



**What NHS Grampian has done in  
the period April 2019 to March  
2021 to make the Public Sector  
Equality Duty an integral part of  
the way it functions**

**This report is also available in large print and other  
formats and languages upon request. Please call NHS  
Grampian Corporate Communications on (01224)  
551116 or (01224) 552245.**

**12<sup>th</sup> April 2021**

# Contents

	<b>Page</b>
<b>1. What is the Public Sector Equality Duty?</b>	<b>3</b>
<b>2. Why produce this report?</b>	<b>3</b>
<b>3. Staff Training which addresses all 9 “protected characteristics”</b>	<b>4</b>
<b>4. Production of Statutory Reports</b>	<b>8</b>
<b>5. Race</b>	<b>10</b>
<b>6. Disability</b>	<b>17</b>
<b>7. Age</b>	<b>29</b>
<b>8. Sex (male or female)</b>	<b>32</b>
<b>9. Sexual orientation</b>	<b>39</b>
<b>10. Gender reassignment</b>	<b>42</b>
<b>11. Pregnancy and maternity</b>	<b>43</b>
<b>12. Marriage and civil partnership</b>	<b>49</b>
<b>13. Religion or belief</b>	<b>50</b>
<b>14. Comments and feedback</b>	<b>53</b>
<b>Appendix I</b>	<b>54</b>

# What NHS Grampian has done in the period April 2019 to March 2021 to make the Public Sector Equality Duty an integral part of the way it functions

## 1. What is the Public Sector Equality Duty?

The Public Sector Equality Duty is defined in the Equality Act 2010, Part 11, Chapter 1, Section 149 which states:

A public authority must, in the exercise of its functions, have due regard to the need to:

- Eliminate discrimination
- Advance equality of opportunity between persons who share a relevant protected characteristic and persons who do not share it
- Foster good relations between persons who share a relevant protected characteristic and persons who do not share it.

The 9 “protected characteristics” as defined by the Equality Act 2010 are:

- Race
- Disability
- Age
- Sex (male or female)
- Sexual orientation
- Gender reassignment
- Pregnancy and maternity
- Marriage and civil partnership
- Religion or belief

## 2. Why produce this report?

In Scotland the Equality Act 2010 (Specific Duties) (Scotland) Regulations 2012, as amended, applies to public bodies such as NHS Grampian. This requires us to produce and publish a report every two years detailing the work we have done to make the public sector equality duty an integral part

of the way we function as an organisation. This is “mainstreaming” the needs of our local equality and diversity communities and mainstreaming equality and diversity within NHS Grampian.

This is the NHS Grampian mainstreaming report for the period April 2019–March 2021.

As required by the Equality Act 2010 (Specific Duties) (Scotland) Regulations 2012, this Report has been put on the NHS Grampian website to make it easily accessible to local equality and diversity groups and the general public in Grampian. It has also been put on the intranet to make it widely available to staff.

Overarching work relevant to all 9 “protected characteristics” such as:

- Staff Training
- Production of Statutory Reports

are covered in Sections 3 and 4. The specific work we have done in the sphere of each of the 9 “protected characteristics” is covered in Sections 5-13.

**Due to the COVID-19 crisis, some aspects of our equality and diversity work since March 2020, has been curtailed. This was necessary to enable us to focus on fighting the COVID-19 pandemic. However, a great deal of progress has still been made.**

### **3. Staff Training which addresses all 9 “protected characteristics”**

The UK-wide NHS Knowledge and Skills Framework (KSF) has been implemented for all NHS Grampian staff, excluding the Executive Cohort and medical and dental staff, for whom separate arrangements apply. There is an ongoing cycle of review, planning, development and evaluation which links organisational and individual development needs; this is a commitment to the development of everyone who works in the NHS. KSF outlines are developed for all posts which detail the knowledge and skills required for the post covering six mandatory core dimensions of:

- Communication
- Personal and People Development

- Health, Safety and Security
- Service Improvement
- Quality
- Equality and Diversity

As can be seen, equality and diversity is one of the six mandatory core dimensions. In addition, there are specific dimensions which reflect the key activities of each post. Equality and diversity training is an essential element in the personal and career development of staff.

NHS Grampian has in place a comprehensive Equality and Diversity Training Programme for staff. This Programme is essential to ensure that staff are aware of their responsibilities in this field and to ensure compliance. All of the materials used in training is checked and updated on a monthly basis, if required.

In the last two Financial Years, a total of over 3,500 staff have completed this training. All attendances are recorded and feed into staff Personal Development Plans.

#### **a) Delivery method**

Until March 2020, all Equality and Diversity training was delivered “face to face”. Feedback and evaluation from participants showed that this was an effective and popular way to deliver training. However, due to COVID-19, since April 2020, all of this training is now delivered on-line by TEAMS. The content of the training has been amended and the presentation methodology adapted to maximise the benefits from this new method of delivery. Feedback from staff completing the TEAMS based training has been extremely positive.

This move to TEAMS has also widened access to the training for NHS Grampian staff and the staff of partner organisations such as NHS Orkney and NHS Shetland.

When COVID-19 has receded, NHS Grampian will continue to use TEAMS, but some Seminars such as Impact Assessment, will revert to “face to face” presentation, in a “blended learning” model.

As always, after training, we encourage staff to apply their knowledge. All participants are welcome to contact the speakers for help or advice at any time.

## **b) Booking and Recording of Training**

Staff book through the TURAS system. The names of all staff participating in each Seminar is recorded and feeds back into the TURAS Learn system and is included in Personal Development Plans.

## **c) Evaluation of Training and validity**

All participants are encouraged to provide feedback from Seminars. To date feedback from the TEAMS Seminars has been extremely positive. All of the training remains valid for 5 years.

The main Seminars provided are:

## **d) Equality and Diversity KSF Level Four Seminar**

This Seminar is designed for senior staff such as consultants, senior medical staff, GP's, managers senior charge nurses, charge nurses, and staff involved in the recruitment and interview processes. It includes detailed consideration of each of the 9 "protected characteristics". It also includes:

- The Human Rights Act 1998
- Unconscious bias
- A reflection on our own assumptions
- Potential issues in the interview/lecture situation
- The responsibility to act if we see discrimination or prejudice occurring

The aim is to empower senior staff to **develop a culture** in their areas that promotes equality and values diversity and challenges discrimination. The Seminar comprises 2x 90 minute sections. There is also time for discussion and questions.

This training also meets the Equality and Diversity Training Requirement of the various Royal Colleges and remains valid for 5 years.

## **e) Equality and Diversity KSF Level Two Seminar**

This training is provided for supervisory and basic grade staff. It comprises one 2 hour Seminar. The syllabus covers the 9 "protected characteristics" but not in as much depth as in Level Four. It is designed to ensure staff are able to **support** a discrimination free environment.

Feedback from staff surveys and individuals has shown that offering these two levels meets the equality and diversity requirement to both inform and empower NHS Grampian staff to challenge unacceptable behaviours. This is supported by feedback collected independently from participants by National Education Scotland from FY2 doctors joining NHS Grampian and from nurses by the NHS Grampian Nurse Induction Team.

It is also supported by a Lime Survey carried out in October 2020, when the Engagement and Participation Committee of NHS Grampian commissioned a survey which was sent out to a random sample of staff who had completed Equality and Diversity Training in the last 5 years. The aim was to gauge its effectiveness and its ability to motivate staff to challenge discrimination. The results were most positive. A copy of the full Survey is attached at Appendix I. Of particular relevance were the responses to Questions 6 and 7, which are shown below:

**Question Six: On a scale of 1 to 5, 1 being the least and 5 the most, how confident would you feel to challenge unacceptable behaviour by a colleague, patient or relative?**

<b>Level of confidence</b>	<b>No of staff</b>
Five	7
Four	24
Three	14
Two	2
One	0

**Question Seven: Have you actually used the knowledge gained in the Seminar to challenge the unacceptable behaviour of a colleague, patient or relative?**

<b>Answer</b>	<b>Number of staff</b>
<b>Yes</b>	15 staff
<b>No</b>	28 staff

It was particularly pleasing that from a sample size of 89 respondents, 15 staff (16.85%) had actually used their training to challenge unacceptable behaviour. Given that over 5,000 staff have been trained over the last 3 years, this is most encouraging.

