



ACHSCP Equality Outcomes and Mainstreaming Framework – Progress Report April 2023

Outcome 1 Improved accessibility and confidence in using health and social care services.

1.1 Information and advice will be delivered in accessible formats that best suits people's needs

Understanding Needs

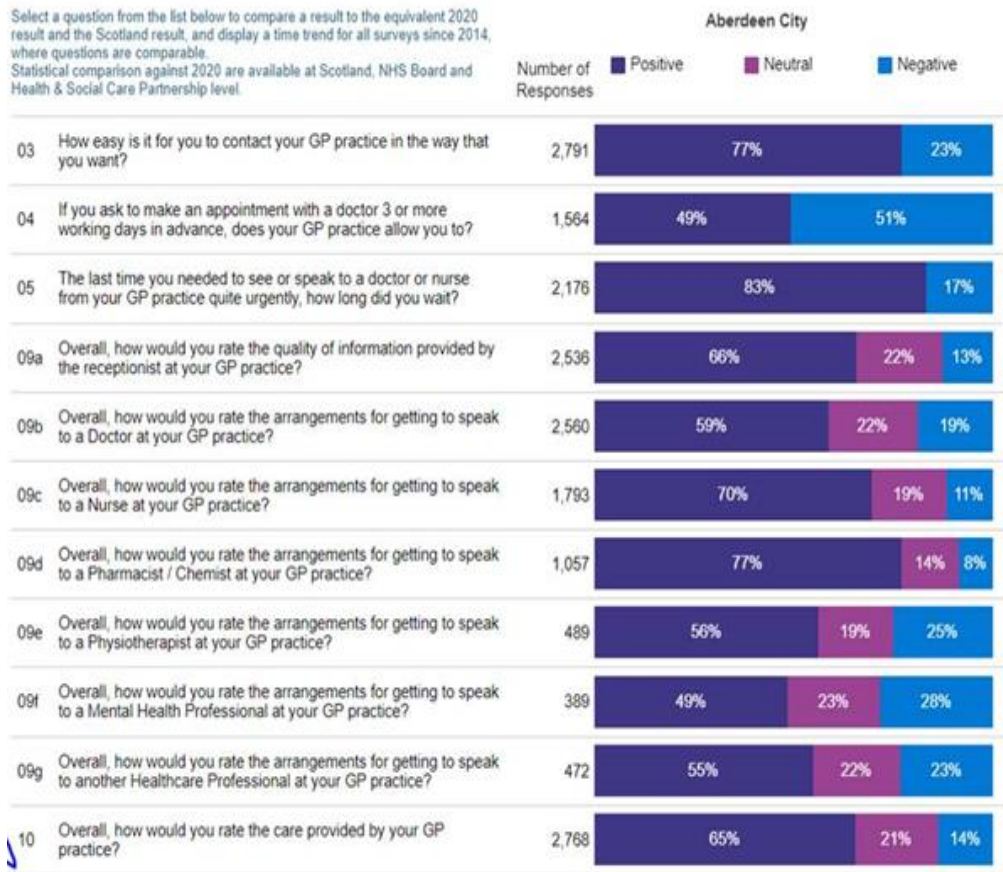
Experience of accessing GP

Health and Care experience survey [public health Scotland publications - health and care experience survey ratings results](#). Aberdeen City results were had 3100 respondents. The two questions scoring below 50% are

- 1) If you ask to make an appointment with a doctor 3 or more working days in advance does your GP practice allow you to? 51% said no and 49% yes with no neutral respondents.
- 2) Overall how would you rate the arrangements for getting to speak to Mental Health Professional at your GP. 49% positive, 23% neutral and 28% negative.

Percentage of positive, neutral and negative responses

Select a question from the list below to compare a result to the equivalent 2020 result and the Scotland result, and display a time trend for all surveys since 2014, where questions are comparable. Statistical comparison against 2020 are available at Scotland, NHS Board and Health & Social Care Partnership level.



SDS Option 1 and 2 Users

- User experiences are typically captured on an individual basis in each person's statutory review.
- D365 does not currently give us the means to collate this information across all users.




