ITEM No ...3......



REPORT TO: INTEGRATION JOINT BOARD - 30 MARCH 2018

REPORT ON: EQUALITIES MAINSTREAMING PROGRESS REPORT 2016-2018

REPORT BY: CHIEF OFFICER

REPORT NO: DIJB15-2018

1.0 PURPOSE OF REPORT

To seek approval of the Dundee Health and Social Care Partnership (DHSCP) Equality Mainstreaming Progress Report 2016-2018. To inform the Integration Joint Board of planned work in relation to equalities mainstreaming and outcomes during 2018/19.

2.0 RECOMMENDATIONS

It is recommended that the Integration Joint Board (IJB):

- 2.1 Approves the Dundee Health and Social Care Partnership Equality Mainstreaming Progress Report 2016-2018 (appendix 1).
- 2.2 Approves the intended approach to publication and dissemination (section 4.2.5).
- 2.3 Notes the planned programme of work for 2018/19 in relation to equalities mainstreaming and outcomes (section 4.3).
- 2.4 Notes that Fairer Scotland Duty, which the Integration Joint Board will be subject to, will come into force on 1 April 2018 (section 4.3.3).
- 2.5 Instructs the Chief Officer to submit for approval to the Integration Joint Board a revised set of DHSCP equality outcomes, co-produced with people with protected characteristics, prior to 31 March 2019.

3.0 FINANCIAL IMPLICATIONS

None.

4.0 MAIN TEXT

4.1 The Public Sector Equality Duty

- 4.1.1 The Public Sector Equality Duty, laid out in the Equality Act 2010 (the Act) came into force in Scotland in April 2011. This equality duty is often referred to as the "general duty" and it requires public authorities (including Health and Social Care Partnerships) to have "due regard" to the need to:
 - Eliminate unlawful discrimination, harassment and victimisation and other conduct that is prohibited by the Act;
 - Advance equality of opportunity between people who share a relevant protected characteristic and those who do not; and,
 - Foster good relations between people who share a protected characteristic and those who
 do not.

The general duty covers the following protected characteristics: age; disability; sex; gender reassignment; pregnancy and maternity; sexual orientation; marriage and civil partnership; religion, belief or lack of religion/belief; and, race.

- 4.1.2 Integration Joint Boards were added to the list of public authorities subject to the requirements of the Act in 2015 and were required to publish Equality and Mainstreaming Outcomes plans by the end of April 2016. There is a requirement to substantively review Equality and Mainstreaming Outcomes at least every four years; meaning the first substantive review in Dundee must take place by 1 April 2020.
- 4.1.3 The first <u>Dundee Health and Social Care Partnership Equality Outcomes and Mainstreaming Equalities Framework 2016/17</u> was published in May 2016 (Article XIV of the minute of the IJB Meeting held on 4 May 2016 refers). The Equality Outcomes contained within the framework were subject of consultation, including with people who have protected characteristics, and were aligned to directly contribute to the strategic priorities and shifts identified within the Partnership's Strategic and Commissioning Plan.

4.2 Equality Mainstreaming Progress Report 2016-2018

- 4.2.1 The Equality Act 2010 (Specific Duties) (Scotland) Regulations 2012 (the Regulations) impose "specific duties" on Scottish public authorities to publish a set of Equality Outcomes and a report showing progress being made in mainstreaming equality at intervals of not more than two years. This means that as the Integration Joint Board assumed its equality duties as a public body from 1 April 2016 that the first mainstreaming equality update report must be published by 1 April 2018.
- 4.2.2 It should be noted that as the Partnership does not employ staff directly there is no requirement on it to produce or publish information relating to employee policies or equal pay. This information is reported by the two employing bodies. However, it is critical that access to employee information for functions delegated to the IJB is in place to allow the Partnership to meet the general and specific equality duties with which it has to comply (see section 4.3). It is also recognised that the IJB, and wider Partnership, should actively participate in work undertaken by Dundee City Council and NHS Tayside to address employment provisions within the Act and to further equality mainstreaming within the delegated workforce.
- 4.2.3 The Partnership's Equality Outcomes and Mainstreaming Equalities Framework set out an intention to align reporting cycles with that of Dundee City Council and NHS Tayside; meaning the first update report would be published in April 2017. It also set out an ambition to substantively review the Partnership's equality outcomes at that time. However, during the first year of operation of the Partnership it became clear that aligning reporting cycles with the corporate bodies was not the most effective approach to improving outcomes for people with protected characteristic and ensuring synergy between the Partnership's outcomes and those of Dundee City Council and NHS Tayside. The key reasons for this were:
 - One year was not a sufficient time frame, given the wider context of complex organisational change, to make an informed assessment of the impact of the Partnership's activities on people with protected characteristics;
 - The process of bringing together performance frameworks and data systems did not support reporting within a one year timescale and meant that relevant data could not be made available to inform progress reporting or the process of reviewing equality outcomes;
 - It became apparent that there were significant advantages to the Partnership's report following on from, and being informed by those produced by Dundee City Council and NHS Tayside rather than being produced at the same time (both organisations published update reports and revised outcomes in 2017). This was particularly so in relation to understanding workforce and procurement aspects of equality mainstreaming (see section 4.2.2); and,
 - One year was not sufficient to undertake co-production of revised equality outcomes with people with protected characteristics, taking into account the needs of protected groups.

