

NHS National Services Scotland

Equality Outcome Plan

Progress Report April 2015

Equality Outcomes - NHS National Services Scotland Services NHS National Services Scotland objectives

1. We will measure the **impact** of national services and programmes on health and equality
2. Through continued health, financial and equality impact assessments we will measure the **difference** we make to people's health
3. We will optimise NSS services (external and internal) **to maximise** benefits both health and financial and be flexible for future change

Equality Outcome: Disability – Improve access to the Scottish National Blood Transfusion Service (SNBTS) donor services for Deaf BSL users, Deaf-blind, Deafened and Hard of Hearing people. Participation will improve through: access to service information, communication, new technology and person centred, safe and effective services

Situation: Based on evidence provided by the Scottish Council on Deafness (SCoD) and the Scottish National Blood Transfusion Service (SNBTS). Deaf BSL users, Deaf-blind, Deafened and Hard of Hearing people want improved communication support to access donor services to enable them to become blood donors on a regular basis.

Activities: Further involve the Scottish Council on Deafness, Action for Hearing Loss in Scotland and key NSS staff from SNBTS to identify the needs and barriers for Deaf BSL users, Deafblind, Deafened and hard of hearing people. Present to the SNBTS Clinical Governance Committee and link to the improving the donor experience programme of work.

Scope the potential for working with NHS24's telehealth and telecare service. Testing the possibility of using existing equipment in current NHS sites. Pilot the communication support for Deaf BSL users, Deafblind, Deafened and hard of hearing donors in one or two fixed centres. Measure the outputs from the pilot and share the learning to inform further rollout across the fixed centres. Work in partnership with SCoD and the Deaf Community, Deafblind, Deafened and Hard of Hearing people to ensure their continued involvement to shape the appropriate solution.

Progress:

The pilot session took place with the involvement of the Scottish Council on Deafness (SCOD) NHS24, Scottish National Blood Transfusion Service (SNBTS) and a volunteer who is deaf. The pilot took place at the fixed donor centre at Nelson Mandela Place in Glasgow.

The work is progressing to shape the appropriate solutions

Equality Outcome Contd.

Disability – Improve access to the Scottish National Blood Transfusion Service (SNBTS) donor services for Deaf BSL users, Deaf-blind, Deafened and Hard of Hearing people. Participation will improve through: access to service information, communication, new technology and person centred, safe and effective services

Outputs: SNBTS Donor Services staff and IT staff will work with NHS24 to provide communication support in the fixed donor centres. Reassurance that clinical governance standards will be maintained. Staff in donor centres will have an improved understanding of the communication needs of deaf and hard of hearing donors.

Evidence of good practice and practical application. Increased use of available technology. Increased access for Deaf BSL users, Deafblind, Deafened and hard of hearing donors.

3rd Sector and Voluntary Organisations (Equality) will have a better/improved understanding of NSS. Increased involvement and participation of Deaf BSL users, Deafblind, Deafened and hard of hearing donors in donor sessions.

Equality Outcomes: Deaf and hard of hearing people will have access to blood donor services provided by NHS National Services Scotland.

General Duty: Advance equality of opportunity, eliminate unlawful discrimination and foster good relations.

Progress:

The SNBTS Clinical Governance committee are progressing with this outcome and are exploring the potential IT solutions to ensure positive donor experience and safety.

NSS has worked with NHS24, the Scottish Council for Deafness (SCOD) and deaf volunteers to pilot the British Sign Language (BSL) online interpreting service in the Glasgow donor centre. We worked with the deaf volunteers to improve their donation experience by having access to the online BSL interpreting service throughout their donation journey. We will use the learning from the pilot to address the long term provision of BSL in the Glasgow donor centre.

Equality Outcome: Transgender Health - The health of transgender people will improve through continued co-ordinated specialist services

Situation: (1) Following an assessment of guidance and provision of services pertaining to Gender Reassignment, NHS Scotland agreed to develop and implement a specific 'Gender Reassignment Protocol.' The Gender Reassignment Working Group held its first meeting in February 2011 and membership consisted of clinicians, members of the transgender community, representatives from the Scottish Government, National Services Division and a lay person with an interest in Transgender issues. The working group was Coordinated by NHS Health Scotland.

(2) The first ever Trans Health event was held in November 2012 to address Mental Health; Screening Services; Monitoring; Gender Reassignment Protocol. The conference consisted of a series of workshops and a panel debate. The workshops explored a range of issues which can impact on the equal access to health services by transpeople, including cancer screening services, the issue of new medical records, and access to sport and exercise opportunities.