	<p>Analysis of cool spots for Vaccinations</p> <p>The Aberdeen City Vaccination Service currently have access to vaccination uptake by postcode area which highlights areas of lower uptake. We use this information to target and organise pop up clinics in these areas. The service ensures that these clinics are advertised widely through posters put up in local shops, social media posts and information available on the Immunisation Website. We also promote these clinics to the Public Health and Wellbeing Coordinators to promote further within local communities. Information is also shared with local councillors to support and advertise in their ward areas. The service have also built good working relationships with local community centres, churches, and organisations such as GREC (Grampian Regional Equality Council) to support us to target minority groups. Over the Autumn/Winter period we have also held local pop-up clinics at the Jesus House Church on Holburn Street and Masjid Alhikmah Mosque and Community Centre on Nelson Street. The Vaccination Service also link into the Weekly Health Project Group for Refugees and Asylum Seekers to ensure vaccinations are promoted and pop-up clinics put in place to support refugees within Aberdeen City. These have been held at the Rosemount Community Centre (Refugee Hub). The Vaccination Team have also been attending weekly Warm Space sessions at Pittodrie Community Hub, Tillydrone Community Hub, Seaton Hub, Kincorth Roadshow and the Staying Ward and Well Winter Roadshow at Cummings Park Community Centre to promote vaccinations to Aberdeen city residents in attendance.</p>
Accessibility	<p>GREC offer translation services on request to support attending GP appoints in person or by phone. Awaiting more information on inclusivity for asylum seekers and Refugees.</p> <p>The New Carers Strategy and The Strategic Plan are both available in range of versions including short animations and as easy read summary versions. The Carers Strategy Implementation Group (CSIG) are currently establishing a Carers Reference Group to provide more opportunities for discussion and engagement around the accessibility of information and the services involved in directly supporting Carers.</p> <p>The Quarriers service continues to register new carers to the service. Offering support remotely and face-to-face. Staff support with co-produced Adult Carers Support Plans. Support groups now run on an in-person basis as well as online, dependent on the carers preference.</p> <p>Service delivery for Carers continues to be delivered through a blended approach of online and in person where appropriate and agile working agreements are in place with all staff. New leaflets have been distributed to other services along with new posters. There are two staff members attached to Royal Cornhill Hospital on a Monday and Tuesday targeting Carers of people with Mental Health problems. Quarriers is now working with Viewpoint to have the registration form and Adult Carers Support Plan adapted for use on mobile phones and a QR code added to leaflets that will take Carers straight to the registration form. The service has continued to book Time to Live breaks for carers through its Respite Bureau.</p> <p>Information on Young Carers Service provision awaited.</p>



	<p>Aberdeen Guide to Independent Living and Enablement (AGILE) is delivered by the Wellbeing Team has a target demographic of people aged 65 and over for their families and carers to use as well. The brochure considers racial discrimination and intersectionality of this cohort by targeting services and information to support self-determination, independence by mainstreaming physical activity, connection to community, considering carers needs, targeting minority groups and those encountering physical emotional and language barriers, visually impaired, deaf blind people, LGBTQ+, people for whom English or Scots is not their first language by enabling them access information both digitally and in print. AGILE is part of the solution to mainstream access to services and information that help reduce harm, abuse and exploitation of older people.</p>
<p>Co-production</p>	<p>GREC have developed the Directory of Community Groups for Engagement & Participation in Aberdeen City – Grampian Regional Equality Council (grec.co.uk) The directory is important in engagement and knowing where to go when you need to reach certain groups.</p> <p>The Post Diagnostic Support (PDS) Information Pack was developed in 2019, in order to address the concern that people given a dementia diagnosis were not generally given the information required and even when they were, this was often outdated. This concern was raised by people living with dementia and their carers during consultation. Sessions with people living with Dementia and their Carers identified the key information that is required, and it was this information that was included in the pack and in the PDS section of the Partnership Dementia webpages. Partnership staff are able to print off any information that their patient/client requires. This information was reviewed to include information specific to Covid-19. It is felt that the information should be reviewed again to make sure the information is still relevant, and this will be complete mid-April 2023. Further work will be required to be undertaken when the new Dementia outcomes focus strategy is published summer 2023.</p> <p>Quarriers held and facilitated a session for carers to consider the priorities for the service and develop their own branding which is now used on all Aberdeen leaflets and social media. Carers are also supported on 1-1 basis to complete a co-produced Adult Carers Support Plan which outlines the main areas of their care role and can then be used to consider a carers SDS package if they meet the Eligibility Criteria. Having this 1-1 discussion can help the carer to see where support would be helpful and to fully understand the social care process which in turn helps build confidence. Quarriers Calendar includes service events for carers meeting outcomes such as reducing isolation, access to information, own health and wellbeing etc</p>
<p>1.2 Proactive partnership arrangements which support ACHSCP demonstrate a welcoming environment with informed and understanding staff</p>	
<p>Raising Awareness</p>	<p>ACVO coordinate and publish a calendar of events ensuring that there is no duplication and attendance, participation, and outcomes can be maximised especially for volunteers and supporters. This is a live tool https://acvo.org.uk/opportunities/events/</p>