Instead a short update was included in the Annual Performance Report 2016/17 and a full progress report has now been produced for approval (appendix 1).

- 4.2.4 The Dundee Health and Social Care Partnership Equality Mainstreaming Progress Report 2016-18 (appendix 1) provides an overview of progress made in achieving the Partnership's equality outcomes over the last two years. It also identified areas for improvement and priorities for the next year in relation to equalities mainstreaming. The report is compliant with the Act, supplementary regulations and guidance issued by the Equality and Human Rights Commission.
- 4.2.5 The Regulations specify that Equality Mainstreaming Progress Reports must be clearly identifiable and accessible to any member of the public who may have an interest in them. The Equality and Human Rights Commission recommends that reports are published on websites in a location that is easy to find and in a format that is compatible with accessibility features, such as screen reading facilities for people with sight impairments. It is therefore intended that following approval the Dundee report, will be designed by Dundee City Council Communications Division in compliance with accessibility standards, and uploaded onto the Partnership website in a manner which is compliant with this guidance. In addition, copies will be disseminated in appropriate formats to organisations and identifiable community groups who are known to have a specific interest in the rights of people with protected characteristics. An appropriate summary of the report will also be included within the Annual Performance Report 2017/18 to support wider dissemination of key information.

4.3 Equalities Mainstreaming and Outcomes Priorities for 2018/19

- 4.3.1 In late 2017 the Integrated Strategic Planning Group considered an update report regarding equalities mainstreaming and outcomes. At this time it was agreed that a short-life working group would be established in 2018 to give clear recommendations in relation to how equalities issues are supported, governed, monitored and driven forward by the HSCP. This agreement stemmed from the recognition that the IJB is directly subject to the Public Sector Equality Duty and therefore continuing to address equalities matters through pre-integration arrangements within Dundee City Council and NHS Tayside is not sufficient to ensure compliance with the Act. It also reflects the strong commitment within the Partnership's Strategic and Commissioning Plan to addressing health inequalities.
- 4.3.2 A key priority for the short-life working group during 2018/19 will be the review of the Partnership's existing equality outcomes to ensure that they are fit for purpose, reflect the desired outcomes of affected communities and are fully aligned to the revised outcomes published by Dundee City Council and NHS Tayside in 2017. Equality and Human Rights Commission guidance states that public authorities must take reasonable steps to involve people who share a relevant protected characteristic and anyone who appears to represent the interests of those people in reviewing a set of equality outcomes. The short-life working group will ensure that revised equality outcomes are co-produced with affected people, utilising and strengthening existing engagement mechanisms. It is recognised that this will require careful planning and significant expertise from across a range of stakeholders, including people who share protected characteristics. It is intended that a revised set of outcomes be available for submission to the IJB in early 2019.
- 4.3.3 From April 2018 the Fairer Scotland Duty, under Part 1 of the Equality Act 2010, will come into force across Scotland. The new duty places a legal responsibility on public bodies, including Integration Joint Boards to 'pay due regard' to how they can reduce inequalities of outcome caused by socio-economic disadvantage when making strategic decisions. Public bodies will also be required to publish a short written assessment showing how they have fulfilled the duty. Guidance to support the implementation of the new duty is expected to be published by the Scottish Government in advance of 1 April 2018. The short-life working group will give consideration to how the Partnership's implementation of the Fairer Scotland Duty can be aligned within existing duty under the 2010 Act and existing commitments within the Strategic and Commissioning Plan to address health inequalities.

- 4.3.4 In addition to the revision of equality outcomes and consideration of the Fairer Scotland Duty the short-life working group will also consider:
 - An appropriate model of co-operation and mutual support with Dundee City Council and NHS Tayside in relation to the Public Sector Equality Duty, with a specific focus on employee information and procurement aspects of duties under the Act;
 - Further development of an appropriate and proportionate model of impact assessment across the Partnership, including supporting governance structures and learning and workforce development considerations; and,
 - Considering how commissioning activity, both internal and external, can better support the delivery of equality outcomes.

5.0 POLICY IMPLICATIONS

This report has been screened for any policy implications in respect of Equality Impact Assessment. An EQIA is attached as appendix 2.

6.0 RISK ASSESSMENT

Risk 1 Description	Services delegated to the Integration Joint Board do not meet the needs of people who share protected characteristics, leading to poorer outcomes and a widening inequality gap.			
Risk Category	Governance, Operational			
Inherent Risk Level	Likelihood 5 x Impact 4 = Risk Scoring 20 (which is an extreme Risk Level)			
Mitigating Actions (including timescales and resources)	 Equality Outcomes agreed and published, mainstreaming update report in progress. A number of Strategic Planning Groups with a specific focus on the needs and rights of people who share protected characteristics are in place. Short-life working group to be established to further support improved responses to people who share protected characteristics Good links are in place with Dundee City Council and NHS Tayside Equalities structures. Complaints mechanism available to people using services who may wish to report service responses falling below the desired standard. 			
Residual Risk Level	Likelihood 3 x Impact 4 = Risk Scoring 12 (which is a high Risk Level)			
Planned Risk Level	Likelihood 2 x Impact 3 = Risk Scoring 6 (which is a moderate Risk Level)			
Approval recommendation	Given the moderate level of planned risk, this risk is deemed to be manageable.			

