

ACHSCP Equality Outcomes and Mainstreaming Framework – Progress Report April 2023

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

nderstanding	Experience of accessing GP									
leeds	Below are the results from the most recent Health and Care Experience survey									
	public health Scotland publications - health and care experience survey ratings									
	results.									
	Percentage of positive, neutral and negative responses									
			Now to compare a result to the equivalent 2020 display a time trend for all surveys since 2014.		,	berdeen City				
	Statis	e questions are comparable stical comparison against 20 h & Social Care Partnership	20 are available at Scotland, NHS Board and	Number of Responses	Positive	Neutral	N N	egative		
	03	How easy is it for you you want?	to contact your GP practice in the way that	2,791		77%		23%		
	04		appointment with a doctor 3 or more nce, does your GP practice allow you to?	1,564	49%		51%			
	05		ded to see or speak to a doctor or nurse quite urgently, how long did you wait?	2,176		83%		17%		
	09a	Overall, how would yo the receptionist at you	ou rate the quality of information provided by ir GP practice?	2,536		56%	22%	6 13%		
	09b	Overall, how would yo to a Doctor at your GF	ou rate the arrangements for getting to speak P practice?	2,560	59	%	22%	19%		
	09c	Overall, how would yo to a Nurse at your GP	ou rate the arrangements for getting to speak practice?	1,793		70%	19	% 11%		
	09d	Overall, how would yo to a Pharmacist / Che	ou rate the arrangements for getting to speak mist at your GP practice?	1,057		77%		14% 8%		
	09e	Overall, how would yo to a Physiotherapist a	ou rate the arrangements for getting to speak t your GP practice?	489	56'	×.	19%	25%		
	091	Overall, how would yo to a Mental Health Pro	ou rate the arrangements for getting to speak ofessional at your GP practice?	389	49%		23%	28%		
	099	Overall, how would yo to another Healthcare	ou rate the arrangements for getting to speak Professional at your GP practice?	472	551	6	22%	23%		
	1 ¹⁰	Overall, how would yo practice?	ou rate the care provided by your GP	2,768	ll,	85%	21%	14%		
	An Th by tar clir info Wo coi clir	Overall, how would you rate the care provided by your GP 2,768 65% 21% 14% Analysis of cool spots for Vaccinations The Aberdeen City Vaccination Service currently have access to vaccination uptake by postcode area which highlights areas of lower uptake. We use this information t target and organise pop up clinics in these areas. The service ensures that these clinics are advertised widely through posters in local shops, social media posts and information available on the Immunisation Website. The Public Health and Wellbeing Coordinators promote these clinics further within local communities. Information is shared with local councillors to support and advertise clinics in their ward areas. The service have also built good working relationships with local community centres, churches, and organisations such as GREC								
	wit (G the	th local comr rampian Reg e Autumn/Wi		es, and o to supp have h	organisat oort us to eld local	ions suc target n pop-up	ch as G ninority clinics a	REC groups at the J		



	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.
Accessibility	GREC offer translation services on request to support attending GP appointments in person or by phone.
	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.
	The Adult Carers Support service provided by Quarriers continues to register new carers to the service. Support is offered both remotely and face-to-face dependent on the carers preference. Quarriers Calendar includes service events for carers meeting outcomes such as reducing isolation, access to information, own health and wellbeing etc. 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 Respitality Bureau.
	The Young Carers Support service is provided by Barnardo's who tailor support to every Young Carer and their family, whilst incorporating the needs of each individual into their service delivery. Different levels of support are offered from one-to-one allocated project workers to groups only supports, which can be altered throughout dependant on need and preference. Young Carers are involved throughout the process of developing Young Carers Statements.
	Feedback is welcomed from Young Carers and their families to further develop the opportunities available to them and the aim is to build new partnerships with other Aberdeen City projects to meet the service delivery needs. Information and signposting opportunities appropriate to individual families are provided and support can be provided to further access these – for example, referrals to adult services during transition from Academy.
	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. 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 is not their first language by enabling them to 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.
Co-production	GREC have developed the <u>Directory of Community Groups for Engagement &</u> <u>Participation in Aberdeen City – Grampian Regional Equality Council</u> (grec.co.uk) The directory is important in engagement and knowing where to go when you need to reach certain groups.
	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 is still relevant. Further work will be required to be undertaken when the new Dementia Outcomes Focused Strategy is published in the summer of 2023.
	In relation to the branding for the Adult Carers Support Service, 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.
	rtnership arrangements which support ACHSCP demonstrate a ronment with informed and understanding staff
Raising Awareness	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/
	Quarriers Calender of service for carers against outcomes.jpg (Command Line)
Training	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



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	 the right support. Training makes reference to health inequalities and social determinants of health. Key Indicators are: - Number of people trained , Service/Job role and Locality. Confidence to have a brief intervention. Confidence In how to find referral and signposting information. 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 2023and 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 indicating the indication is to be circulated across teams to promote the MEOC training to other services and organisations.
	Undertake a Conversation Pre & Post Training
Evaluation	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 (HIIAs) and other framework activity will guarantee that reporting and evaluation does not feel like extra work but business as usual.
1.3 All premise	s that the ACHSCP work out of or deliver services from have been

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

Aberdeen City JB 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 committing to something that is out with our remit. This action will therefore be removed for the revised Equality Outcome and Mainstreaming Framework.