#### **f) Level One Equality and Diversity Impact Assessor Training Seminar**

The aim of Impact Assessment is simply to avoid policies, strategies or re-organisational proposals being introduced, with the best of intentions, which discriminate against one or more of the groups with a “protected characteristic”.

This is a One Day Seminar and equips staff to use the Rapid Impact Assessment Checklist approach to Equality and Diversity Impact Assessment. Currently, NHS Grampian has 50 trained Level One Impact Assessors. This is sufficient to meet our needs. The Impact Assessors will continue to receive full ongoing support. More Seminars will be held in 2021 to help maintain the number of trained impact assessors at 50 or above.

#### **g) Level Two Equality and Diversity Impact Assessor Training**

This is a follow on course to the Level One Equality and Diversity Impact Assessor Training Seminar. It takes one day and trains staff to carry out the full EQIA Equality and Diversity Impact Assessment, Health Impact Assessment and Budgetary Impact Assessment. No requests were received for this training in the April 2019 to March 2021 period, but a training session will be held in September 2021.

### **4. Production of Statutory Reports**

In the period April 2019 to March 2021, NHS Grampian has met its legal duty to produce and publish three Statutory Reports. These were:

#### **a) NHS Grampian Equal Pay Monitoring Report, published April 2019**

This Report is published every two years and comprises detailed information to highlight any pay differentials between female and male staff. This information must be shown as any difference:

“... between the men’s average hourly pay (excluding overtime) and women’s average hourly pay (excluding overtime).”

It must also:

- Include details of any occupational segregation amongst our employees, being the concentration of men and women in particular grades and in particular occupations.



- The information published must be based on the most recent data available. Every second Report, i.e. 2017 and 2021, must also include information on any pay gap between staff of different ethnicities and staff who are disabled or not disabled.

NHS Grampian has complied fully with these requirements and published an Equal Pay Report in the prescribed format by the due date of April 2019. The Report is available on the NHS Grampian website at:

<https://www.nhsgrampian.org/globalassets/foidocument/foi-public-documents1---all-documents/nhs-grampian-equal-pay-monitoring-report-april-2019.pdf>

**b) NHS Grampian Equality and Diversity Workforce Monitoring Report**

This Report must be produced and published annually. During the two year period covered by this “Mainstreaming Report”, NHS Grampian has produced and published two Workforce Monitoring Reports covering the periods 2018/19 and 2019/20.

The Workforce Report must contain information for each of the 9 “protected characteristics details of:

- The number of staff and their relevant protected characteristics
- Information on the recruitment, development and retention of employees, in terms of their protected characteristics
- Details of the progress the public body has made to gather and use the above information to enable it to better perform the equality duty

NHS Grampian has complied fully with these requirements and published both Workforce Reports in the prescribed format. The 2018/19 Report is available on the NHS Grampian website at:

[This is the NHS Grampian Workforce Monitoring Report for 2018/19](#)

The 2019/20 Report is available on the NHS Grampian website at:

<https://www.nhsgrampian.org/globalassets/foidocument/foi-public-documents1---all-documents/NHSG-EandD-Workforce-Monitoring-Report-2019-20.pdf>

## 5. Race

The work carried out in the period April 2019 to March 2021 to mainstream race equality is detailed below:

**Initiative One: Meeting the communication and health care needs of our local ethnic communities and the promotion of good health. This will advance equality of opportunity, specifically equality of access to health care and health care information.**

The ability of all members of our local ethnic communities to communicate clearly and effectively their healthcare needs is essential if we are to achieve equality in healthcare. For most, the biggest barrier is language. The regular involvement and consultation events we hold with our local ethnic communities show that over 90% of recent migrant workers and their families are non-English speaking when they first arrive in Grampian. Hence the importance of interpretation services.

### **Progress made in 2019/21**

#### **a) Interpretation services**

**Definition: interpretation** is changing the **spoken** word from one language to another.

**There are two main types of interpretation provided:**

##### **(i) “Face to face” interpretation**

We have increased the number of trained “face to face” interpreters available to NHS Grampian from **140** to **154**. No further recruitment is required at present for the more common local ethnic community languages. However, this situation will be kept under review in case the number of interpreters drops and more need to be recruited to

fill any gaps. We will continue to seek to recruit and train interpreters for the less common local ethnic community language, should they become available.

The “face to face” interpreter usage figures for 2018/19 and 2019/20 are:

Year	Number of “face to face” interpretations
2019/20	<b>2,736</b>
2018/19	<b>3,280</b>

On average 97% of requests for “face to face” interpreters were met each year. 3% of request could not be met due to:

- There being no local interpreter for a less common language
- The sole interpreter for a less common language not being available

In these situations, the “Language Line” telephone interpretation service was used instead. 48% of all “face to face” interpreter requests were for the Polish language. The reduction in the volume of requests in 2019/20 reflects perhaps two main factors. Firstly, a reduced number of people coming to Grampian due to the downturn in the local oil industry leading to a reduction in the number of jobs available and the uncertainty over BREXIT. Secondly, when migrant workers and their families have been in Grampian for 4-5 years, their language skills have usually developed to the point where they no longer need interpretation when accessing healthcare,

Since March 2020, due to COVID-19, there has been a move away from “face to face” interpretation and a move towards telephone interpretation. However, “face to face” interpreters have still been used remotely for patients appointments using the Near Me/attend anywhere system.

## **(ii) Telephone interpretation**

The “Language Line” telephone interpretation service gives staff access to expert interpreters, on the telephone, in 60-90 seconds, for 170 different languages. Over the last two years, the number of “Language Line” Access Points using fixed landlines across NHS Grampian and the Health and Social Care Partnerships has remained stable at 1,055. This is the widest coverage in any Scottish Health Board area. Each Access Point is fully equipped with an Access Kit and has staff trained in its use. Staff also receive ongoing full technical support. The “Language Line” usage figures for 2020 and 2019 are:

January to December	Number of telephone calls
2020	<b>9,155</b>
2019	<b>7,037</b>
2018	<b>6,875</b>

Due to COVID-19, since March 2020, the way in which “Language Line” has been used, has changed significantly. Usually, the patient is with the clinician. However, with the use of the Near Me/Attend Anywhere Video Consultation System, we have trained clinicians to use “Language Line” to “Call Out” to the patient who is at home. “Language Line” then creates a 3 way conversation with the interpreter. This arrangement has worked well.

This has led to a corresponding drop in demand for “face to face” interpreters and an increase in the use of “Language Line”. The increase 2019 to 2020 is 2,118 (30%).

In 2020 there were request for 55 different languages, in 2019, this figure was 32.

## b) Translation services

**Definition: Translation** is changing the **written** word from one language to another.

During the last 2 years, all requests for translations have been met. Most requests were for the translation of personal healthcare information into English.

### **Offer at the front of documents**

All NHS Grampian leaflets, booklets and other published material already contains information at the front of who to contact if you wish to have the item provided in another language or format. This information is provided in minimum font size 14 or larger. All requests for NHS Grampian information in other formats such as large print, audio and Braille, etc. have been met promptly.

The numbers of translation requests received and met over the last 2 years are:

	Number of translations
2019/20	<b>1,028</b>
2018/19	<b>438</b>

Since March 2020, demand for the translation of local COVID-19 information has increased significantly.

### **c) The promotion of good health**

The work to encourage recent migrant workers and their families to register with their local GP's has been ongoing and will continue. Support has also been provided to recent campaigns on:

- Support for carers
- Know Who To Turn To
- TB awareness
- Drug awareness and needle exchange arrangements
- Sexual health

The active promotion of health within our local ethnic communities has been ongoing and will continue, in co-operation with the three local Health and Social Care Partnerships in Grampian.

### **d) Involving and consulting recent migrant workers and their families in the planning of healthcare services by means of multi-lingual involvement and consultation events.**

In September/October 2019, five multi-lingual involvement and consultation events were held with our local ethnic communities, on a joint basis with the Grampian Regional Equality Council (GREC). Two events were held in Fraserburgh and three in Aberdeen. A total of 129 members of our local ethnic communities attended. English was the second language of almost all of the participants. "Face to face" interpretation was provided for 14 different languages, namely: Polish, Russian, Lithuanian, Latvian, Arabic, Urdu, Bengali, Mandarin, Cantonese, Czech, Romanian, Portuguese, Hungarian, and Spanish.