Risk 2 Description	Failure to meet statutory duties under the Equality Act 2010, including statutory reporting requirements.			
Risk Category	Legal, Governance, Political			
Inherent Risk Level	Likelihood 3 x Impact 4 = Risk Scoring 12 (which is a high Risk Level)			
Mitigating Actions (including timescales and resources)	 Update report has been produced and will be published by 1 April 2018. Plans are in place to support revision of equality outcomes during 2018/19, this is two years in advance of the date required by regulations. Reporting requirements will be incorporated into Strategy and Performance Service workplace. 			
Residual Risk Level	Likelihood 1 x Impact 4 = Risk Scoring 4 (which is a moderate Risk Level)			
Planned Risk Level	Likelihood 1 x Impact 4 = Risk Scoring 4 (which is a moderate Risk Level)			
Approval recommendation	Given the moderate level of planned risk, this risk is deemed to be manageable.			

7.0 CONSULTATIONS

The Chief Finance Officer, Integrated Strategic Planning Group and the Clerk were consulted in the preparation of this report.

8.0 DIRECTIONS

The Integration Joint Board requires a mechanism to action its strategic commissioning plans and this is provided for in sections 26 to 28 of the Public Bodies (Joint Working)(Scotland) Act 2014. This mechanism takes the form of binding directions from the Integration Joint Board to one or both of Dundee City Council and NHS Tayside.

Direction Required to Dundee City Council, NHS Tayside or Both	Direction to:	
	No Direction Required	√
	2. Dundee City Council	
	3. NHS Tayside	
	4. Dundee City Council and NHS Tayside	

8.0 BACKGROUND PAPERS

None.

David W Lynch Chief Officer

DATE: 28 February 2018

Joyce Barclay Senior Officer Health & Social Care Partnership

Allison Fannin Planning & Development Manager Health & Social Care Partnership

Kathryn Sharp Senior Manager Health & Social Care Partnership

Appendix 1

Dundee Health and Social Care Partnership Equality Mainstreaming Progress Report 2016-2018

This report provides an overview of progress made in achieving Dundee Health and Social Care Partnership's (DHSCP) equality outcomes over the last two years. It identifies areas for improvement and priorities for the next year in relation to equalities mainstreaming.

The report is compliant with the Equality Act 2010, supplementary regulations and guidance issued by the Equality and Human Rights Commission.

Background

The public sector equality duty, laid out in the Equality Act 2010 (the Act), came into force in Scotland in April 2011. This equality duty is often referred to as the "general duty" and it requires public authorities (including Health and Social Care Partnerships) to have "due regard" to the need to:

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

The general duty covers the following protected characteristics:

- Age
- Disability
- Sex
- Gender reassignment
- Pregnancy and maternity
- Sexual orientation
- Marriage and civil partnership
- Religion, belief or lack of religion/belief
- Race

The Equality Act 2010 (Specific Duties) (Scotland) Regulations 2012 (the Regulations) also impose "specific duties" on Scottish public authorities to publish a set of Equality Outcomes and a report showing progress being made in mainstreaming equality at intervals of not more than 2 years.

The Dundee Health and Social Care Partnership (DHSCP) first Equality Outcomes and Mainstreaming Equalities Framework 2016/17 was published in May 2016 and can be found at:

https://www.dundeecity.gov.uk/sites/default/files/publications/Equality%20Outcomes%20and%20Mainstreaming%20Report%202016 17 040416.pdf

It should be noted that as the Partnership does not employ staff directly there is no requirement on it to produce or publish employee information. This information is reported by the two employing bodies (Dundee City Council and NHS Tayside). However, it is critical that access

to employee information for functions delegated to the DHSCP is in place to allow the Partnership to meet the general and specific equality duties with which it has to comply. It is also recognised that the Integration Joint Board, and wider Partnership, will actively participate in work undertaken by Dundee City Council and NHS Tayside to address employment provisions within the Act and to further equality mainstreaming within the delegated workforce.

Reporting Timescales

The Partnership's Equality Outcomes and Mainstreaming Equalities Framework set out our intention to align reporting cycles with that of Dundee City Council and NHS Tayside; meaning the first update report would be published in April 2017. It also set out an ambition to substantively review the Partnership's equality outcomes at that time. However, during the first year of operation of the Partnership it became clear that aligning reporting cycles with the corporate bodies was not the most effective approach to improving outcomes for people with protected characteristic and ensuring synergy between the Partnership's outcomes and those of Dundee City Council and NHS Tayside. The key reasons for this are:

- One year was not a sufficient time frame, given the wider context of complex organisational change, to make an informed assessment of the impact of the Partnership's activities on people with protected characteristics;
- The process of bringing together performance frameworks and data systems did not support reporting within a one year timescale and meant that relevant data could not be made available to inform update reporting or the process of reviewing equality outcomes;
- It became apparent that there were significant advantages to the Partnership's report following on from, and being informed, but those produced by Dundee City Council and NHS Tayside rather than being produced at the same time (both organisations published update reports and revised outcomes in 2017). This was particularly in relation to understanding workforce and procurement aspects of equality mainstreaming; and,
- One year was not sufficient to undertake co-production of revised equality outcomes with people with protected characteristics, taking into account the needs of protected groups.