	 <p>Quarriers Calender of service for carers against outcomes.jpg (Command Line)</p>
<p>Training</p>	<p>Making Every Opportunity Count (MEOC) training enables and encourages workers, volunteers and community members to engage people in brief conversations about improving their health and wellbeing. A brief conversation can take between 30 seconds and 3 minutes which could encourage someone to think about making a change and help them to access the right support. Training makes reference to health inequalities and social determinants of health. Key Indicators are: -</p> <ul style="list-style-type: none"> - Number of people trained , Service/Job role and Locality. - Confidence to have a brief intervention. - Confidence In how to find referral and signposting information. <p>NHS and ACC staff undergo regular mandatory equalities training. Making Every Opportunity Count training was refreshed in December 2022. Feedback from front line organisations had highlighted the need to support people to have brief interventions about health focussed topics. Online courses are available however, it was felt that the focussed in-person session was more favourable to build on experiences of both the people attending the training as well as the trainees. MEOC courses have been offered to services from January 2023 and from then until March 2023 68 people have been trained including Community Learning and Development, City Libraries Service and Warm Space Volunteers. Confidence to have a brief intervention went up 53% from the baseline to post training. Confidence to find referral and signposting information went up 44% from baseline to post training. Further training is planned with Aberdeen City Council Housing Support staff in June 2023 and information is to be circulated across teams to promote the MEOC training to other services and organisations. MEOC Confidence to Undertake a Conversation Pre & Post Training</p>
<p>Evaluation</p>	<p>The Equalities and Human Rights (EHR) group’s aim is to ensure that the Equality Outcome and Mainstreaming Framework (EOMF) is delivered including successful and appropriate use of Health Inequality Impact Assessments (HIAs) and other framework activity will guarantee that reporting and evaluation does not feel like extra work but business as usual.</p>
<p>1.3 All premises that the ACHSCP work out of or deliver services from have been collaboratively reviewed in terms of location, ramped access, signage, transportation links etc</p>	
<p>There is no update on this work. Aberdeen City IJB does not have sole responsibility for the accessibility of the premises we use. The Equality and Human Rights commission has advised that we should avoid to committing to something that is out with our remit. This action will therefore be removed for the revised Equality Outcome and Mainstreaming Framework.</p>	
<p>1.4 ACHSCP adheres to the Public Sector Bodies (Websites and Mobile Applications) No. 2) Accessibility Regulations 2018</p>	
<p>There has been a review of the website accessibility undertaken and an estimated 80hrs of work required to be completed by NHS IT team to address accessibility issues have been identified. Unfortunately, NHS IT support for the site has always been on an ad-hoc basis so this work remains outstanding. An SLA / contract is being negotiated and funding needs to be identified.</p>	



There are, however, some accessibility improvements that we can make in the meantime such as reducing the use of PDFs.

1.5 2012 SSPSED embedded into the Partnership's commissioning and procurement processes

The Scottish Specific Public Sector Equality Duties (2012) is now embedded within our commissioning and procurement processes. Before a procurement decision is reached by the IJB, a full Health Inequalities Impact Assessment (HIIA) is completed and is available as part of the IJB decision making process. This approach is part of the standard IJB reporting process and the HIIA is then monitored and updated as required throughout the life of the contract:

Outcome 2 Enabling people to live as independently for as long as possible.

2.1 More disabled and older people engaged in exercise, self-care and meaningful activities

Exercise

Stay Well Stay Connected (SWSC) Implementation has moved forward into delivery projects within the agreed four categories. All activities, where possible, are accessible in order to offer out equity of participation regardless of age, means, or ability. The projects focus on opportunities to increase physical activity, falls prevention, reduce social isolation, close the digital divide and achieve greater inclusion of people with cognitive decline. The Technogym 'Easy Line' equipment provides access to physical activity for older people or with limited mobility.

We are in the process of launching Learning Disability (LD) Health Checks which may capture some more general health information relating to exercise and to earlier detection of dementia and other conditions to improve health inequalities.