These events have been held annually since 2008. The information collected from the events has been used to inform the racial equality work of NHS Grampian and Aberdeen City and Aberdeenshire Health and Social Care Partnerships.

The 2019 results indicated generally high levels of patient satisfaction with NHS services. However, the results highlighted a number of areas for improvement. Patient satisfaction levels with Hospital Services, Pharmacy Services, Ophthalmology Services and Contraception and Sexual Health Services are consistently high. In terms of GP Services, overall satisfaction levels were higher in Aberdeen than Fraserburgh. The information from these events is shared widely within NHS Grampian and the three HSCP's in Grampian.

In 2020, due to COVID-19, no face to face involvement events could be held. However, involvement and consultation continued on-line using social media. The face to face events will resume as soon as it is safe to do so.

**Initiative Two: Ensuring there is race equality within NHS Grampian. This will eliminate discrimination, harassment, victimization and any other conduct that is prohibited under this Act.**

<b>Supporting actions</b>	<b>Progress made April 2019 to March 2021</b>
<p><b>Complaints and investigations</b> Any issues or complaints raised by members of staff with a racial discriminatory element will be promptly and thoroughly investigated and appropriate follow up action taken if required. This will involve other bodies and agencies, where necessary.</p>	<p>All issues raised by staff have been thoroughly investigated and action taken, as appropriate.</p> <p>On 17<sup>th</sup> June 2020, Aberdeen University received an open letter Aberdeen Black Medical Society. The letter highlighted a number of issues going back 3 or more</p>

years where black medical students felt some aspects of their teaching was not culturally competent. They also felt mechanisms were not in place to support them should they wish to raise these issues or concerns.

Given that most NHS Grampian clinical staff are involved in undergraduate medical student teaching, a Joint University of Aberdeen Medical School and NHS Grampian Task Force was established, with black student representation. Following a number of meetings, an agreed programme of work was agreed.

This included:

- A review of all medical School teaching materials and teaching aids
- The creation of a Black Medical Student Network to provide support
- Having a designated consultant to support medical students on placement within NHS Grampian
- Having all NHS Grampian consultants involved in undergraduate teaching attend the appropriate Equality and Diversity KSF Level Four Training Seminar



	<ul style="list-style-type: none"> <li>• Creation of an NHS Grampian Staff Racial Equality Network</li> </ul> <p>This work is ongoing.</p>
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## 6. Disability

Work carried out in the period April 2019 to March 2021 to mainstream disability equality is detailed below:

<p><b>Initiative One: Meeting the communication and information needs of our local disability and carer communities and promoting good health. This outcome will advance equality of opportunity, specifically equality of access to health care and health care information.</b></p>	
<p><b>Supporting actions</b></p>	<p><b>Progress made April 2019 to March 2021</b></p>
<p>a) Provision of communication support to patients with a communication disability when healthcare is provided.</p>	<p><b>Offer at the front of documents</b>  All NHS Grampian leaflets, booklets and other published material contain at the front the offer to make the document available in any other language or format, upon request. Details of who to contact are also shown. All requests have been actioned promptly.</p>

## **Royal National Institute for the Blind (RNIB) “Good Practice” Guidelines**

Most people with a sight problem can read written material, without adaptation, if it is clearly written. All new information leaflets, booklets and NHS Grampian published material complies with the requirements of the Royal National Institute for the Blind (RNIB) “Good Practice Guidelines”, as contained in the RNIB publication: “See it right, making information accessible for people with sight problems”.

For example:

- All text to be in minimum font size 12, in a sans serif font such as Arial
- A need for a good colour contrast between the print and the background
- Text to be is justified left
- No text should be italics
- Underling should not be used
- Capital letters can be used at the start of words but not used for whole words
- Materials intended for the general public should have a Flesch ease of reading score of minimum 40, ideally 50 or above.

**Pictorial/Accessible Material**

The NHS Grampian Accessible/Pictorial Information Sub Group was created in 2007/08. The NHS Grampian Disability discrimination Act Review Group (DDARG) felt that a wider range of accessible/pictorial material was required, especially for people with a learning disabilities or aphasia. The Sub Group are responsible for the production of accessible/pictorial material. They also provide a Quality Control function. NHS Grampian has standardised on Boardmaker, supplemented by high quality photographs.

The Sub Group also provide advice and support to staff wishing to produce pictorial/accessible material. The work of the Sub Group will continue and be expanded over the next four years.

**Patients and relatives who use a Hearing Aid or are hard of hearing**

NHS Grampian has in place over 250 Portable Induction Loops (PILs). These have been issued to areas where there are known to be elderly patients and patients with hearing disabilities, as well as GP Practices, Hospital wards and Outpatient Departments. Full training and support has been provided for the staff in each area where a PIL has been issued.

A further 8 PIL's have been issued in the last 2 years, but PIL's are gradually being replaced by fixed installations when reception areas are upgraded,

NHS Grampian also holds in stock a range of Personal Listener equipment for patients.

### **Patients and relatives who are Deaf and use British Sign Language (BSL)**

#### **“Face to face” BSL interpretation**

In the last 2 years, NHS Grampian has met all requests for “face to face” BSL interpretation. There are 5 qualified BSL interpreters in Grampian. All 5 have a Service Level Agreement with NHS Grampian.

Since December 2020, NHS Grampian has also funded BSL interpreters to accompany and encourage members of our local Deaf communities to receive the flu vaccine and COVID-19 vaccine.

Demand for “face to face” BSL interpretation has increased 4% year on year for the last 10 years. This trend is likely to continue.

Another positive development has been one of our local BSL interpreters qualifying a Deaf Blind communicator. Previously, we had to rely on a Deaf Blind Communicator coming up from Lenzie near Glasgow.

**a) British Sign Language by Video Link**

The SignLive Video BSL service was introduced into NHS Grampian in the Acute Sector in 2018 to supplement our “face to face” BSL service. Staff have been trained in its use and it now been extended to Mental Health Services. The roll out will continue when COVID-19 has receded.

The NearMe/Attend Anywhere app has been loaded onto ipads so these can be easily taken to the bedside of patients.

It should be stressed that SignLive supplements the work of our 5 excellent local qualified BSL interpreters in Grampian, it in no way replaces them.

**NHS Grampian BSL Plan**

As shown above, NHS Grampian has continued to implement the NHS Grampian BSL Plan published in August 2018, as required by the BSL (Scotland) Act 2015.

### **Annual Sensory Impairment Awareness Weeks**

These involve a large number of local sensory impairment groups and organisations such as Guide Dogs for the Blind, North East Sensory Services, Aberdeen Action on Disability and Hearing Dogs for Deaf People. There are displays and Seminars in different areas of NHS Grampian. The event held in 2019 was well attended, but the 2020 events was cancelled due to COVID-19. This event will resume as soon as it is safe to do so.

### **Annual Deaf Awareness Week**

This involves a large number of local deaf awareness groups and involve displays and Seminars in different areas of NHS Grampian. The event held in 2019 was well attended, but the 2020 events was cancelled due to COVID-19. This event will resume as soon as it is safe to do so.

### **An introduction to BSL: Staff Awareness Training**

This Course is provided in house by NHS Grampian and is co-presented by two members of our local Deaf community. It is designed to give staff a basic knowledge of BSL. It involves 32 hours of classes held over 16 weeks during evenings. This class ran in 2019, but due to

	<p>COVID-19 was cancelled in 2020, but will resume as soon as it is safe to do so.</p> <p><b>Patient Rights (Scotland) Act 2011</b>  The above range of communication work also supports our compliance with the Patient Rights (Scotland) Act 2011, Section 3 (2) (d) which requires us to ensure that patients are supplied with information and support in a form appropriate to the patient’s needs.</p>
<p><b>b) The active promotion of health within our local disability communities</b></p>	<p>This work has continued, in co-operation with the three local HSCP’s in Grampian. NHS Grampian has supported and funded targeted health promotion campaigns such as:</p> <ul style="list-style-type: none"> <li>• “Know Who To Turn To”</li> <li>• The work of PAMIS to have an Adult Changing Places facility in every main NHS Grampian building.</li> </ul> <p><b>National and Local Mental Health initiatives</b>  The NHS Grampian Disability Discrimination Act Review Group have continued to support both local and national mental health initiatives. These include:</p> <ul style="list-style-type: none"> <li>• The “Butterfly Scheme” for people living with dementia.</li> </ul>