Progress against current outcomes

When reviewing our progress against outcomes, the opportunity was taken to undertake to group the original outcomes statements for the purposes of reporting. We recognise that our existing outcomes need to be reviewed, revised and realigned to ensure a clear focus on the needs, interests and rights of those people who share protected characteristics.

Outcome 1

Users of health and social care services, their families and carers will feel safe and be safe, healthy, achieving, nurtured, active, respected, responsible and included.

Provision of person centred care and support is one of the DHSCP Strategic Priorities. Work continues to progress towards this priority as part of the Strategic and Commissioning Plan.

Locality based planning and provision of services will support the DHSCP in recognising and understanding variations in need, and in services and supports to achieve equality of outcomes across geographical communities, communities of interest and across communities of those with protected characteristics.

Progress

A limited amount of information is available in relation to outcomes for those with protected characteristics other than disability or age. The following gives examples of some of the information available about Dundee Citizens and about users of health and social care services and their carers, the services and supports available to them, and the contribution of these supports to the outcomes of service users and carers.

- Care and Support services in DHSCP maintain high levels of performance in relation to Care Inspectorate Standards. A high proportion of services are graded as 'good' (4) or better overall.
 - Source: Annual Performance Report 2016/17
- The National Health and Wellbeing Survey 2015 took a sample of Dundee citizens aged 18 and over:
 - 79% of Dundee respondents who were supported at home agreed that they had a say in how their help, care or support was provided.
 - 84% of respondents who received any care or support rated it as good or excellent.
 - 76% of respondents, agreed that their health and care services seemed to be well coordinated. There is variation in responses across GP practices ranging from 50% to100%.

Source: Annual Performance Report 2016/17

- In Dundee in 2015/16 88% of adults supported at home agreed that they were supported to live as independently as possible, this compares well with the national average of 84%. Source: Annual Performance Report 2016/17
- Carers of people in Dundee with care and support needs have given feedback on a number of outcomes in their life.

- 70% of Carers indicated that they had a good balance of caring and other things in their life.
- 42% of carers said caring had had a negative impact on their health and wellbeing.
- 46% of carers indicated they have a say in a services provided for the person they look after.
- 46% think that local services are well co-ordinated for the person they look after.
- 44% of carers feel supported to continue caring.

Source: Annual Performance Report 2016/17

 DHSCP along with other agencies in the Dundee Partnership have developed a Carers strategy with a strategic outcomes plan to further develp supports for carers of all ages, who live in Dundee and carers of Dundee citizens.

https://www.dundeehscp.com/sites/default/files/publications/caring_dundee_oct31.pdf

• Encouraging people to have choice and control over the services and supports. One indicator of this is the number of people who received Self-Directed Support (SDS) options 1 and 2 which allow them to exert the highest level of influence over their services and support. Across Dundee such arrangements are not common. Overall spend has increased because the people who are receiving options 1 and 2 have complex packages of care, this provides an indication that individuals whose disability creates a high level of barriers to achieving outcomes have been enabled to have choice and control over how their outcomes are met. See Table 1.

Table 1

SDS	2015-16		2016-17	
Option	Individuals	Cost	Individuals	Cost
Option One	58	£928673	60	£1087024
Option Two	22	£96279	30	£308726

Source: Social Care Survey, Scottish Government

• 977 people in Dundee were recorded with a diagnosis of dementia in March 2017, a relatively high number. NHS Tayside Standard expects there to be minimum of 50% rate of diagnosis. Dundee is performing well against this standard, with a 65% diagnosis rate. This increases the health and wellbeing of these individuals and their families post diagnosis. Specialist support provided over an extended period, is essential for people with dementia and their families and carers to support them to live as well as possible and prepare for the future. 99% of those diagnosed had received support that meets national standards in the previous 12 months.

Source: Annual Performance Report 2016/17

- A Power of Attorney Campaign was supported by local awareness raising events in Dundee. Initial data gathering indicates an increase in Power of Attorneys and this will continue to be monitored over coming years.
- 88 % of Dundee respondents to a recent Customer Survey supported at home agreed that their services and support had an impact on improving or maintaining their quality of life.

Source: Annual Performance Report 2016/17

 There has been an increase in Hospital admission rate following a falls admission rate per 1,000 for those aged over 65 in Dundee between 2012/13 and 2016/17. This increase may reflect an increase in numbers of older people with levels of increased frailty. See Table 2

Table 2

	2012/13	2013/14	2014/15	2015/16	2016/17
Dundee falls admission rate per 1000 65+	23.8	26.1	25.0	24.7	26.0

DHSCP is working together with partners including NHS Tayside to reduce these rates. Source: Annual Performance Report 2016/17

• DHSCP is responsible for delivering and supporting all partners in Dundee to optimise Adult Support and Protection for our most vulnerable service users. We have seen a rise in numbers of referrals which would indicate increased awareness among colleagues and the public about potential risks. This has corresponded with a rise in the proportion of such referrals having no further action or being supported out with the formal system. The percentage of these referrals which proceeded directly to Initial Referral Discussion and Case Conference has reduced from 285 (30%) referrals in 2010/12 to 181 (7%) referrals in 2014/16.

Source: Strategic Needs Assessment 2016/17

 Of the 181 referrals in 2014/16 which proceeded to Initial Referral Discussion or Adult Support and Protection Case Conference, for adults aged under 65, the main types of harm identified were welfare concerns, emotional abuse, discrimination and threat of selfharm. For adults aged 65 and over the main types of harm identified were welfare concerns, emotional abuse, financial abuse and discrimination.