Utilising the GetActive@Northfield Studio and Community Room, we have introduced Pulmonary Rehabilitation classes helping support those with respiratory conditions. The Pulmonary Rehabilitation Team have had the opportunity to have classes running in the Studio with an additional assessment space available in the Community Room to support waiting lists. The Community Listening Service have also introduced a half day session per week, helping to support mental health with the aim to be a listening ear. This is a self-referral service. Other activities co-ordinated by the Public Health team are healthy weight programmes, breastfeeding, weaning and toilet training classes to support new families; Physio led rehabilitation exercise with use of the Technogym equipment in conjunction with Robert Gordon University (RGU) students in training to meet demand for future Physiotherapists,



<p>Self-Care</p>	<p>This work includes the 'Your Care' Wellbeing Portal Mental Health 'First Aid at Work' Mental Health Training for managers and supervisors Free physical exercise taster sessions with partner organisations e.g. Aberdeen Sports Village, Sport Aberdeen Weekly Wellbeing Blogs Wellbeing Awareness Campaigns in line with national and local campaigns</p>
<p>Meaningful activities</p>	<p>Working with Care Management we have identified a possible place in the digital hub at the Quay where we hope to have projects supporting the digital divide promoted. Other projects to be revisited are Life Curve; the analysis survey to identify the digital gap and need; promotion to increase local providers in programs such as Abilitynet, Silver City Surfers, City Libraries, ECPC, Steering group. The Wellbeing Coordinators are supporting the ACC wide digital group in the community. There has also been work undertaken in relation to the review of how day centre operates and the programme of activities on offer, reviewing activities in care homes membership of (GMAN) and the uptake of the CAPA Principle by the Care Inspectorate to reduce falls and increase the quality of life for residents.</p> <p>The following have been introduced by ACC in an attempt to reduce employer discrimination</p> <ul style="list-style-type: none"> • Introduction of a number of initiatives which focus on digital inclusion and accessibility bot, live captions, immersive reader and translate in teams (Race and Disability) • Introduction of 'A Start Award' for diversity and inclusion, the first winners was selected at the start Awards 2022 • Creation of various Yammer employee peer support groups in topics such as mental health and wellbeing, tinnitus and hearing loss and general equality and diversity and inclusion. • Input from staff working groups into smarter working review and creation of an intranet page with guidance and advice for managers on ensuring inclusivity when considering smarter working groups for their team(s) • Socially inclusive events for employees interested in diversity and inclusion organised by out LGBT+ working group • Creation of a Microsoft team channel for equality and diversity and inclusion communication with the development of a shared diversity calendar • Introduction of a dignity and respect at work policy and guidance to replace the councils managing bullying and Harassment at work policy and guidance.

2.2 Number of people engaged in Stay Well – Stay Connected activities.
 We currently have 1,029 attendees across the Stay Well Stay Connected (SWSC) programme. It is our intention to work with the Data and Digital team to build a performance management framework for SWSC for regular monitoring and reporting.



2.3 ACHSCP's future planning and commissioning plans are linked with Aberdeen City's Local Housing Strategy, Housing Need & Demand Assessment (HNDA) and the Joint Strategic Needs Assessment

Information on the housing needs of complex care grouping has been collated and provided to ACC Housing colleagues and more widely to increase awareness and investigate opportunities to improve the offers available for this group. We have also contributed to the HNDA and housing strategic planning process.

We are working with ACC Housing colleagues on the Housing for Varying Needs (HVN) looking at variety of workstreams and themes including the Very Sheltered Housing/Sheltered Housing provision, Charging Policy, Meal Provision, Special Lettings Initiative, Telecare etc. This work could potentially include the transition of some Sheltered Housing stock into Very Sheltered Housing depending on the demand and needs analysis being undertaken. Work is in the early stages but will involve engagement with service users and their families. We are also reviewing the Market Position Statements (MPS) for Sheltered Housing and Very Sheltered Housing which was last updated in 2021.

2.4 ACHSCP's Assistive Technology and Digital Inclusion evidenced as supporting an increase in the number of people living independently in their own communities.

There are early indications that the input of the Care Technologist within Care Management has led to reductions of in-person care hours required as technology has met these needs. Bon Accord Care have been delivering awareness raising sessions with a range of organisations and there are further sessions both (NHS and Learning Hub) which are well booked. A Quality Improvement (QI) Plan/Do/Study/Act (PDSA) cycle approach has been undertaken with the impact of these planned and additional sessions reviewed. Work is being undertaken to increase the use of Technology Enabled Care (TEC) locally though little data, such as increased numbers living independently is available to evidence impact at this stage. This is one of the areas we need to develop as we go forward, and a TEC Database is proposed as a project in the TEC Plan that is being developed. In terms of the Analogue to Digital (A2DT) project this doesn't directly impact on the numbers of Telecare users, but is necessary to ensure that we can continue to deliver the service as the analogue network is switched off. It will also deliver benefits in relation to the transformation opportunities that moving from an analogue to a digital system offer both for customers and the service.