	<ul style="list-style-type: none"> <li>• The “See Me” campaign aimed at removing the stigma of mental ill health</li> <li>• The “Keys to life” initiative designed to improve the quality of life for people with learning disabilities and other complex needs.</li> </ul>
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<p><b>Initiative Two: Improving physical access NHS Grampian buildings and services and providing facilities to meet the needs of disabled people. This will advance equality of opportunity between persons who share a relevant protected characteristic and persons who do not share it.</b></p> <p>The ability of all disabled people to physically access buildings where healthcare services are provided is essential if we are to achieve disability equality in healthcare. For most, the biggest barriers are heavy doors, steps, narrow entrances, a lack of lifts in multi-storey buildings, a lack of handrails, a lack of signage, a lack of toilets suitable for use by disabled people, poor lighting and poor colour contrast on floors, walls and ceilings.</p>	
<p><b>Supporting Actions</b></p>	<p><b>Progress made April 2019 to March 2021</b></p>
<p><b>a) Major building upgrades</b> The NHS Grampian Estates Department to spend £250,000 per year building in enhanced facilities for disabled people when major upgrading schemes take place.</p>	<p>This work has continued and a total of £500,000 has been spent.</p>



**New Build**

Where older buildings are unsuitable for upgrading, many millions are spent on new buildings. These are all designed compliant with appropriate Building Standards in terms of disability access and facilities.

**Disability Access Audits**

The programme of Disability Access Audits will also continue to identify problem areas.

For example, Following extensive planning, work on-site commenced in January 2021 on the new:

- The Elective Care Centre
- The Baird Family Hospital
- The Anchor Cancer Hospital

Disability Access Audits have continued in areas where there are access issues. The five Disability Access Panels in Grampian are actively involved in this important work. This work has informed the schedule of work to improve access. As an example, an Audit was carried out on 22<sup>nd</sup> January 2020 to address access issues in the Multi-Storey Car Park on the Foresterhill Site.

As part of our Service Level Agreement with NHS Orkney, an Access Audit was carried out on the main entrance area of the Balfour Hospital Kirkwall on 17<sup>th</sup> February 2020.

### **Smaller Access and other Improvements**

The NHS Grampian Disability Discrimination Act Review Group receive an annual schemes allocation to carry out minor works. The Schemes carried out are those identified by the Disability Access Audits.

In 2019/20 this allocation was £100,000, in 2020/21, it was £20,000. This £120,000 of funding was used to:

- Install of two sets of bi-fold electrically operated doors at Fraserburgh Hospital
- Make 3 sets of doors electrically operated at Dr Gray's Hospital Outpatient Department, Elgin
- Make the main access/egress door at the Foresterhill Multi-Storey Car Park electrically operated
- Install new bi-fold doors at the South Tower Entrance to Aberdeen Royal Infirmary
- Fitting of a safety hand rail in Aberdeen Royal Infirmary Ward 310, to assist cancer patients negotiate a slight slope
- Making entrance doors to Clinic A Aberdeen Royal Infirmary electrically operated
- Making 2 sets of doors electrically operated in the Radiology department, Aberdeen Royal Infirmary
- Funding of Pictorial/accessible materials to assist patients with Learning Disabilities.

<p><b>b) Including disabled people on the steering group or project board, for every major NHS Grampian capital scheme</b></p> <p>Since 2007/08 the DDARG have secured the inclusion of disabled people on the steering group or project board, for every major NHS Grampian capital scheme. This step has been instrumental in ensuring the needs of disabled people are taken into consideration at an early stage in the planning process.</p>	<p>This involvement work has been ongoing and will continue.</p>
<p><b>c) Increasing the availability of adult changing facilities for visitors to NHS Grampian Hospitals</b></p> <p>In 2011, NHS Grampian had no “Changing Places” adult changing facilities. Seven adult changing facilities have now been provided at Aberdeen Royal Infirmary, Woodend Hospital, Dr Gray’s Hospital Elgin, Aberdeen Health Village, Royal Aberdeen Children’s Hospital, Foresterhill Health Centre and the Inverurie Hub. These “Changing Places” are large, have “H” pattern ceiling mounted hoists and have all of the facilities a carer needs to toilet and change a disabled adult.</p>	<p>Adult Changing Places facilities are already included in the plans for:</p> <ul style="list-style-type: none"> <li>• The Elective Care Centre</li> <li>• The Baird Family Hospital</li> <li>• The Anchor Cancer Hospital</li> </ul> <p>In addition, all new NHS Grampian buildings will include an adult changing facility.</p>

#### **d) Disability in the NHS Grampian workplace**

As people get older and the age to which people are required to work increases, there is a growing need to support people who become disabled during their working lives to retain them in the workplace.

Similarly, NHS Grampian has a duty to ensure that full and fair consideration given to people with a disability who wish to seek employment within NHS Grampian.

In terms of retaining existing staff who become disabled during their working lives, NHS Grampian provides a wide range of support. For example, we provide adaptations such as specialist hearing equipment and customised desks and chairs to help staff with physical issues.

NHS Grampian provides a wide range of specialist software to help staff with dyslexia, including the provision of laptops. If an employee is unable to continue in their current post due to disability, we look at what alternatives posts within NHS Grampian would be suitable.

NHS Grampian has continues to provide a wide range of support. For example, we provide adaptations such as specialist hearing equipment and customised desks and chairs to help staff with physical issues. We provide a wide range of specialist software to help staff with dyslexia, including the provision of laptops. If an employee is unable to continue in their current post due to disability, we look at what alternatives posts within NHS Grampian would be suitable.

The NHS Grampian Occupational Health Service continues to provide assessment, support and advice to staff who have disability issues. If an employee is unable to continue in their current post due to disability, we look at what alternatives posts within NHS Grampian would be suitable.

NHS Grampian has continues to support employees with a disability by providing:

- Laptops
- A range of specialist software to meet specific needs
- Specialist seating and other equipment such as variable height desks

<p>NHS Grampian has been given the right to display the “Disability Confident” symbol on our literature. This is in recognition of our commitment to employing disabled people and our assurance to interview all disabled applicants who meet the minimum criteria for a job vacancy and consider them on their abilities.</p>	<ul style="list-style-type: none"> <li>• Specialist communication equipment</li> </ul> <p>NHS Grampian has retained the right to display the “Disability Confident” symbol on our recruitment literature.</p>
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## 7. Age

Most of our age equality work is fully integrated into the disability and carer work s as shown at 6 above. However, there are two additional specific age equality initiatives which are detailed below:

<p><b>Initiative One: NHS Grampian will continue to examine every area of its healthcare provision where there is an age restriction to ensure that the restriction is legally compliant. This outcome will advance equality of opportunity between persons who share a relevant protected characteristic and persons who do not share it.</b></p>	
<p><b>Supporting Actions</b></p>	<p><b>Progress made April 2019 to March 2021</b></p>
<p>Supporting actions</p>	

**(i) Age restrictions in healthcare**

NHS Grampian will examine every area of its healthcare provision where there is an age restriction to gauge whether that restriction is legally compliant.

**(ii) Promote Independent Living for Older People**

Since 2012, the Scottish Government have promoted Intermediate Care Services to patients, usually older people, after leaving hospital or when they are at risk of being admitted to hospital. The services offers a link between places such as hospitals and people's homes, and between different areas of the health and social care systems. The three main aims of intermediate care are:

- To avoid unnecessary admissions to hospitals
- To help people be as independent as possible after a stay in hospital
- Prevent people having to move into a care home until absolutely necessary

A review was completed in 2019. NHS Grampian is currently fully legally compliant. This exercise will be repeated at two yearly intervals.

**Creation of a £45million Elective Care Centre on the Foresterhill Site**

The next stage in the development of Intermediate Care Services in Grampian is the construction of a £45 million Elective Care Centre on the Foresterhill Site. Planning work has now been completed and construction work will start in Summer 2021. This will bring together a number of outpatient services into one multi-disciplinary area. It will help to avoid multiple visits to hospitals by enabling several tests and procedures to be carried out in one visit. This will avoid unnecessary hospital visits and reduce the need for hospital admissions.

The final stage will involve the creation of Community Diagnostic Treatment Hubs in the community so more multi-disciplinary treatments can be delivered closer to the patient's home. This second stage will be done in co-operation with the three HSCP's in Grampian.