1.4 ACHSCP adheres to the Public Sector Bodies (Websites and Mobile Applications) No.2) Accessibility Regulations 2018

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

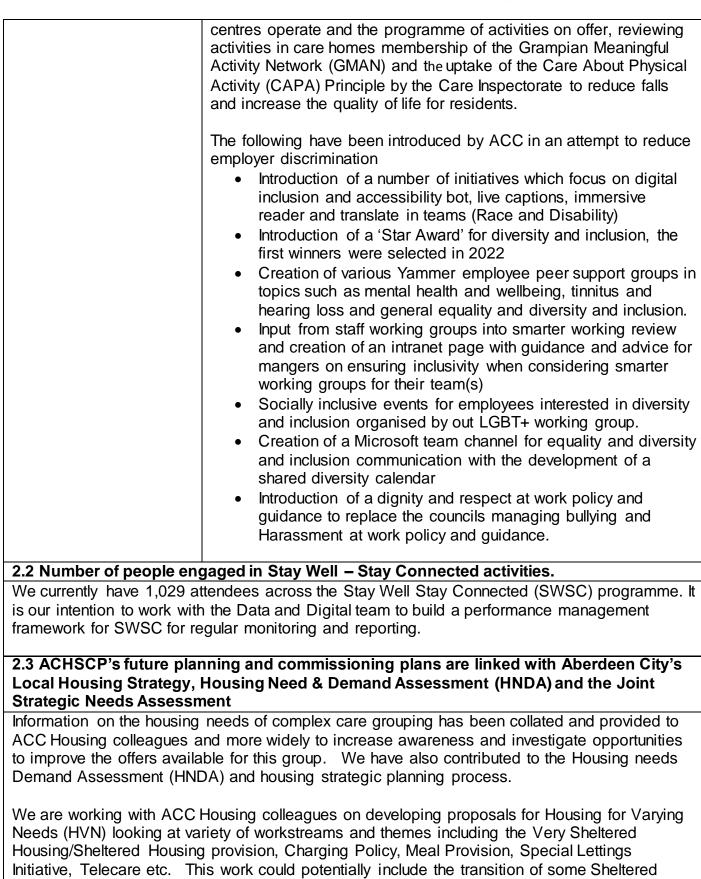
1.5 2012 SSPSED embedded into the Partnership's commissioning and procurement processes

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 JB, a full Health Inequalities Impact Assessment (HIIA) is completed and is available as part of the JB decision making process. This approach is part of the standard JB 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.

	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 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.
Self-Care	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; and Wellbeing Awareness Campaigns in line with national and local campaigns
Meaningful activities	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. Other projects to be revisited are the 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. 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



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 MHLD 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 HIA 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 MHLD 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, Religion or Belief

- 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.
- CoreHR imaging amended to reflect Lunar New Year 2023
- Black History Month 2022 panel discussions organised including employees and external partners, including a panel on the intersectionality of race and disability

Sex, Gender Reassignment, Sexual Orientation

- 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
- 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

- Updating of the Employee Maternity Checklist to ensure that those who are breastfeeding get access to a private room in the workplace for expressing
- Mx introduced as a little option on core HR
- Grampian pride promoted to internal employees and experiences of staff attendees shared with the workforce

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 mangers 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 <u>Staff Equalities Network (nhsgrampian.org)</u>.

The other initiative is We Care <u>What is We Care (nhsgrampian.org)</u>, 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 <u>Voice Tool</u> 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.

5.2 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.

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

No specific actions have been progressed so far within this action.

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

No specific actions have been progressed so far within this action.

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

No specific actions have been progressed so far within this action.

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., the Domestic Abuse Awareness Raising Tool (DAART) training, making available to staff 'Harm Help' fact sheets covering gender based abuse in all its forms, including how to respond, In addition, we are progressing 'Routine Enquiry' within the priority settings of maternity, mental health, substance misuse, ED, 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 and ensuring appropriate procedures / pathways to specialist support are in place within ACHSCP services.



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

See response to 3.6.

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!