These sessions were designed to be highly participatory and allowed delegates to share experiences and view points, and to offer recommendations on better practice. Representation at the event was 83 respondents: Trans people 46%, Professional 29% and Other 25%

Activities: National Services Division worked with representatives of the transgender community, and NHS Gender Identity specialists, to develop a specification for the specialist surgical treatment required. NHS Boards collectively agreed to provide a budget of £0.5 million to allow NSS to procure the required surgical services.

NSS is now tendering for these services supported by a panel of NHS specialists and transgender community representatives. NSD will commission the services ensuring that quality standards are clearly defined and that the service is both safe and person centred. The provision of the surgical service will support NHS Boards in implementing the Gender Reassignment Protocol in Scotland.

(2) NSS is adapting the IT software used in screening to improving Trans access to cancer and non cancer screening services. Work to improve the communication strategies with Trans people and the need for the CHI Number (Community Health Index). Continue to work with STA to include their involvement and Trans people in the equality impact assessment.

Equality Outcome: Transgender Health - The health of transgender people will improve through continued co-ordinated specialist services

Outputs: Gender Dysphoria Services – Gender Reassignment Surgery Service. A comprehensive and effective surgical service will be provided as part of a co-ordinated multidisciplinary team, which will ensure the availability of appropriate information to assist in decision making and consent by patients, within an integrated treatment pathway, which will offer, agree and carry out appropriate

surgical interventions, performed by qualified & competent surgeons, with all appropriate and necessary steps taken to limit complications, minimise infection, and to provide appropriate aftercare and follow-up of physical and psychological well-being.

(2) Reduction in stigma and negative experiences in screening services. Improved data capture to ensure people are called for screening appropriately. Leaflet and posters with clear communication about CHI for Trans people (Trans inclusive language in literature). Equality Impact assessments. Improved understanding of NSS services and the role of NSD, PSD and ISD.

Equality Outcomes: (1) The patient will receive high quality surgery by a qualified competent surgeon to ensure the best achievable aesthetic and functional outcomes

(2) Improved health outcomes for Trans people

General Duty: Equality of opportunity, eliminate unlawful discrimination and foster good relations

Progress:

The Specialist & Screening Directorate has made significant progress in relation to improving equitable access to specialist and screening services for transgender people in 2014.

We worked with NHS Boards across Scotland over the last year to introduce nationally funded gender reassignment surgical services for transsexual people who require specialist surgical interventions to reassign their sex by changing physiological attributes of sex. We now have agreed patient pathways and protocols for equitable access for residents of Scotland to 3 specialist surgical services – male to female, female to male gender reassignment surgery, and specialist chest construction for transmen.

The Gender Identity Managed Clinical Network was launched on 3 December 2014. We have also succeeded in getting funding approval from NHS Boards and SG for changes to IT systems in screening to support access to national population screening services for transgender people. The IT changes have not yet been programmed because they are complex and will take time – but they are now in planning for implementation.

On the “helping you decide” leaflets we have continued to work with NHS Health Scotland and other Boards and patient groups to ensure that information about specialist and screening services is available in a variety of forms to ensure the information is accessible to all.

Equality Outcome: Sexual Orientation – men who have sex with men (MSM) will have an improved understanding of the blood donor selection criteria

Situation: Following a review by the Advisory Committee on the Safety of Blood, Tissues and Organs (SaBTO), men whose last sexual contact with another man was more than 12 months ago will now be able to donate blood, subject to meeting the other donor selection criteria.

Stonewall Scotland and LGBT Youth Scotland whose service users include gay men have advised that the blood donor selection criterion is still misunderstood by men who have sex with men. They have asked NSS to provide further communication to improve the understanding and increase knowledge of men who have sex with men (MSM).

Activities: SNBTS Head of Public Affairs and Stonewall Scotland will work together to develop and publish information accessible to the gay community across Scotland. Work in partnership with NHS Scotland equality leads to cascade and communicate information for men who have sex with men.

Outputs: Communication and clear information on SNBTS external web Site. Communication and clear information on the Stonewall Scotland web Site. Leaflet published aimed at the gay community on the donor selection criteria. Reduction in stigma and increased awareness and knowledge of men who have sex with men and the donor selection process.