<p>NHS Grampian will continue its active involvement in this national initiative.</p>	
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<p><b>Initiative Two: NHS Grampian will monitor age equality compliance within our own workforce to ensure that there is no age discrimination in the way employees are treated. This outcome will eliminate discrimination, harassment, victimisation and any other conduct that is prohibited under this Act. It will also advance equality of opportunity between persons who share a relevant protected characteristic and persons who do not share it.</b></p>	
<p><b>Supporting Actions</b></p>	<p><b>Progress made April 2019 to March 2021</b></p>
<p><b>(i) Equality and Diversity Workforce Monitoring Report</b>  NHS Grampian produces and publishes an Annual Equality and Diversity Workforce Monitoring Report. The Report includes:</p> <ul style="list-style-type: none"> <li>• An age profile of the NHS Grampian workforce</li> <li>• Information on the age of staff who have been promoted</li> </ul>	<p>An NHS Grampian Equality and Diversity Workforce Monitoring Report was produced for the 2019/20 Financial Year. The Reports content indicated that there was no age discrimination in NHS Grampian. The Reports was posted on the intranet for staff and the internet to make the Report available for public scrutiny. It can be found at:  <a href="https://www.nhsgrampian.org/globalassets/foidocument/foi-public-documents1---all-documents/NHSG-EandD-Workforce-Monitoring-Report-2019-20.pdf">https://www.nhsgrampian.org/globalassets/foidocument/foi-public-documents1---all-documents/NHSG-EandD-Workforce-Monitoring-Report-2019-20.pdf</a></p>

Any age related complaints or concerns made by staff will be promptly investigated and any required follow up action taken.	No age related complaints have been received from staff in the last 2 years.
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## 8. Sex (male or female)

Work carried out in the period April 2019 to March 2021 to mainstream sex equality is detailed below.

<p><b>Initiative One: Identify and provide continued targeted healthcare support to patients who are victims of gender based violence such as rape, sexual abuse, or who have been trafficked. This will help to eliminate discrimination, harassment, victimisation and any other conduct that is prohibited under the Equality Act 2010.</b></p>	
<p><b>Supporting Actions</b></p>	<p><b>Progress made April 2019 to March 2021</b></p>
<p><b>(i) Gender based violence</b>  Since 2007, NHS Grampian has developed and implemented policies and guidance to support staff to address this issue.</p> <p>The work undertaken includes:</p> <ul style="list-style-type: none"> <li>• The introduction of the routine inquiry of gender based violence in priority areas such as Maternity</li> </ul>	<p>This work has been ongoing and will continue.</p> <p>This work has been ongoing and will continue.</p>



<p>Services, Mental Health (Substance Misuse) Services, Sexual Health, A&amp;E and Community Nursing.</p> <ul style="list-style-type: none"> <li>• Providing awareness training for front line NHS Grampian managers and staff.</li> <li>• Involvement, through consultation, of victims of gender based violence, in the planning and development of the routine inquiry of abuse.</li> <li>• Producing information on the sources of help and support and making these readily available, for example having available a set of accessible e-cards giving guidance on where to seek help.</li> <li>• Expansion of the “Language Line” telephone interpretation service from 750 Access Points to over 900 Access Points, together with an expansion of “face to face” interpreters, so that language is not a barrier to getting help.</li> </ul>	<p>All NHS Grampian Equality and Diversity Seminars cover the subject of gender based violence. This includes a section on Human Trafficking, based on the Police Scotland leaflet: “Human Trafficking, Reading the Signs”. The content is also supplemented by anonymised examples of local trafficking.</p> <p>This work has been ongoing and will continue.</p> <p>This work has been ongoing and will continue.</p> <p>The 900 “Language Line” Access Points has been increased to 1,055 Access Points</p> <p>There are now also 154 “face to face interpreters.</p>
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<ul style="list-style-type: none"> <li>• Individuals can also request a male or female interpreter if this is important to them.</li> <li>• Providing support to people with a communication disability so they can communicate should they be victims of gender based violence.</li> <li>• Providing guidance to NHS Grampian staff to enable them to support NHS colleagues who may be experiencing gender based violence themselves.</li> </ul>	<p>This support is in place and will continue.</p> <p>This work has been ongoing and will continue.</p> <p>This work has been ongoing and will continue.</p>
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<p><b>Initiative Two: Improving the uptake of health care by men. This will reduce the current differential uptake in healthcare between men and women and advance equality of opportunity.</b></p> <p>GPs in Grampian offer a range of health checks specifically for men. However, men still visit their GP on average 33% less than females. In addition, on average, 65% of men are overweight or obese, compared to 60% of women.</p>	
<p><b>Supporting Actions</b></p>	<p><b>Progress made April 2019 to March 2021</b></p>

<p>NHS Grampian, working with the three Health and Social Care partnerships and three Local Authorities in Grampian will:</p> <ul style="list-style-type: none"> <li>• Mount men’s health awareness campaigns</li> <li>• Promoted the Healthy Workplace Initiative</li> <li>• Promoted health care services through the “Know Who To Turn To” campaign</li> <li>• Supported National Health promotion initiatives</li> </ul> <p>NHS Grampian and its partner agencies have looked at ways to take full advantage of the national NHS campaigns on men’s health to maximise local benefits from these campaigns, such as the campaigns on:</p> <ul style="list-style-type: none"> <li>• Prostate cancer</li> <li>• Alcohol</li> <li>• Mental health</li> <li>• Suicide prevention</li> </ul> <p>The reasons for the differential uptake of health care by men are many and varied.</p>	<p>This work has been ongoing. However, information on its impact on male life expectancy/morbidity will not be known for another 2-3 years until the Scottish Records Office publishes updated information. However, similar work in the 2017-March 2019 period, did show an increase in male life expectancy in Grampian.</p> <p>It should be noted that in Grampian, male life expectancy can vary by up to 14 years depending on the socio-economic category of men and their geographical location.</p> <p>This work has been ongoing and will continue.</p>
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**Initiative Three: Ensure there is gender equality within NHS Grampian to eliminate any potential discrimination and advance equality of opportunity.**

**Supporting Actions**

**Progress made April 2019 to March 2021**

**(i) Gender equality monitoring within NHS Grampian**

NHS Grampian produces an Annual Equality and Diversity Workforce Monitoring Report covering all of the 9 “protected characteristics”, as defined by the Equality Act 2010. The Workforce Report contains information on:

- The sex, female/male make up of the NHS Grampian workforce
- Information on the sex of new starts and leavers
- The sex of staff promoted
- The sex of staff applying for training and receiving training
- The sex, female/male, make up of NHS Grampian Senior Managers

NHS Grampian produced an Annual Equality and Diversity Workforce Monitoring Report for 2019/20 which covering all 9 “protected characteristics”. It can be found at:

<https://www.nhsgrampian.org/globalassets/foidocument/foi-public-documents1---all-documents/NHSG-EandD-Workforce-Monitoring-Report-2019-20.pdf>

All of the required information relating to sex, as detailed in the supporting actions, was included. The Report was widely circulated and posted on the intranet for staff and the internet to allow public scrutiny.

The Report showed that NHS Grampian is a fair and equitable employer.