A series of drop in sessions for all Adult Social Work staff have been delivered in relation to Telecare provision and the script for the video for the TEC room has been finalised. This will give us greater coverage across adult services to promote the use of TEC. We are awaiting additional TEC to trial, KOMP, Guardian 111 and the Melody Care Phone. The plan is to trial these and gauge whether they would be viable for greater financial investment. They would be an alternative to Alexa (which is well known) and would be better for clients that cannot interact at their end, as the functionality is automated. All providers within Granite Care Consortium (GCC) have been given TEC questionnaires and will support clients to complete these. The responses we have had to date have been analysed and follow up guidance and advice for the clients that have expressed an interest has been provided. Borrowing from the TEC library is being arranged with some appointments being scheduled using Alexa as a reminder of appointments. Alexa is also being used to remind clients when their support workers are due to visit. Medication dispensers support further independence using TEC. Other services to be included shortly are turning lights on and off commands.



2.5 Number of disabled adaptations completed in private and social housing. (Major and Minor adaptations)

The Disabled Adaptations Group (DAG) have developed a reporting template to capture data in relation to adaptations. This is in the early stages of implementation and all tenure representatives are currently trialling capturing and inputting their data. A few teething issues have been identified but it is hoped that these can soon be resolved and that from the beginning of financial year 2023/24 we will be producing regular quarterly reports, reviewing the data and using this to challenge performance and lobby for equity in budget and adaptation provision.

Outcome 3: Health and support services are delivered in a compassionate way, respecting the dignity of the individual and are co designed with people who experience poor mental health to ensure they flourish and thrive, build resilience and continue in recovery.

3.1 Develop a quality indicator profile in mental health which will include measures across six quality dimensions - person-centred, safe, effective, efficient, equitable and timely.

This work is, in part, aligned to the development of the national strategy which is in progress but not yet completed. We have a strategic framework for the transformation of Grampian wide services which has an associated programme plan. Some specific work to enhance lived experience is needed. We are working with commissioned providers following on from completion of the Market Position Statement work to look at the sustainability of services versus the current and future need/demand profile

3.2 A rights-based approach which is consistent, intentional and evident in the everyday experience of everyone using mental health support (including but not limited to, unpaid carers and families and people working within the mental health sector) is embedded

The Aberdeen Carers Support Service is commissioned from Quarriers to provide an enhanced service for adult carers over the age of 18 years. The service working with ACC IT has streamlined data collection processes ensuring the implementation of a bespoke Outcome Measurement Framework based on the NHS five steps to wellbeing and the national outcomes for carers. For the quarter ending December 2022 the service was supporting 128 carers. 14 Archived and 7 adult support plans were completed in that time. The service administered 'Time to Live' awards to 4 carers from the enhanced service where the recipient can receive a maximum of up to £300 for clothes shop and coffee out, driving lessons, days out and stay with out of town family. Training was provided by Connexions to 12 people and the male carers group supported 10 carers.

ACHSCP understand the value of being a Trauma Informed leadership by recognising that psychological trauma affects the workforce and why it matters. A trauma informed approach realises the prevalence of trauma, recognises the impact of trauma, responds with that recognition in mind, to do no harm, support recovery, create systems that remove potential trauma related barriers, supports resilience and understands that relationships matter. It also resists re-traumatisation and understands that trauma memories, feelings, and responses can be triggered often by subtle or innocuous event and or relationships. A trauma informed workforce will support progression of ACHSCP strategic plan by empowering communities to be involved in planning and leading services locally.



3.3 The transition from children and young people's services to adult services is designed to enhance life outcomes in their adulthood

Work is being undertaken on the development of a Transitions Plan starting with a focus on Learning Disabilities. There will be specific data available on positive destinations of young people; the work underway is aimed at providing a suite of information which will support transitions without the default being social work intervention (which arguable does not enhance life outcomes for all); this work is still under development and is still to be tested. The project is concurrently running with the GIRFE principles pilot for the Scottish Government Transition Framework in co-production and with the Social Care re-design project.

3.4 People better understand what their rights are to mental health care and support, and duty bearers should be focused on realising these rights rather than being hampered by considerations of eligibility, capacity and cost

Collaborative commissioning between ACC, ACHSCP and SAMH for links practitioners in the city has been undertaken to ease the pressure on GP consulting hours where service users are supported when appropriate to find other non-medical solutions to their presenting issue at the practice.