Source: Strategic Needs Assessment 2016/17

- Contracts for all DHSCP commissioned services outline an expectation in terms of adult support and protection and are explicit in terms of health and safety and moving and handling requirements. Information on health and safety matters is shared with providers as a matter of course including medical advice alerts which are issued from the DHSCP Health and Safety Officer. Clear processes are in place for reporting any issues around individual safety and there are agreed procedures in place for identifying required improvement action.
- Dundee Citizen Survey, conducted in 2016, asked a sample of Dundee citizens aged 16 and over: "How good is your health overall?"
 - 84% of respondents rated their health as very, or fairly, good,
 - 9% who said it was fair and 7% who said it was very or fairly poor.
 - The proportion of participants stating their health was very good has increased significantly since 2015 (from 45% to 60%).

Source: Citizen Survey 2016

Outcome 2

Users of health and social care services, their families and carers will be supported to access education, training and employment.

Work continues to progress the employability agenda as part of the DHSCP Strategic and Commissioning Plan. Health Inequalities are one of the DHSCP Strategic Priorities. This includes people with disabilities and other protected characteristics.

Local data provides strong evidence of the high levels of deprivation which is in turn associated with higher prevalence of health conditions and multiple long-term conditions. In Dundee many younger people are affected by health inequalities; experiencing health conditions earlier in life as a result of deprivation and resulting in the poor life expectancies observed in the City.

DHSCP works with partners in the city to support the employability agenda in order to optimise opportunities for education, training and employment for people living in Dundee, particularly those experiencing barriers as a result of health problems and/or disability.

Progress

- The DD4 Network, a partnership initiative, involved local agencies targeting those furthest from the labour market living in one of the areas highest deprivation in Dundee. 14% of participants received help that enabled them to sustain their employment, 9% moved into work, another 5% received help regarding CV and applying for work, others moved into education or training and 2% were further supported by specialist employment services. Source: Annual Performance Report 2016/17
- Working Health Services provides vocational rehabilitation support for employees of small-medium sized businesses who are struggling at work or on short term absence due to a health condition. A case management model is applied along with short term rehabilitation interventions, such as occupational therapy, physiotherapy or talking therapies. The service has around 550 clients across Tayside.

Source: Annual Performance Report 2016/17

 The Fit for Work initiative provided support for employees who were struggling with their health in work. Employees who are absent for four weeks or more are referred by their manager or their GP. A healthcare professional looked at their health, work and any psychosocial difficulties. A return to work plan could be produced to enable safe and effective return to work.

Source: Annual Performance Report 2016/17

 DHSCP is the lead agency for the Single Health and Work Gateway which is currently in the "set up phase" will run as a pilot until 2020. This will integrate employability and health services (including Fit for Work, Working Health Services and a new unemployed element). This service will support people to stay in work, support those who are off sick from work and support people with health conditions or disabilities back into work.

Outcome 3

Users of health and social care services, their families and carers will have improved physical and mental well-being, will experience fewer health inequalities and will be able to live independently and access support when they need it.

Users of health and social care services, their families and carers will experience services that reflect the needs of communities, that address health inequalities, and which shift the balance of these services towards early intervention and prevention.

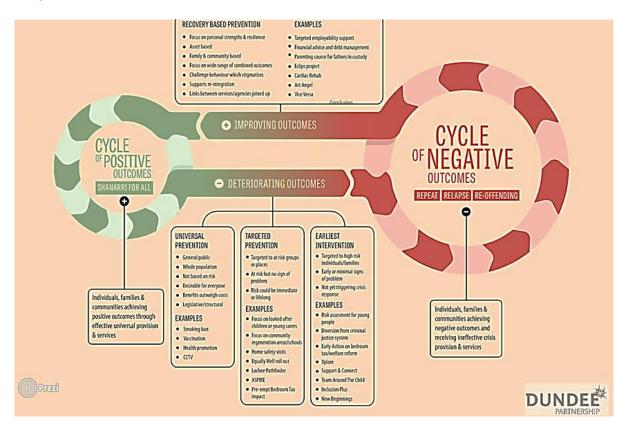
Health Inequalities and Early Intervention/Prevention are included in the DHSCP Strategic Priorities.

Work is progressing towards supporting those who are furthest away from achieving outcomes to return them to a cycle of positive outcomes. In tandem with this, early intervention and preventive action is undertaken to maintain those who have positive outcomes to avoid these individuals moving into a cycle of negative outcomes.

The Early Intervention/Prevention approach has been adopted in a Framework agreed across Dundee Partnership. This Framework is represented in Diagram 1 below and more information can be found at

 $\underline{\text{http://www.dundeepartnership.co.uk/sites/default/files/Prevention\%20Framework\%20V2.}}\\ pdf$

Diagram 1



Progress

• Learning Disability and Autism Statistics (2016/2017) indicate that 49% of adults with a learning disability and/or autism known to DHSCP receive support such as a care at home / housing support or 24 hour care home support. 47% of these adults do not receive this type of care and support but are known to DHSCP workforce who would be able to offer and signpost to increased support as necessary. For 4% of the known population there are no indicators of the level of care and support they receive. Work continues to build networks and community support which will support such adults to be signposted and referred into relevant supports should circumstances change.