<ul style="list-style-type: none"> <li>The sex, female/male, make up of NHS Grampian Health Board.</li> </ul>	
<p><b>(ii) Equal Pay Monitoring Report: Compliance with the Equality Act 2010 (Specific Duties) (Scotland) Regulations 2012</b></p> <p>These regulations came into force on 27<sup>th</sup> May 2012 and introduced a number of measures to monitor public bodies to ensure that there is no gender inequality in their pay rates. Measures include:</p> <ul style="list-style-type: none"> <li>A requirement to publish every two years from 30<sup>th</sup> April 2013 onwards, information on any Gender Pay Gap. This information should be shown as any difference: "... between the men's average hourly pay (excluding overtime) and women's average hourly pay (excluding overtime)."</li> </ul>	<p>NHS Grampian met its legal duty to publish an Equal Pay Monitoring Report in April 2019. It contained all of the require elements and can be viewed on the NHS Grampian website at this link:  <a href="https://www.nhsgrampian.org/globalassets/foidocument/foi-public-documents1---all-documents/nhs-grampian-equal-pay-monitoring-report-april-2019.pdf">https://www.nhsgrampian.org/globalassets/foidocument/foi-public-documents1---all-documents/nhs-grampian-equal-pay-monitoring-report-april-2019.pdf</a></p> <p>The Report did contain one pay anomaly. It was noted that female doctors on average received a lower hourly rate than male doctors. This anomaly was investigated. The difference related to female doctors taking career breaks. When they returned to work, they returned to the same pay spine point they were on when they left. Male doctors meantime took less career breaks, continued to work and get incremental progression, hence the difference.</p> <p>Female doctors on maternity leave do continue to receive incremental progression.</p> <p>The Report were widely circulated and posted on the intranet for staff and the internet to allow public scrutiny.</p>

<p>The information published must be based on the most recent data available. NHS Grampian complies fully with these requirements</p>	<p>The Report showed that there was no pay sex discrimination in NHS Grampian.</p> <p>The information published was based on the most recent data available.</p>
<p><b>(ii) Investigation of staff complaints and alleged incidents</b>  Any staff complaints and alleged incidents with a sex equality element, is promptly investigated and appropriate follow up action taken, involving other agencies, as appropriate.</p>	<p>No sex equality complaints have been received from staff in the last 2 years.</p>

## 9. Sexual orientation

Work carried out in the period April 2019 to March 2021 to mainstream sexual orientation equality is detailed below:

**a) Initiative One: Meeting the specific healthcare needs of our local LGB and T communities. This will advance equality of opportunity between persons who share a relevant protected characteristic and persons who do not share it.**

<b>Supporting Actions</b>	<b>Progress made April 2019 to March 2021</b>
<p>Continue the safe sex awareness campaign for men who have sex with men.</p> <p>Continue the Blood Borne Virus (BBV) testing campaign and carry out further outreach initiatives.</p> <p>Increase the availability of healthcare information of particular interest to our LGB and T communities. Work will also continue to identify and meet any new information needs.</p>	<p>This work has continued and is ongoing.</p> <p>This work has continued and is ongoing.</p> <p>The range of healthcare information of particular interest to our LGB and T communities has been expanded. Work is ongoing to identify and meet any new information needs.</p>
<p>Continue to promote engagement opportunities with NHS Grampian to help shape the future pattern of healthcare and public health programmes such as vaccination and to take an active role in improving their health outcomes.</p>	<p>April 2019 to March 2020 this work was ongoing. From March 2020 face to face engagement ceased due to COVID-19. Engagement continued online. Vaccination has focussed on the flu vaccine and COVID-19 vaccine.</p>

**b) Initiative Two: Continue and further develop the “Rainbow LGB and T Awareness Campaign” within NHS Grampian. This will advance equality of opportunity between persons who share a relevant protected characteristic and persons who do not share it.**

<b>Supporting Actions</b>	<b>Progress made April 2019 to March 2021</b>
<p>Continue to make NHS Grampian Rainbow Lanyards, Rainbow Badges and Pulley Type Lanyards widely available to staff to make explicit to patients and staff that NHS Grampian is LGB and T friendly.</p>	<p>2,500 Rainbow Lanyards and 2,500 Rainbow Badges have been requested by staff and provided, together with information about what they represent. Over 500 Pulley Type Lanyards have also been requested and issued.</p> <p>Feedback from staff and patients has been extremely positive with examples of how LGB and T patients have felt reassured by the sight of staff wearing these visible symbols.</p> <p>An order for a further 2,000 Rainbow Lanyards and 2,000 Rainbow Badges was delivered in March 2021.</p>
<p>Introduce rainbow benches into hospital grounds and display LGB and T banners outside and inside hospital premises.</p> <p>Participate in the Annual Grampian Pride Event.</p>	<p>Three Rainbow Benches are in place at Foresterhill. More will follow post COVID-19. The banners have been purchased and will be put in place post COVID-19.</p>



	<p>Approximately 40 NHS Grampian staff participated in the 2019 Grampian Pride Event. Our participation was live streamed and received over 350,000 views.</p> <p>At the parade, NHS Grampian staff handed out NHS Grampian logo Rainbow flags to children and adults who were watching.</p> <p>The 2020 Event was cancelled due to COVID-19, but NHS Grampian will participate when Grampian Pride resumes.</p>
<p>Look for more ways to raise LGB and T awareness within NHS Grampian.</p>	<p>A range of NHS Grampian LGB and T tee shirts are planned for future Grampian Pride and other similar events.</p>
<p>Continue to make LGB and T awareness an integral part of every Equality and Diversity Training Seminar.</p>	<p>LGB and T awareness is an integral part of every Equality and Diversity Seminar. Over 3,500 staff have received this training in the last 2 years.</p>

## 10. Gender reassignment

Work carried out in the period April 2019 to March 2021 to mainstream gender reassignment equality is detailed below:

<p><b>Initiative One: Meet the specific healthcare needs of our trans and transgender communities to advance equality of opportunity between persons who share a relevant protected characteristic and persons who do not share it.</b></p>	
<p><b>Supporting Actions</b></p>	<p><b>Progress made April 2019 to March 2021</b></p>
<p>NHS Grampian provides the full range of 22 elements, recommended by the Department of Health as comprising a gender dysphoria service. However, there are areas where local initiatives are required over the next four years to further develop services.</p>	<p><b>(i) NHS Grampian Gender identity Clinic</b>  NHS Grampian has increased the number of consultants providing the gender dysphoria service from one consultant to two. This has helped to reduce waiting times.</p> <p><b>(ii) Counselling service</b>  In 2020, NHS Grampian appointed an experienced counsellor to the Gender Identity Clinic. Our local trans and transgender communities had identified a need for the expansion of specialist gender dysphoria counselling services since 2017.</p> <p><b>(iii) Waiting times</b>  In the 2020/21 period, waiting times have been reduced.</p>

	<p><b>(iv) Location of Gender Identity Clinic</b> Options to move the Gender Identity Clinic off the Royal Cornhill Site have been looked at. Some members of our local trans community feel that a more central location in Aberdeen would make it more accessible.</p> <p><b>(v) Equality and Diversity Training</b> All Equality and Diversity Training covers the topic of trans and transgender in detail.</p>
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## 11. Pregnancy and maternity outcomes

Work carried out in the period April 2019 to March 2021 to mainstream pregnancy and maternity equality is detailed below:

<b>Initiative One: Meeting the specific health care needs of pregnant and nursing Mothers, to advance their equality of opportunity</b>	
<b>Supporting Actions</b>	<b>Progress made April 2019 to March 2021</b>
<p><b>(i) Equality Act 2010</b> Compliance with the requirement in terms of pregnancy and maternity.</p>	NHS Grampian is fully compliant.

<p><b>(ii) Staff training</b></p>	<p>In the last 2 years, over 3,500 staff have received Equality and Diversity Training. Meeting the needs of pregnant and nursing Mothers is an integral part of this training.</p>
<p><b>(iii) Facilities for nursing Mothers</b> NHS Grampian will include facilities for nursing Mothers in all of our new building schemes.</p>	<p>All new buildings opened or planned in the April 2019 to March 2021 period have included facilities for nursing Mothers.</p>
<p><b>(iv) Progress a new pregnancy and maternity hospital</b></p>	<p>Work has continued to design and plan a new pregnancy and maternity hospital. Construction work began in 2020/21. The new hospital is scheduled to open in 2023. It will cost £233 million and be called the Baird Family Hospital and be located on the Foresterhill Site.</p> <p>It will have be state of the art in-patient facilities for pregnancy and maternity care and will replace the existing Aberdeen Maternity Hospital and several other facilities. The Baird Family Hospital will comprise:</p> <ul style="list-style-type: none"> <li>• Maternity Services including a Community Maternity Unit</li> </ul>

