

हर कोई को अनुकूल स्वास्थ्य संभाल का अधिकार है - यहाँ NHS का मूल सिद्धान्त है।

ہر شخص کو صحت تک منصفانہ رسائی کا حق ہے - یہ اصول این ایچ ایس کی بنیاد ہے

সবাইই স্বাস্থ্যের ন্যায্য সুবিধা  
প্রতিষ্ঠার সময়ের নীতি।  
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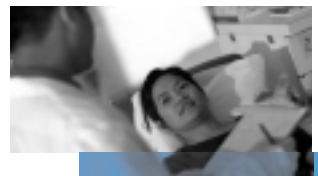
人人都有權公平享受保健服務 - 這是國民保健服務  
機構的基本原則。

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सांख्य सुनिआदी असुल है।

# fair enough?

Review of Race Equality Schemes and Fair for All Action plans

Briefing for NHSScotland Employees





# fair enough?

## Review of Race Equality Schemes and Fair For All Action Plans

### Briefing for NHS Scotland Employees

#### PURPOSE OF THIS BRIEFING

The purpose of this briefing note is to inform staff, particularly front-line staff, about the review and recommendations and to encourage mainstreaming of racial equality and cultural competence. This briefing contains some background information about the review, questions for you to consider, an overview of the findings, and all of the recommendations.

#### INTRODUCTION

The vision of a culturally competent National Health Service which delivers its services and employment opportunities fairly amongst all of Scotland's citizens is central to the social justice agenda developed by the Scottish Executive since devolution. The achievement of such a service is not just a legal necessity – as set out in the Race Relations (Amendment) Act 2000 – but also a measure of how we see ourselves and how we wish to be seen by others. This report sets out what steps the NHS in Scotland has taken since launching the Fair for All initiative in 2000 and what challenges lie ahead.

The Scottish Executive Health Department now fully recognises the need to improve the health care of Scotland's minority ethnic communities. In response to this challenge it established the National Resource Centre for Ethnic Minority Health (NRCEMH), which has been consolidating the planning process and there is now a written commitment and a carefully planned action plan by all the Health Boards and Trusts.

A review has been commissioned jointly by NRCEMH and the Commission for Racial Equality (CRE). It is the product of an analysis of Race Equality Schemes (RES) and Fair for All (FFA) Action Plans produced by Scottish Health Boards and Trusts in response to their new responsibilities.

The specific purpose of the review was to provide “a robust response on the extent to which NHS Boards and Trusts in Scotland have been able to reflect the requirements of the Scotland Order (Specific Duty on Race Equality Schemes) and their preparation for Fair For All (FFA)”.

## **METHODOLOGY**

The foundation for analysis of the Schemes and Action Plans is a National Assessment Framework. The National Assessment Framework lists a range of areas which a comprehensive Scheme and Action Plan covering race equality and cultural competence might be expected to include. The approach taken in the individual assessments has been to identify within the Scheme and Action Plan whether or not the RRAA and FFA requirements have been reflected. In addition, the analysis identifies areas of good practice and areas for general improvement. The assessments have taken into account the context of the organisation (e.g. whether or not there is a history of work in the area of black/minority ethnic service provision and employment). The process has been designed to be both robust and supportive.

A two stage process was adopted. A preliminary report was issued in early March 2003, based on the results of the analysis of Race Equality Schemes. It was also intended to assist with the preparation of Fair for All (FFA) Action Plans. The second stage included an analysis of the Fair for All Action Plans. The final findings incorporate both recommendations and examples of practice and planning.

## **NEXT STEPS**

The review process has now ended. However the process of implementing the Race Equality Schemes and Fair for All Action Plans has just begun and there will be some ongoing monitoring by the CRE and the NRCEMH through other processes such as the NHS Performance Assessment Framework (PAF). The CRE also has new powers of enforcement and has already taken steps in England and Wales to ensure compliance with the new requirements.

Detailed Action Plans were required for year 1 so Schemes and Action Plans will continue to be developed and a full review is required by November 2005. Race Impact Assessments have also to be carried out for all relevant policies and functions. This means that the work already undertaken as part of this review will continue to be useful as further developments take place.