Source: Learning Disabilities Statistics Scotland, 2016/17

 Welfare Rights Officers have been co-located with General Practices to maximise individual's benefits and finance, with the aim of improving health and wellbeing longer term and reducing inequalities. Financial gains over one year are over £1 million. A National evaluation found that every £1 invested in General Practice co-located advice generated around £39 of social and economic benefits.

Source: Annual Performance Report 2016/17

 Community Occupational Therapy Services in Dundee invite service users to complete a satisfaction survey on completion of service input. 71 % of those who completed the survey felt more independent after receiving Occupational Therapy support.

Source: Internal Records DHSCP 2018

- In preparation for introduction of the Carers Act 2016 Dundee Carers Partnership support a self-management, early intervention, prevention approach to support carers (unpaid/family and friends who provide care and support to people with disabilities) to maintain positive outcomes. E-Learning and briefing sessions have supported the workforce to recognise, identify and signpost Carers to appropriate supports. Agencies will be encouraged to sign up to a Local Carers Charter to increase awareness and city wide support.
- Health and wellbeing checks for carers over the age of 18 years, are offered by the Keep Well team at Dundee Carers Centre and other community venues. Many carers are supported beyond the initial health check and supported to engage with community based activities aimed at having a positive influence on their physical health and/or mental wellbeing. Carer feedback is very positive with significant increases in the number of carers referred and supported.

Source: Annual Performance Report 2016/17

• 160 DHSCP Assessment colleagues have completed training to undertake Support Plans with (unpaid, family) carers of people with a disability. It is anticipated that those carers in the greatest need of support will plan this support via a formal Carer Support Plan. This plan will cover areas such as Managing the Caring Role, Health (including emotional wellbeing and Mental Health), Finances (including employment, training and Education) and a Good lifestyle (alongside caring). Training is expected to be delivered to approximately 100 more assessors by May 2017.

Source: Internal Records DHSCP.

 A Care Home Liaison Team provides a dedicated service to residents living in care homes suffering mental ill health. The team provide specialist assessment and treatment to individual residents as well as facilitating training. There have been positive outcomes for residents and families, including a reduction in hospital admissions. The team are working on developments including collaborative training and enhancing their knowledge regarding the essentials in psychological care.

 DHSCP, working with Macmillan Cancer Support and others, developed the Dundee Macmillan Improving the Cancer Journey project. The project has been shaped by local people with experience of Cancer. The Project offers tailored practical, personal and emotional support to local people affected by cancer, based on a holistic needs assessment and what matters to them. The initial stages of the project work in 2 localities with some of the highest levels of deprivation in the city.

Outcome 4

Users of health and social care services, their families and carers will experience fair access to services that mitigate the impact of any protected characteristics as defined in the Equality Act 2010

Users of health and social care services, their families and carers will experience a workforce that is skilled, competent, and reflects the diversity of the population across Dundee communities.

Staff, users of health and social care services, their families and carers will be confident that information they provide, particularly in relation to the protected characteristics, will be used to make improvements to services and the way they are planned and delivered.

Person Centred Care and Support Models of Support / Pathways of Care form one of DHSCP Strategic Priorities.

Work continues to progress this agenda as part of the Strategic and Commissioning Plan. It is anticipated that a new service user database will facilitate recording and extracting additional information about protected characteristics. This will be invaluable in measuring our equality and fairness outcomes in the future and will help us to plan and evaluate actions to address inequality of outcomes for those with protected characteristics.

Frailty and ill health (including dementia) is prevalent in the increasing ageing population in Dundee. The effect of this is an increased demand and usage of health and social care services in Dundee. The challenge is to improve outcomes for both older people and younger people affected by disability and supporting people to live independently with frailty for longer. DHSCP will continue to address equality and fairness issues and contribute to work across Dundee which is directed at achieving equality of outcome for Dundee Citizens.

Dundee City Council has introduced a new tool to support the recording of a number of different impact assessments including Socio-Economic Impact Assessments. Further progress is required to embed this new tool across DHSCP and to ensure that copies of it are published with reports submitted to relevant committees.

Dundee HSCP is represented at Equality Group meetings held by NHS Tayside and Dundee City Council.

DHSCP will set up their own Equality Group to drive forward and support Equality, Human Rights and Fairness processes and to make decisions on matters such as a British Sign Language Plan, responses to Scottish Government Consultations and Mainstreaming Equality Duties.

Progress

DHSCP is committed to embedding the principles of equality and human rights in the planning and delivery of good quality health and social care services. Equal opportunities are supported and encouraged. DHSCP expects supports and services which are delivered and commissioned to respond to the different needs and service requirements of people with

protected characteristics. This is in tandem and part of the focus on reducing health inequalities and mitigating against the impact of deprivation and promoting fairness.