	<ul style="list-style-type: none"> <li>• Gynaecology Services</li> <li>• Breast Services</li> <li>• Neonatology Services</li> <li>• Aberdeen Centre for Reproductive Medicine</li> <li>• Radiology Services</li> <li>• Operating Theatres</li> <li>• Research and Teaching Facilities</li> <li>• Non-Clinical Support Services</li> </ul>						
<p><b>(v) Pregnancy in young people</b> Pregnancy rates for young people in Scotland are falling year on year.</p> <p>In 2017, NHS Grampian recorded the lowest overall rate of teenage pregnancy in Scotland at 23.8 per 1,000 women.</p>	<p>NHS Grampian, the three Health and Social Care Partnerships in Grampian and Local Education Departments have continued to make progress to reduce the pregnancy rates for young people aged 15-19 in Grampian. The most recent figures available are for 2018 are:</p> <table border="1" data-bbox="1122 997 2013 1259"> <thead> <tr> <th></th> <th><b>Grampian</b></th> <th><b>Scotland Average</b></th> </tr> </thead> <tbody> <tr> <td>Average pregnancy rates in under 20's in 2018</td> <td>26.7 per 1,000 population aged 15-19</td> <td>29.6 per 1,000 population aged 15-19</td> </tr> </tbody> </table>		<b>Grampian</b>	<b>Scotland Average</b>	Average pregnancy rates in under 20's in 2018	26.7 per 1,000 population aged 15-19	29.6 per 1,000 population aged 15-19
	<b>Grampian</b>	<b>Scotland Average</b>					
Average pregnancy rates in under 20's in 2018	26.7 per 1,000 population aged 15-19	29.6 per 1,000 population aged 15-19					

However, this is not a uniform pattern across Grampian. In areas of multiple deprivation pregnancy rates in young people 15-19 are higher than the national average. For example In Grampian:

Rate in most deprived areas	72.1 per 1,000 women
Rate in least deprived areas	15.6 per 1,000 women
Average rate in Grampian	26.7 per 1,000 women

More work is required in areas of deprivation.

(Statistics taken from a National Statistics publication for Scotland , published 25<sup>th</sup> August 2020)

**Initiative Two: Meeting the needs of pregnant and nursing Mothers who are NHS Grampian staff, to advance their equality of opportunity**

**Supporting Actions**

**Progress made April 2019 to March 2021**

**(i) Within NHS Grampian**

NHS Grampian has in place a Maternity Leave Co-ordinator whose role is to ensure that pregnant members of staff are kept fully informed of their maternity leave and pay entitlements. They also provide help and advice. NHS Grampian will ensure that all pregnant staff receive their due entitlement.

The Maternity Leave Co-ordinator does an excellent job and has ensured that pregnant members of staff are kept fully informed of their maternity leave and pay entitlements. They also provide help and advice on returning to work.

NHS Grampian is anxious to retain staff in the workforce and can offer Mothers who do not wish to return full-time flexible hours, part-time work and nursery places

This approach has been successful. The figures are:

<b>Year</b>	<b>Number</b>	<b>% of Staff Returning to work</b>
2019/20	435	99.77%
2018/19	470	99.37%
2017/18	471	98.5%
2016/17	432	98.6%

**(iv) The Annual NHS Grampian Equality and Diversity Workforce Monitoring Report**

This Report includes detailed information on the numbers of staff applying for maternity leave each year and the numbers who return to work.

NHS Grampian produced Annual Equality and Diversity Workforce Monitoring Reports for 2018/19 and 2019/20 covering all 9 “protected characteristics”. The Reports contains detailed information on:

- The numbers of staff applying for maternity leave
- The numbers of staff choosing the “Return to work option”
- The numbers of staff choosing the “Undecided” option
- The numbers of staff who actually return to work

The Reports are widely circulated and posted on the intranet for staff and the internet to allow public scrutiny.

The Reports show that NHS Grampian is a fair and equitable employer. The 2018/19 Report can be found at:

<https://www.nhsgrampian.org/globalassets/foidocument/foi-public-documents1---all-documents/nhsgrampianeanddworkforcemonitoringreport2018-19.pdf>

The 2019/20 Report can be found at:

<https://www.nhsgrampian.org/globalassets/foidocument/foi-public-documents1---all-documents/NHSG-EandD-Workforce-Monitoring-Report-2019-20.pdf>



## 12. Marriage and civil partnership

Work carried out in the period April 2019 to March 2021 to mainstream pregnancy and maternity equality is detailed below:

<b>Initiative: Staff to be aware of the possible existence of same sex marriages and civil partnerships in the health care setting and take the necessary steps to safeguard the rights of civil partners and same sex marriage partners, to advance equality of opportunity.</b>	
<b>Supporting Actions</b>	<b>Progress made April 2019 to March 2021</b>
All NHS Grampian Equality and Diversity staff training includes information on the need for staff to be aware of the possible existence of an undisclosed same sex marriage, civil partnership or common law partnership. Advice is also included on the special considerations which might be required in the healthcare setting. Work to highlight the need to give special consideration to this possibility will continue.	This training has continued. In the last 2 years, over 3,500 staff have received Equality and Diversity Training. Meeting the needs of marriage partners, civil partners and common law partners is an integral part of this training.

### 13. Religion or belief

Work carried out in the period April 2019 to March 2021 to mainstream religion or belief equality is detailed below:

<p><b>Initiative One: Staff to have enhanced awareness of the specific religious and spiritual needs of patients in a health care setting, to advance equality of opportunity between persons who share a relevant protected characteristic and persons who do not share it</b></p>	
<p><b>Supporting Actions</b></p>	<p><b>Progress made April 2019 to March 2021</b></p>
<p>Staff to have enhanced awareness of the specific religious and spiritual needs of patients in a health care setting.</p>	<p>This awareness training is an integral part of all NHS Grampian Equality and Diversity Training Seminars. In the last 2 years over 3,500 staff have received this training. In addition, all participants are made aware of the NHS Grampian booklet:</p> <p>“Religions and Cultures in Grampian: A Practical Guide for health and social care staff to the diversity of beliefs, customs and cultures of the people of Grampian”.</p> <p>They are also advised where they can access the booklet either online or in hard copy format.</p> <p>The new updated Fourth Edition was published in June 2019.</p>

	<p>In addition, the Chaplaincy Team take all opportunities to make NHS Grampian staff aware of the impact of Religion or Belief upon patients and relatives during time of illness. To this end training is offered in various ways, for example staff inductions and targeted training for particular groups.</p>
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<p><b>Initiative Two: In-patients to have appropriate access to chaplaincy services and faith/belief specific support to advance equality of opportunity between persons who share a relevant protected characteristic and persons who do not share it.</b></p>	
<p><b>Supporting Actions</b></p>	<p><b>Progress made April 2019 to March 2021</b></p>
<p><b>Access to chaplaincy service for in-patients</b>          Ensure that appropriate questions with regard to religion and belief are asked of patients on admission and all such information is transmitted to the relevant parties, e.g. Chaplaincy Department , Faith group leaders etc. The Chaplaincy department will respond to all requests for their support in a timely manner. The Chaplaincy department will pass on any requests for their support from specific</p>	<p>This work was ongoing from April 2019 until March 2020.</p> <p>During the current COVID-19 crisis, the Chaplaincy Team have managed to continue to provide spiritual care to patients and staff despite the curtailment of one to one personal contact. To mitigate the effects of this restriction, the Chaplaincy Team have embraced new ways of working. These have included:</p>

faith/belief groups for individual patients, relatives or staff as quickly as possible.

- Telephone support
- On-line support
- Virtual Memorial Services streamed live
- Increased chaplaincy visits to patients in lieu of their faith group leaders where this has been possible and advocated for end of life religious practices when it has been safe to do so.

This approach will continue for the foreseeable future.

## **14. Comments and feedback**

Any comments on this document will be warmly welcomed. Comments in any language or format can be made:

By email to: [gram.equalityfeedback@nhs.scot](mailto:gram.equalityfeedback@nhs.scot)

By post to:

Equality and Diversity Department,  
Ground Floor Room 4,  
Foresterhill House,  
Foresterhill Site,  
Aberdeen  
AB25 2ZB

By voicemail to: 01224 552245

# Survey of NHS Grampian Staff who have completed Equality and Diversity Training in the last 5 Years, Compiled by Nigel Firth, Equality and Diversity Manager

## 1. Introduction

Feedback given by staff immediately after completing Equality and Diversity Training has been extremely positive for many years. This includes feedback gathered and collated by independent organisations such as National Education Scotland and Robert Gordon University, for whom the NHS Grampian Equality and Diversity Manager also provides seminars.

Following discussion at a recent Engagement and Participation (EPC) Committee Meeting, a number of questions about the longer term impact of the Equality and Diversity Training Seminars were posed. These questions included:

- Staff who have been trained are required to renew their training every 5 years, but how much information do staff retain in the 1-5 year period?
- Do staff who have been trained feel confident to intervene should they see an incident of discrimination?
- How many staff had actually intervened when an incident of discrimination occurred?
- What resources provided at the Seminars, had proved to be most useful?