Equality Outcomes: The change brings the criteria for MSM into line with other groups that are deferred from blood donation for 12 months due to sexual behaviours. Screening and testing procedures for HIV (AIDS) have improved sufficiently for SaBTO to be confident that the new donor criteria can be introduced, while maintaining the current very high safety standards of the blood supply.

3rd Sector and Voluntary Organisations (Equality) will have a better/improved understanding of NSS.

General Duty: Fostering good relations and equality of opportunity

Progress:

The SNBTS web pages have been updated to reflect changes within the transforming the donor experience and NSS continues to work in partnership with Stonewall Scotland.

Equality Outcome: Disability - Disabled women; Ethnic minority women; Transgender people; will have improved access to breast screening services in Scotland. *The timescales for this outcome are guided by the National Planning Forum and the rollout schedule of the digital breast screening units*

Situation: National Services Scotland was commissioned to carry out a national review of breast screening services in Scotland. In early 2011, NPF commissioned National Services Division (NSD) to undertake a major review of the Scottish Breast Screening Programme (SBSP) to ensure the service provided was of the highest quality and delivered in the most efficient manner. Particular challenges were to convert to digital mammography without adversely impacting on uptake; to promote a sustainable workforce; and to continue to deliver SBSP within existing revenue.

Public consultation, undertaken as part of this review, indicated that women had no real preference on screening location, with ethnic minority groups favouring a local health facility or hospital location. In response, the review recommends utilising capacity within symptomatic services to undertake breast screening, reducing pressure & dependence on mobile screening units.

The public consultation was launched on 16th April 2012 & concluded on 11th June 2012. Respondents were asked to read the paper and then submit their responses via paper or web questionnaire or by letter or email.

309 people responded to the questionnaire, either via web or paper copy. Of these 65 were returned incomplete therefore these could not be added to the overall conclusions. For the purpose of the review, 244 completed responses were analysed. A full copy of the report can be accessed at: <http://www.nsd.scot.nhs.uk/services/screening/breastscreening/breastreview.html>

The health inequality impact assessment identified areas for improvement & the review group acknowledged the findings in the final report which was submitted to NPF in Feb 2013.

The HIIA group met on two separate occasions, the first to assess SBSP as it is currently delivered and secondly to assess the preferred option for service delivery. A full copy of the report can be accessed at: <http://www.nsd.scot.nhs.uk/services/screening/breastscreening/breastreview.html>

For further details on the Scottish Breast Screening Programme please go to: <http://www.nsd.scot.nhs.uk/services/screening/breastscreening/index.html>

Equality Outcome: Disability - Disabled women; Ethnic minority women; Transgender people; will have improved access to breast screening services in Scotland. *The timescales for this outcome are guided by the National Planning Forum and the rollout schedule of the digital breast screening units*

Activities: The review group worked closely with the Scottish Health Council and third

sector organisations to undertake public consultation on the review; however it is envisaged that NHS Boards would also undertake local public engagement, taking on board the £12m investment to enable the implementation of digital mammography, the need to maintain the successful uptake of the programme and to work more closely with symptomatic services to release capacity on mobile units. NSS will work with the SHC to produce a toolkit to support NHS Boards in their discussions.

Engagement with transgender community to improve access. Project to consider barriers to attending and how best to engage with the homeless community. Feasibility of introducing equalities monitoring. Reassessment of physical accessibility and equitable access to the mobile units. Review of breast screening invitation and materials including leaflets. Review methods of contact for the service. Review opening times of service. Review of access to barriers for low income/poverty women. Project to increase understanding of those who do not access the service currently and to potentially increase the number of those making an informed choice to attend across Scotland.

Outputs: Improved engagement techniques with the protected characteristics groups will require further exploration and evaluation to ensure that all barriers to screening are addressed for all eligible women to make an informed choice about attending for breast screening. Mobile units will be accessible to women with mobility issues.

Equality Outcomes: The Scottish Breast Screening Programme will be delivered in a way that puts the needs of women at the heart of planning.

General Duty: Equality of opportunity and eliminate unlawful discrimination.

Progress:

The recommendations from the access audit of the mobile screening units were fed into the formal review of breast screening services in Scotland.

The engagement toolkit was produced too support NHS Boards with developments at local level.

NSS continues to work closely with the Scottish health council, NHS Boards, national planning forum.