Some of the activities progress towards this have included

- Consultation activities between the Public Protection Committees and Ethnic Minority (EM)
 groups, resulting in the identification of a number of service improvements e.g. women
 only swimming sessions to enable women from EM communities to participate in physical
 activity.
- Supporting Dundee Women's Aid, as a commissioned third sector partner, to secure additional funding to develop a clinical psychology service for women experiencing domestic abuse and enhance their volunteer recruitment, training and support
- Providing funding to all care homes in Dundee for relevant colleagues to take part in the Promoting Excellence Dementia Champion programme.
- The Making Recovery Real initiative has improved the ways in which we involve people with mental health issues in developing recovery focused mental health services
- Participating in the Dundee City Council Harassment Support Officer arrangements to ensure that DHSCP staff have access to advice and support from a skilled colleague who has awareness of equality issues and is trained to support early resolution (where appropriate) to potential bullying or harassment issues.
- Providing a variety of training opportunities including an Introduction to Equality and Human Rights Sessions (in Partnership with Dundee City Council). Since 2008 over 1000 staff across Dundee City Council and DHSCP have attended. The people who have attended are predominantly Social Care staff and include Third sector colleagues. These sessions continue to be held monthly accommodating around 15 colleagues each time.
 - Source: Internal Records DCC Learning and Organisational Development DCC
- Training and Learning is also offered on specific topics on matters such as Deaf/Blind Awareness, communication with people with barriers, Gypsy Traveller Awareness as well as opportunities for funding individual employees for specific further education.
- Men across different cultures quite often express a view that community activities often seem to be dominated by women and revolve around activities that are traditionally female activities. Although men are not excluded from these activities some local men identified that this was not what they were looking for. Across Dundee there has been support to develop Men's Sheds to provide a place for men (and others) to gather and participate in a variety of activities whilst supporting each other in a relaxed environment.
- Dundee Violence Against Women Partnership has developed a co-ordinated response to commercial sexual exploitation and prostitution. This includes dedicated research which focuses on the experiences and needs of the women who are involved in prostitution and

looking to identify what responses would be most effective to support the women to exit prostitution. Services will be restructured in line with the outcomes of the research project.

- Equality and Diversity Champions have been active in NHS Tayside for over 9 years. The
 Champion's role has been positively evaluated empowering staff to challenge behaviours
 and promote a positive culture of diversity in NHS Tayside. The Champions role is to
 promote equality and value diversity within the organisation. Currently the HSCP has
 approximately 20 champions. We will work with NHS Tayside to increase this number.
- DHSCP uses the same approach as Dundee City Council for Equality Impact Assessment (EQIA). There is a poor record for published EQIA reports for Integration Joint Board reports. Although these reports include statements confirming confirm that Equality Impacts have been assessed and risks considered. For the period April 2016 –February 2018 there were 7 EQIA reports published with IJB reports and 2 for Performance& Audit Committee Reports.

2018/2019 priorities

A number of key priorities have been identified for the coming year:

Establishment of Short life working group

The Integrated Strategic Planning Group has agreed that a short life working group will be established to give clear recommendations in relation to how Equality Issues are supported, governed, monitored and driven forward by the HSCP.

Review of Equality Outcomes

A key priority for the short-life working group during 2018/19 will be the review the Partnership's existing equality outcomes to ensure that they are fit for purpose, reflect the desired outcomes of affected communities and are fully aligned to the revised outcomes published by Dundee City Council and NHS Tayside in 2017. It is intended that a revised set of outcomes be available for submission to the IJB in early 2019.

Engagement with Equality Groups

Equality and Human rights Commission guidance states that public authorities must take reasonable steps to involve people who share a relevant protected characteristic and anyone who appears to represent the interests of those people in reviewing a set of equality outcomes. The short-life working group will ensure that revised equality outcomes are co-produced with affected people, utilising and strengthening existing engagement mechanisms. It is recognised that this will require careful planning and significant expertise from across a range of stakeholders, including people who share protected characteristics.

We will work with the Communication and Engagement sub group of the Integrated Strategic Planning Group, along with our Dundee City Council, NHS Tayside and Community Planning Partners to ensure that equality groups are able to participate and engage with us in the planning, delivery and review of services. This will include not just those services targeted specifically at equality groups, but also our "mainstream" services and our community planning contributions.

Impact Assessment and Fairer Scotland Duty

From April 2018 the Fairer Scotland Duty, under Part 1 of the Equality Act 2010, will come into force across Scotland. The new duty places a legal responsibility on public bodies, including Integration Joint Boards to 'pay due regard' to how they can reduce inequalities of outcome caused by socio-economic disadvantage when making strategic decisions. Public bodies will also be required to publish a short written assessment showing how they have fulfilled the duty. Guidance to support the implementation of the new duty is expected to be published by the Scottish Government in advance of 1 April 2018. The short-life working group will give consideration to how the Partnership's implementation of the Fairer Scotland Duty can be aligned within existing duty under the 2010 Act and existing commitments within the Strategic and Commissioning Plan to address health inequalities.

The HSCP has adopted the Integrated Impact Assessment tool developed by Dundee City Council. We need to ensure that the tool continues to be fit for purpose and that it is implemented across the Partnership. The tool will be reviewed to ensure that the requirements in relation to socio-economic assessment and carers' assessment are met. Appropriate training and organisational development plans will be developed and implemented.

Working with our Partners

We will continue to work with our statutory partners to develop, implement and support an appropriate model of co-operation and mutual support in relation to the Public Sector Equality Duty, with a specific focus on employee information and procurement aspects of duties under the Act.

Links to Commissioning

We will explore how our commissioning activity, both internal and external, can better support the delivery of equality outcomes.

Future Reporting

In order to reflect our desire to fully mainstream our equalities work (including our obligations in relation to fairness) we will explore how we integrate our equalities (and fairness) reporting as part of the Annual Performance Report of the Health and Social Care Partnership.