To gather factual information to assist in answering these questions, a survey using the Lime Survey software was prepared and sent out to 170 staff who had completed equality and diversity training during the last five years.

## 2. Methodology

NHS Grampian holds a licence for the Lime Survey software. A short easy to complete survey was developed and sent out to 170 randomly selected staff. Although random, care was taken to ensure this included:

- Staff who had completed equality and diversity training in different years
- A mix of attendees at both Level Four and Level Two Training. Level Four Seminars are for senior staff such as consultants, senior clinicians and managers. Level Two is for basic grade and supervisory staff
- A mix of hospital based staff and community based staff
- Staff in different geographical areas of NHS Grampian
- Staff who were still employed by NHS Grampian

A copy of the text of the covering email is attached at Appendix I. A copy of the survey is attached at Appendix II.

## 3. Results

Of the 170 staff invited to complete the survey, 89 responded, a response rate of 52.4%. A response rate of 50% or above is generally considered excellent for surveys. Of the 89, only 47 completed all of the questions. Completion of the survey was entirely voluntary.

The results are shown below, question by question.

**Question One: Which level of Equality and Diversity Seminar have you attended?**

<b>Training Level</b>	<b>Number</b>
<b>Level Two</b>	29
<b>Level Four</b>	23

**Question Two: How long ago did you attend the Seminar?**

<b>Timescale</b>	<b>No of staff</b>
<b>1-2 years</b>	32
<b>3-4 years</b>	14
<b>5 years or longer</b>	2

**Question Three: Which staff group best describes your role?**

<b>Role</b>	<b>No of staff</b>
<b>Allied Health Professional</b>	7
<b>Domestic and support Service</b>	1
<b>Management and Office Services</b>	15
<b>Medical and Dental</b>	15
<b>Nursing and Midwifery</b>	7

**Question Four: How many of the 9 'protected characteristics' can you remember? Please list below:**

<b>Staff who remembered:</b>	<b>Number</b>
<b>Nine protected characteristics</b>	4
<b>Eight protected characteristics</b>	5
<b>Seven protected characteristics</b>	8
<b>Six protected characteristics</b>	14
<b>Five protected characteristics</b>	6
<b>Four protected characteristics</b>	2



<b>Three protected characteristics</b>	1
<b>Two protected characteristics</b>	1
<b>One protected characteristics</b>	0
<b>No protected characteristics</b>	4

From the responses, the most commonly remembered protected characteristics were:

<b>Protected characteristic</b>	<b>Remembered by</b>
<b>Race</b>	37 staff
<b>Disability</b>	37 staff
<b>Religion/Belief</b>	37 staff
<b>Age</b>	31 staff
<b>Sexual orientation</b>	30 staff

**Question Five: Do you remember any of the practical examples, quiz questions or anecdotes used in the Seminar? Please list below:**

<b>Staff</b>	<b>No of staff</b>
<b>Staff who remembered no quiz questions or anecdotes</b>	21
<b>Staff who remembered one or more quiz questions</b>	16
<b>Staff who remembered one or more anecdotes</b>	6

**Question Six: On a scale of 1 to 5, 1 being the least and 5 the most, how confident would you feel to challenge unacceptable behaviour by a colleague, patient or relative?**

<b>Level of confidence</b>	<b>No of staff</b>
Five	7
Four	24
Three	14
Two	2
One	0

**Question Seven: Have you actually used the knowledge gained in the Seminar to challenge the unacceptable behaviour of a colleague, patient or relative?**

<b>Answer</b>	<b>Number of staff</b>
<b>Yes</b>	15 staff
<b>No</b>	28 staff

**Question Eight: Please select any of the resources provided at the Seminar that you have found useful.**

<b>Resource</b>	<b>No of staff</b>
Religions and cultures in Grampian	33
Disability Communication "Z" Card	8
Human Trafficking Leaflet	23
Trans Booklet	10
Seminar Content Handout	21

**Question Nine: Any other comments?**

All of the comments made are shown below, unedited:

I recall that I enjoyed the course. However, I think the issue of unconscious bias needs to be incorporated into the course as I think that is a more frequent issue in healthcare than frank discriminative behaviour (though I appreciate the two are related).

I enjoyed the course at the time as I found out information previously I was not aware of but after answering some of these questions, a refresher may be very useful.

<p>Review of European Human Rights document was very interesting although sadly, it no longer applies.</p> <p>I think all NHS workers should spend much more time learning about equality &amp; diversity issues. We are an institution which is still steeped in inequalities and prejudice and the only answer is education along with legislation. But mainly education.</p>
<p>I find these sessions and the requirement to attend level 4 if recruiting is a bit excessive.</p>
<p>This area of knowledge is really complicated given all the religions, cultures, diverse groups. I found the course really interesting and eye-opening and made me aware of issues I might not have even considered might cause problems. The trainer made the subject matter really engaging and gave lots of quick examples to get you thinking.</p>
<p>Would be good to have some self-assessment quiz / questions on TURAS to aid refreshing learning, or regular Global scenarios with questions, which would maintain the topic as a high priority</p>
<p>no</p>
<p>I would revisit the use of the term Transsexual with the LGBT forum and ascertain if Trans or Transgender is now a more acceptable term.</p>
<p>Review would be helpful</p>
<p>Sorry I have baby brain!</p>
<p>It was an interesting seminar, should be refreshed every so often.</p>
<p>Was useful course, well delivered and the networking supported the content well</p> <p>Not actually sure which level course I attended</p>
<p>I always find these courses interesting, I may not remember the specifics but the principles remain the same and help me to make the right decisions at work on a daily basis.</p>
<p>I thoroughly enjoyed the training as it made me realise that there was a lot of discrimination in society that people were oblivious to.</p>
<p>no</p>

I think the session I attended was useful and it raised my awareness and potentially exposed some 'blind' spots. Like anything though I think reinforcement is helpful and while it need not necessarily be formal or extensive session I think availability of further opportunities and chance to just think about equality and diversity issues and the conversation around these will be valuable.

No.

It was almost 2 years ago to the day (02/11/18) when I did the training. I remember that these were interesting sessions, with other colleagues, who engaged well. I enjoyed the discussion element in small groups.

N/A

Thoroughly enjoy attending this Seminar on previous two occasions. Find it to be worthwhile, engaging, and informative; usually find it encourages group conversation about the topics covered which is enables better understanding and provide different insights.

Nigel, on both occasions, was a brilliant presenter of the Seminar by using humour (in the appropriate areas) and his own personal experiences to explain the material in a way that is easy to understand.

In previous question it wouldn't let me exit until I had ticked something but I haven't consulted any of them.

I absolutely loved this training course and found it incredibly useful, however I do seem to have forgotten a few of the facts learnt in terms of practical characteristics. I would definitely be happy to complete this course again in the future as part of a group of colleagues.

I enjoy Nigel's courses - he delivers these in such an engaging way and truly seems to enjoy his job

I think this would be a good course to be compulsory every few years

This survey has made me aware that I probably need to refresh my knowledge and understanding in this area. I know that our last face to face training at City Hospital was very informative and created a lot of discussion. Many things in society have changed - some for the better - since then.

With regard to literature that I took away from the session - I can't put my hand on my heart and say I remember what I took or how useful it was.

## **4. Conclusions**

- a) The response rate of 52.4% is high for this type of survey. Although not every respondent completed all of the questions.
- b) The answers show a high degree of information retention, justifying the face to face approach which gives staff the opportunity to discuss and ask questions.
- c) It is extremely encouraging that 45 of the respondents gauge their confidence to challenge discriminatory behaviour at 3 or above.
- d) It is extremely encouraging that 15 respondents have actually used the knowledge gained at a Seminar to actually intervene in a discrimination situation.
- e) The resources provided at the Seminars have proved useful.

## **5. Future Equality and Diversity Training Seminars**

Sadly, due to COVID-19, since April 2020, Equality and Diversity Training Seminars are now provided by Teams, Video Conferencing and the internet.

These remote learning formats do not have the immediacy or impact of face to face training, nor do they offer the opportunity to discuss and ask questions as easily. However, the content and presentation methodology has been adapted to maximise the benefits arising from these remote learning methods.

## **5. Acknowledgement**

Grateful thanks are expressed to Louise Ballantyne for setting up the Lime Survey and providing helpful advice.

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