Equality Outcome: Sex - The implementation of the Gender Based Violence PIN policy will increase understanding and improve the response and support to staff. To ensure a systems based approach to gender based violence. *This outcome will address same sex partnerships and black and ethnic minority protected characteristics and the age spectrum that GBV can impact on*

Situation: This Gender-Based Violence PIN policy is designed to contribute to such a safe working environment and provide a clear framework for a partnership approach. The policy has been developed to meet the requirements of the Chief Executive's Letter on Gender-Based Violence ([CEL\(2008\)41](#)). The CEL, issued to NHSScotland Boards in September 2008, outlines a 3-year programme of work to improve the identification and management of Gender-Based Violence across NHSScotland.

The impact of Gender-Based Violence on the health and well-being of NSS staff is a serious, recognisable and preventable problem like many other health and safety issues that affect NSS.

This policy has accordingly been created to promote the welfare of staff affected by current or previous experience of such abuse. It further aims to ensure that NSS responds effectively to staff members who may be perpetrators of such abuse. In partnership with local trade unions/professional organisations, this policy will be adopted and implemented as a minimum standard within NSS.

Activities: Develop a GBV Policy for NSS Implement the GBV Policy through the NSS Governance arrangements agreed in partnership. Deliver communication plan and cascade plan for the implementation of the GBV Policy across NSS.

Targeted training for line managers across NSS combined and blended learning approaches. Publish article in the NSS Staff magazine and Bloodletter (the Scottish National Blood Transfusion service staff newsletter)

Outputs: Reduced work absenteeism. Improved performance at work. Reduced staff turnover. Remove the stigma of gender based violence. To provide a confidential and supportive contacts in NSS. Improved use of the appropriate policy when supporting a member of staff in the workplace. Recognition that survivors of gender based violence may have attendance problems and performance issues at work due to the impact of their personal circumstances.

Progress:

The GBV policy was published and implemented.

The policy was distributed to all managers and communications were placed in all NSS staff magazines and updates.

Equality Outcome: Sex- The implementation of the Gender Based Violence PIN policy will increase understanding and improve the response and support to staff. To ensure a systems based approach to gender based violence

This outcome will address same sex partnerships and black and ethnic minority protected characteristics and the age spectrum that GBV can impact on

Equality Outcomes: Infrastructure is in place and a consistent approach across NSS. Enhance manager's skills in supporting patient and staff needs. Enhance staff and public knowledge of GBV. To create a safe environment that encourages people to reveal that they have been subjected to some form of domestic abuse, help them recognise that this is not acceptable and enable them to seek help and support.

General Duty: Eliminate unlawful discrimination and advance equality of opportunity.

Progress:

The training programme is under development to improve the access to the programme for all staff.

Equality Outcome: Age; Sexual Orientation; Religion/Belief/faith (identified from the investors in diversity survey) Improve the work experience of NSS Staff minimising the number of staff experiencing discrimination and to encourage staff to report incidences of discrimination and promote a culture where discrimination is not acceptable or tolerated

*** workforce equality outcomes will address a number of protected characteristics***

Situation: The NSS Staff survey highlights report and the NSS Investors in Diversity Survey highlights reports tells us that some staff have had some negative experiences on the grounds of age, sexual orientation and religion/faith /belief.

Activities: Further work may be necessary to encourage reporting of incidences of violence, emotional or verbal abuse, and bullying or harassment in order to improve the level of satisfaction with the outcome. Need to run promotional activity to highlight that this type of behaviour is unacceptable in NSS. Establish where it is perceived that discrimination is occurring and develop strategies for tackling this within NSS. Further analysis of the raw data from the investors in diversity survey. Planned equality and diversity workshops to be delivered across the NSS geographical sites to reach as many staff as possible.

Continued partnership working with 3rd sector and voluntary organisations representative of protected groups. Joint delivery of training and workshops with SHSC and stakeholders.

Outputs: Increased reporting through HR Services, occupational health service and line managers. Follow on report published from the findings of the investors in diversity survey. Reduction in incidents of negative or discriminatory experience. Increased understanding by the 3rd sector and voluntary organisations of NSS. Equality and Diversity monitoring will be mainstreamed into all NSS Surveys.

Equality Outcomes: Staff with protected characteristics will have improved experiences in the workplace. 3rd Sector and Voluntary Organisations (Equality) will have a better/improved understanding of NSS.

General Duty: Equality of opportunity. Foster good relations and eliminate unlawful discrimination.

Progress:

The employment equality and diversity network was established in late 2013 with a formal launch and represented all the protected characteristics. The network has met every 4 weeks during 2014 and has worked to increase the visibility of equality in the workplace.