The MHL D disability project in Kincorth and Cove is a pilot with patients who are seen by an experienced MH practitioner and benefit from extended appointments times. There is a thorough assessment of presenting issue, risk and referral to the most suitable service appropriate to patients need (MH service in Primary Care, Psychological Therapy, Community MH teams, Drugs and Alcohol services, Eating Disorder etc.). The programme facilitates a consultative approach to care where GP's and ANP's can seek patient review, recommendations, and suggestions which offer positive outcomes as this model supports optimal self-empowerment models, through collaborative and connected supports and pathways which reduce ineffective use of resources. Over 8 weeks 1,245 minutes of GP appointments were reallocated for specialised GP need. The MH practitioner role saves secondary care time as the initial referral is detailed and allows for an easier decision within the CMHT to be reached.

3.5 Gaps in service provision, which are specific to the needs of people with protected characteristics, are identified and fed into the strategic planning and commissioning process.

We have developed our own HIIA process and to date we have completed five full HIAs. These were for our strategic plan, our new Carers Strategy, our new Workforce Plan 2022 – 2025, our MHL D Commissioning, and our Analogue to Digital Transformation. Our DiversCity Officer Network is being established to further develop our processes and support IJB reporting with HIAs being completed across the partnership.

3.6 Supporting employers to have an improvement plan for workplaces in making continuous improvement to their culture, practices and policies, to directly tackle stigma and discrimination e.g., attaining See Me in Work

ACC as an employer of some of the staff in ACHSCP has undertaken the following: -
Disability

- Introduction of Deaf Awareness and British Sign Language for beginners to 99 Employees.
- Guidance on reasonable adjustment launched.
- Mental health awareness intranet page created for managers.
- Various internal communications on topics such as neurodiversity, Tinnitus Parkinson's Autism, access to work carers week Tourette's, UK Disability History Month, Scottish



Learning Disability Week, International day of Disabled persons, multiple sclerosis society

- Posters created to raise awareness of sensory awareness.
- Reasonable adjustments passports approved at committee (Due to be Implemented)
- Promotions of 'quiet space' virtual working sessions organised by autism understanding Scotland.
- Confidential survey undertaken on mental health and wellbeing during the Covid19 pandemic.
- Implementation new online courses on mental health in the workplace and a series of mental health and wellbeing webinars for staff were run in partnership with the Scottish Association for Mental Health (SAMH). options, immersive reader and translate in teams (Disability, Race) All · Introduction of a Star Award for Diversity and Inclusion, the first winner of which was selected at the Star Awards 2022 · Creation of various Yammer employee peer support groups in topics such as mental health and wellbeing, tinnitus and hearing loss and general equality, diversity and inclusion · Input from staff working groups into the Smarter Working review and creation of an intranet page with guidance and advice for managers on ensuring inclusivity when considering smarter working options for their team(s) · Socially inclusive events for employees interested in diversity and inclusion, organised by our LGBT+ working group · Creation of a Microsoft Teams channel for equality, diversity and inclusion communications with the development of a shared diversity calendar · Introduction of a Dignity and Respect at Work policy and guidance to replace the Council Managing Bullying and Harassment
- in the workplace and a series of mental health and wellbeing webinars for staff run in partnership with the Scottish Association for mental Health (SAMH). Options, immersive reader and translate in teams (Disability and Race)
- were run in partnership with Scottish for mental health guidance at Work policy.

Race

- Race and terminology document created for people and organisational development advisors.
- 2021 and 2022 intranet posts for the Black History Month
- Internal promotion and staff tours of the art gallery's 'reframing the collections' exhibition.

Sex

- Staff communications and intranet awareness raising for International Women's Day 2023
- Launch of a colleague recognition and celebration nomination process for international women's day 2023
- University of Aberdeen webinars for international women's day promoted to ACC empleey34
- Intranet posts on Empowering Women in Digital Leadership including an example of a woman's experience as a conference panellist in a digital transformation / cyber security environment
- During the Covid-19 pandemic, communications were issued to staff about domestic violence and support available, including the Council's Gender Based Violence policy Multiple
- CoreHR imaging amended to reflect Lunar New Year 2023 (Race, Religion or Belief)

-A large focus has been placed on supporting employees through menopause including:

-A menopause intranet page created with advice and guidance

-Menopause co-lab café's organised and promoted in partnership with partner organisations

-Internal menopause peer group created on Yammer



-Promotion of events for autistic people going through menopause run by autism understanding Scotland (Age Disability, Sex)

- Black History Month 2022 – panel discussions organised including employees and external partners, including a panel on the intersectionality of race and disability (Disability, Race)
- Updating of the Employee Maternity Checklist to ensure that those who are breastfeeding get access to a private room in the workplace for expressing (Pregnancy and Maternity, Sex)
- Mx introduced as a little option on core HR (Gender reassignment sex)
- Grampian pride promoted to internal employees and experiences of staff attendees shared with the workforce (Gender Reassignment, sexual orientation)