## **OVERVIEW: A BRIEF SNAPSHOT OF OUR OBSERVATIONS**

Much work has gone into the preparation of Schemes and Action Plans. Commitment and enthusiasm has generally been demonstrated.

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Although getting the Schemes and Plans has taken some effort on the part of Boards and Trusts, particularly where this was a relatively new area of work, the real work is in making things happen on the ground so that people from diverse communities can get services that meet their needs and so that people from all communities have an equal chance of working and progressing in NHS Scotland.

The real work lies in what is delivered on the ground, and whether the experience of all communities truly reflects fairness, justice and equity. This is echoed by Robin Schneider, co-author of "Towards Racial Equality" (CRE, 2003) who says:

*"The need now is to focus on outcomes. Year one has been about putting the foundations in place, subsequent years are about making a real difference in the things the public will notice – setting goals for service user satisfaction, or employee profiles – accompanied by transparent reporting of progress. So, that those that are responsible can be properly held accountable. The heat will be on our public servants"*

Some of the key findings of the review were:

- ▶ Most Boards and Trusts demonstrated clear leadership and commitment in their willingness to make progress in their Schemes and Action Plans. However, a number of Schemes and Action Plans failed to meet RRAA and FFA requirements.
- ▶ Boards and Trusts have submitted Action Plans. However, some of the Action Plans omitted milestones, targets or timescales based on the functions and policies assessed as having most relevance to the General Duty, or were not explicit about outputs and outcomes or did not have full and realistic costings.
- ▶ Schemes addressed different aspects of communication. Translation and interpreting was generally well developed in the thinking of Boards and Trusts, although more work was needed on ensuring staff and users knew about this.
- ▶ Some Schemes and Action Plans did not fully meet the RRAA and FFA requirements in some areas, including:
  - engagement with workers; workers who were not employees (e.g. contractors such as GP's or research consultants, volunteers, people on placement) were barely mentioned nor were the barriers for minority workers.
  - serious failure to meet the FFA service area requirements explicitly and to show that staff and potential users would be made aware of services and staff would be appropriately trained, in particular in the areas of procurement, personal care and dietary needs.
  - race impact assessments; there was little evidence that Boards understood the implications in terms of resource commitment and findings.

## YOUR ROLE

Wherever you are in the NHS, your work has an impact on other employees and workers, and on people who use the NHS. It may be direct or it may be at some distance. Whilst it is important to make sure you stay within the law, it is also right that people should be able to get fair and equal treatment. You probably believe this too but sometimes, there are different views about what this means and you will have to make sure that you have the knowledge and skills to fulfil what this means in your work.

The main task is for you to consider how your work already meets different needs or may have to develop in the future so that it really is “fair for all” - culturally competent, promoting racial equality, ensuring discrimination does not take place and promoting good relations between persons of different racial groups.

The following questions may help you to focus on these.

### *Questions to help me meet legal (RRAA) and policy (FFA) requirements.*

1. Is it “fair enough” to keep doing things the way they have been done? Am I doing what I need to ensure people are getting fair and equal access (to employment and services)?
2. Am I including all communities when I am doing my work?
3. Are any communities disadvantaged or treated more favourably and is this unlawful? (Do I know what is and isn't lawful?)
4. Am I aware of the needs of different communities? Am I aware of the needs of different groups within communities?
5. Do I know if my work is culturally competent – i.e. takes account of different cultures appropriately and sensitively
6. Do I know where to go to find out and/or get training about the areas I have to learn more about?

## RECOMMENDATIONS

The full list of recommendations provided by the review is given below. Some of the recommendations refer to the way the Schemes and Action Plans were produced and made publicly available. Some relate to the legal and policy requirements.

### The overall context and methodology for assessment

- 1: The inclusion of a chart showing organisational responsibilities and/or a table showing the allocation of responsibilities would help in showing to outside readers which parts of the organisation would be responsible for taking work forward.

