexual Orientation |

| <p>day interactions</p> <ul style="list-style-type: none"> • Increase in levels of gender-based violence reported • Representative involvement in stakeholder engagement for the new DGRI | | |
|--|--|--|
| Actions | Progress to April 2015 | |
| <p>Continue and develop local Diversity Working Group which involves people from other statutory bodies as well as local representative groups through involvement events and the ongoing contribution to setting and reviewing of equality outcomes</p> <p>Work with partner agencies and stakeholders to promote third party reporting as an effective and safe way of reporting instances of hate crime</p> <p>Working with partner agencies to identify where a third party reporting centre would be best placed within NHS D&G. Staff trained on hate crime and their role as a third party reporting centre</p> <p>Development of staff training e-learning module on</p> | <p>Following a successful, multi-agency seminar in August 2013, a Day Opportunities Fund of £100k has been created through the Putting You First Change Fund - also overseen by the “Supporting People in their Communities” workstream. This is to support the development of a broad range of day opportunities in local communities suitable for older people to provide choice to mirror the broad range of interests which older people have. There is £25k per locality with a maximum of £1200 for each day opportunities development. Decision-making is by a small, multi-agency community planning partnership in each locality. There has also been a commitment from across the sectors for greater joint working in Community Capacity Building - with a focus on</p> | |

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| <p>Gender Based Violence which will raise awareness of gender-based violence, the impact this can have on health and the key principles of a sensitive and appropriate response</p> <p>Work together with the local Diversity Working Group in the development of plans for the new DGRI</p> | <p>older people - in each locality.</p> <p>The Council currently provides funding of £568k each year to Day Centres and on 6 February agreed an inflationary uplift of 2% to all Day Centres from 1 April 2014 costing £12k each year.</p> <p>With over 10,000 older people engaging with Community and Customer Services activities it is evident that there are opportunities for people to participate when and where they want to.</p> | |
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