All

- Introduction of a number of initiatives which focus on digital inclusion and accessibility bot, live captions, immersive reader and translate in teams (Race and Disability)
- Introduction of 'A Start Award' for diversity and inclusion, the first winners was selected at the start Awards 2022
- Creation of various Yammer employee peer support groups in topics such as mental health and wellbeing, tinnitus and hearing loss and general equality and diversity and inclusion.
- Input from staff working groups into smarter working review and creation of an intranet page with guidance and advice for managers on ensuring inclusivity when considering smarter working groups for their team(s)
- Socially inclusive events for employees interested in diversity and inclusion organised by out LGBT+ working group
- Creation of a Microsoft team channel for equality and diversity and inclusion communication with the development of a shared diversity calendar
- Introduction of a dignity and respect at work policy and guidance to replace the councils managing bullying and Harassment at work policy and guidance.

The Staff Equalities Network is a coalition of staff from across the system who are passionate about equality, inclusion and allyship, working to coproduce systemic approaches to address systemic issues which aim to improve the experience of staff in health and care service. Everyone is welcome. Information on why the group was formed and its aims can be found here [Staff Equalities Network \(nhsgrampian.org\)](https://nhsgrampian.org/staff-equalities-network).

The other initiative is We Care [What is We Care \(nhsgrampian.org\)](https://nhsgrampian.org/what-is-we-care), which is a staff health and wellbeing programme established to deliver, co-ordinate and enhance staff wellbeing. NHS Grampian also provides a comprehensive programme of Equality and Diversity training for staff across all levels via the digital platform Turas Learn. The NHS weekly bulletins provide health and wellbeing initiatives such as yoga meditation and many more.



Outcome 4 Community engagement, empowerment, and cohesion work across the City is strong and effective.

4.1 Increased participation, influence and voice from people with protected characteristics, with lived experiences, in the City's Locality Planning Processes

The dedicated Development Officer (Engagement) post has been tasked with updating Our Guidance for Public Engagement, and developing staff training that can be delivered in a face to face, virtual or blended format. Other documents will be used to inform and develop this training (Community Planning Aberdeen's Engagement and Empowerment Strategy as well as the COSLA/Scottish Government document Planning with People – Community Engagement and Participation Guidance.)



Guidance for Public
Engagement Human F

An Integrated Locality Planning Team is being set up with Public Health Coordinators and Community Planning/Community Learning and Development (CLD) colleagues. An action plan has been prepared for integrated locality planning and the team will meet on a monthly basis. The integrated team will have operational responsibility for planning and facilitating Locality Empowerment Groups (LEGs) and Priority Neighbourhood Partnership (PNP) meetings, delivering Locality Plans; and ensuring strong and diverse community voices are listened to and actioned. PNPs represent the most deprived areas in Aberdeen City.

4.2 Adhere to the National Community Engagement Standards when engaging with communities of interest.

Working with colleagues in the planning and implementation of current and future community engagement activities, the [Voice Tool](#) is a free online system to help plan monitor and evaluate community engagement practice, which is endorsed within the National Standards for Community Engagement. This is promoted as a great starting point. To consider wider Ethical and legal duties associated with engagement activities, the 'Engagement Framework' (attached) from the GIRFE pathfinder programme will be used to help ensure compliance with data protection/GDPR regulations and our ethical duties towards participants.



Engagement
Framework - GIRFE p

4.3 NHS Scotland and Voluntary Health Scotland's Engagement Matrix is embedded into community engagement processes of ACHSCP

See 4.1 and 4.2 for relevant updates – nothing further to add under this heading.



Outcome 5 All staff delivering health and social care services, fully understand their legal duties and other responsibilities in keeping people living, working, studying or visiting Aberdeen City safe and free from harm

5.1 Interventions are early and effective, preventing domestic abuse, and maximising the safety and wellbeing of citizens, children, and young people affected by domestic abuse. Awareness of violence/ abuse and its related harms are better understood by staff working in Partnership services

The launch of the Dynamic Database of support services will allow users to access 'one true source' of guidance and information about support service provision and referral pathways relating to domestic abuse in Aberdeen.

5.3 Improved services and support for those at risk of and those that are affected by Female Genital Mutilation (FGM).

Can we say what we are doing with this or is this another thing that is not directly within our remit! [Scotland's national action plan to prevent and eradicate FGM - gov.scot \(www.gov.scot\)](#)

5.4 Improved understanding of and development of a joined up approach to support those affected by human trafficking and exploitation.