An accessible version of this report will be made publically available following approval of the full report by Dundee Integration Joint Board

References

DHSCP Annual Performance Report

https://www.dundeehscp.com/sites/default/files/publications/dhscp_annual_performance_report_aug17.pdf

Social Care Survey 2017

http://www.gov.scot/Topics/Statistics/Browse/Health/SocialCareSurvey

DHSCP Strategic Needs Assessment 2017

https://www.dundeehscp.com/sites/default/files/publications/dhscp_strategic_needs_assess_ment.pdf

Dundee Citizen Survey

dundeecity.gov.uk/sites/default/files/publications/citizensurvey2016.pdf

Learning disability Statistics Scotland

https://www.scld.org.uk/wp-content/uploads/2017/12/2017-Learning-Disability-Statistics-Scotland.pdf

Integrated Impact Assessment Report

Committee Report No:

Document Title: DHSCP Mainstreaming Equality Progress Report

Document Type: Other **New/Existing:** Existing

Period Covered: 30/03/2018 - 31/03/2018

Document Description:

This report contains updates about Dundee Health and Social Care Partnership Equality Outcomes as

required by The Equality Act 2010.

Intended Outcome:

To advise the Integration Joint Board of progress towards Equality Outcomes.

How will the proposal be monitored?

Through DHSCP Equality Group (The Report recommends that this group be developed)

Author Responsible:

Name: Joyce Barclay

Title: Senior Officer

Department: Health and Social Care Partnership

E-Mail: joyce.barclay@dundeecity.gov.uk

Telephone: 01382 433947

Address: Dundee House

Director Responsible:

Name: David Lynch

Title: Chief Officer, Dundee Health and Social Care Partnership

Department: Health and Social Care Partnership

E-Mail: david.lynch@dundeecity.gov.uk

Telephone: 01382 434000

Address: Dundee House

A. Equality and Diversity Impacts:

Age: Positive Disability: Positive **Gender Reassignment:** Positive **Marriage and Civil Partnership:** Positive **Pregnancy and Maternity:** Positive Race/Ethnicity: Positive Religion or Belief: Positive Sex: Positive **Sexual Orientation:** Positive

Equality and diversity Implications:

The report contains progress towards Equality Outcomes and recommends about future activity. It is anticipated that rights and needs of people with any of the protected characteristics will be supported with the recommended activity.

Proposed Mitigating Actions:

n/a

Is the proposal subject to a full EQIA? : No

The report contains progress towards Equality Outcomes and makes recommendations about future development. It is anticipated that rights and needs of people with any of the protected characteristics will be supported with the recommended activity.

B. Fairness and Poverty Impacts:

Geography

Strathmartine (Ardler, St Mary's and Kirkton): Positive Lochee(Lochee/Beechwood, Charleston and Menzieshill): Positive Coldside(Hilltown, Fairmuir and Coldside): Positive Maryfield(Stobswell and City Centre): Positive North East(Whitfield, Fintry and Mill O' Mains): Positive East End(Mid Craigie, Linlathen and Douglas): Positive The Ferry: Positive West End: Positive

Household Group

Lone Parent Families: Positive Greater Number of children and/or Young Children: Positive Pensioners - Single/Couple: Positive Single female households with children: Positive **Unskilled workers or unemployed:** Positive Serious and enduring mental health problems: Positive Homeless: Positive Drug and/or alcohol problems: Positive Offenders and Ex-offenders: Positive Looked after children and care leavers: Positive Positive Carers:

Significant Impact

Employment:No ImpactEducation and Skills:No ImpactBenefit Advice/Income Maximisation:No ImpactChildcare:No ImpactAffordability and Accessibility of services:Positive

Fairness and Poverty Implications:

It is anticipated that the actions taken to protect the rights and meet the needs of people with protected characteristics will be benefit to a portion of citizens affected by issues of poverty as some the barriers created by protected characteristics are more likely to result in poverty or be a result of poverty.

Proposed Mitigating Actions:

When planning and evaluating activity to protect the rights and meet the needs of people with protected characteristics DHSCP will continue to monitor and assess the fairness and poverty implications.

C. Environmental Impacts

Climate Change

Mitigating greenhouse gases:

Adapting to the effects of climate change:

No Impact

No Impact

Resource Use

Energy efficiency and consumption:

Prevention, reduction, re-use, recovery or recycling waste:

Sustainable Procurement:

No Impact
No Impact

Transport

Accessible transport provision:

Sustainable modes of transport:

No Impact

No Impact

Natural Environment

Air, land and water quality:No ImpactBiodiversity:No ImpactOpen and green spaces:No Impact

Built Environment

Built Heritage: No Impact Housing: No Impact

Is the proposal subject to Strategic Environmental Assessment?

No. No further action is required as it does not qualify as a Plan, Programme or Strategy as defined by the Environment Assessment (Scotland) Act 2005.

Proposed Mitigating Actions:

n/a

Environmental Implications:

n/a

D. Corporate Risk Impacts

Corporate Risk Implications:

The risk implications associated with the subject matter of this report are 'business as normal' risks. The subject matter is routine and has happened many times before without significant loss. There is comfort that the risks inherent within the activity are either transferred to another party, shared equally and fairly between the Council and another party or are negligible.

Corporate Risk Mitigating Actions: n/a