Review current activity against the Scottish Government's Trafficking and Exploitation Strategy for Scotland 2017 and subsequent update reports before developing and implementing staff awareness sessions and support services for Potential Victims of Trafficking. **Who is doing this?**

5.5 Improved understanding of the causes of honour-based violence and the support services necessary to keep people safe.

In partnership with VAWP and BAME Violence Against Women and Children organisations develop and implement a programme of staff and key partners awareness raising programmes. [Preventing violence against women and girls - what works: key findings - gov.scot \(www.gov.scot\)](#) – again can we describe the link with VAWP and Police Scotland for what's happening on this (or is that "see below"?)

[Reducing Violence and Abuse | Aberdeen City Council](#) [Forced marriage awareness raising materials - gov.scot \(www.gov.scot\)](#)

There is appropriate ongoing representation from ACHSCP on the Violence Against Women Partnership (VAWP). We are working jointly with the VAWP to undertake public awareness raising campaigns to highlight what constitutes harmful behaviour. Impact can be assessed by trending topics on social media and the 'likes' and 'following' generated. There is support for partnership staff impacted by domestic and gender-based abuse by including information on the quarterly NHS and ACC bulletins.

Work is ongoing to improve staff knowledge and awareness e.g., DAART training, making available to staff 'Harm Help sheets' covering gender based abuse in all its forms, including how to respond, Honour-based violence, female genital mutilation, forced and predatory marriage, and commercial sexual exploitation. In addition, we are progressing 'Routine Enquiry' within the priority settings of maternity, mental health, substance misuse, A&E, community nursing and sexual health services and supporting VAWP Development Session in terms of reaching seldom heard groups, improving the response to those with complex needs (e.g., mental health, substance use, trauma), and ensuring appropriate procedures / pathways to specialist support are in place within ACHSCP services.

5.2 Improved services for those affected by hate crime and hate incidents in the City. Improved preventative work and a shared understanding of the causes enabling a reduction in hate crime and hate incidents



An analysis of staff working in ACHSCP services and their understanding of hate crime and hate incidents has been undertaken as has awareness raising activities to address the recommendations of the report presented to the Equality Subgroup. Participation in Hate Crime Awareness Week annually commenced October 2021. We are working with the Chinese, East and South-East Asian community members and representatives to co-design local initiatives to raise awareness of hate crime and prejudice. These actions will be measured by findings and recommendations reported to the Equality and human Rights Subgroup which will include the number of incidents reported, and referrals made to appropriate services, details of and participation in events organised across ACHSCP services, and the number of hate incidents reported by staff working in partnership services and the number of people accessing appropriate support.

Outcome 6: We have a workforce that is reflective and representative of the communities we care for

6.1 Workforce data reflects ACHSCP service user data

Workforce data is available in the Workforce Plan which is available in accessible versions.

6.2 Flexible and targeted recruitment drives to address current gaps and the needs of future service users

The Workforce plan contains details on recruitment and links with Career Fairs, Further Education, Schools, and Aberdeen Business Gateway to support the provision of tailored support, advice and awareness raising events in the communities of Aberdeen in relation to the opportunities of a career with ACHSCP.

6.3 Staff have a shared understanding of cultural diversity and difference

Help and Support for Older Workers [Help and support for older workers - GOV.UK \(www.gov.uk\)](https://www.gov.uk) (NB: Age Positive has now been withdrawn Carer Positive [Carer Positive the standard for employers in creating supportive working environment for carers](https://www.gov.uk), Disability Confident Disability Confident employer scheme and guidance [Disability Confident employer scheme - GOV.UK \(www.gov.uk\)](https://www.gov.uk)
EHRC Working Forward Working Forward home [Pregnancy and maternity discrimination | Equality and Human Rights Commission \(equalityhumanrights.com\)](https://www.equalityhumanrights.com)



Outcome 7 We have a workplace where all staff feel valued and respected and have their needs met appropriately.

7.1 ACHSP has a responsive dignity and respect at work approach which all staff and managers are aware of
Promotion and marketing of Aberdeen City Council's and NHS Grampian's respective policies
7.2 ACHSCP supports the formation of staff groups which represent protected characteristics
Statements of support on ACHSCP website
7.3 ACHSCP embed an approach of learning and understanding to address findings of internal investigations to effect behavioural change and improve organisational. culture
This action has not been progressed as a result of the lack of information available.
7.4 Managers have a shared understanding of their responsibilities in relation to reasonable workplace adjustments
This action is a delegated duty and therefore not a SMART outcome!