- 2: Both CRE and NRCEMH should publish information about forthcoming guidance and expected timescales for the coming year to assist public authorities in their planning.
- 3: Boards should increase their capacity by giving more attention to developing partnerships and external sources of assistance including the CRE, NRCEMH, Race Equality Councils, relevant Social Inclusion Partnerships and other local race equality providers.
- 4: ALL functions and policies must be identified and listed, assessed and prioritised with information about how new functions and policies would be assessed. This process must be a priority for those several Boards and Trusts which have yet to start or complete the work that is required under the RRAA. Where possible functions and policies should be specific enough to allow meaningful analysis (e.g. either 'surgery' or 'primary care' would be too broad and would need to be broken down into its constituent parts).
- 5: Services are distinct from policies and functions. Action priorities for years 1, 2 and 3 should be based on relevance of functions to the General Duty and in the RRAA and should show how services link to functions.
- 6: Commitment needs to be demonstrated in measurable action points. It also needs to be matched by reflecting and meeting legal and policy requirements.
- 7: All Action Plans should indicate annual costings, specifying recurrent and non-recurrent expenditure. Annual reports should give some information about budgeted costs and actual expenditure.
- 8: It would be reasonable to expect a full action plan by 30 November 2003 to bring the new Quality Improvement Scotland and NHS Health Scotland into line with other Boards which will have to produce year 2 Action Plans at that time.
- 9: Boards and Trusts should consider how community planning and joint futures work might contribute to integrated working on areas which overlap boundaries and functions and contribute towards accessing services e.g. transport, residential care, information services.
- 10: Schemes and Action Plans should clearly cover all the equality groups specified by Boards and Trusts AND meet the legal requirements of RRAA and policy requirements of FFA.

## Project leadership and planning

- 11: The statement of organisational intent must be explicit and include the range of aspects shown in the Fair for All (FFA) and Health Department Letter (HDL), including tackling racist behaviour.
- 12: All Boards and Trusts should consider the appointment or nomination of a co-ordinator for race equality issues. Where a race equality adviser or co-ordinator is in place, Schemes should also demonstrate both action aimed at mainstreaming and allocation of senior responsibility for the issue. This will demonstrate that planning and execution are being shared across the organisation - and avoid marginalisation of the officer and the issue.
- 13: Greater clarity on responsibilities will be achieved by specifying the lead officer and leads for different action points. Final accountability rests with the most senior officer and with Boards – reporting arrangements should be set out to demonstrate how this will be achieved.
- 14: Procurement issues should be addressed urgently. Boards which have yet to deal properly with procurement issues can now benefit from the national guidance published by the CRE in July 2003 (issued in draft format in spring 2003).

## Demography

- 15: Schemes should provide adequate information on plans to gather local population information including but not restricted to the 2001 census data. They should also consider how to make such information more widely available to others (e.g. voluntary sector and interested individuals) and how to further disaggregate information for wider equality issues (e.g. disability and gender).
- 16: NRCEMH should be involved in co-ordinating discussions on identifying local research needs and plans for conducting this through networks already established.

## Communications

- 17: Any member of the public should be able to get a copy of any Race Equality Scheme and all public authorities should revisit this question in future in relation to publication of the Scheme and associated documents. This is an area where NRCEMH should act as a clearing house e.g. by facilitating web-links to Race Equality Schemes or by offering all Health Boards and Trusts the facility to put their Scheme and FFA Action Plan on the NRCEMH web-site which could act as a portal.

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18: A glossary of terms and illustrations should be included in Schemes to make them truly accessible to all readers. The appendix to this report includes a starter glossary which may be of assistance.

19: All Action Plans should have milestones, targets and timescales. Many Action Plans should be more explicit about both outputs and outcomes.

20: Boards and Trusts should ensure the inclusion of black/minority ethnic people in general consultations as well as using specific mechanisms or consulting on issues deemed to be of particular relevance.

21: A consultative forum should be seen as only one mechanism for consulting black/minority ethnic people as well as potentially including representatives of other equality groups. Where a consultative forum is not to be set up, the Action Plan should indicate how the spirit of the FFA HDL will be met.

22: Early attention should be paid to the development of a range of mechanisms to ensure wider engagement with black/minority ethnic communities.

23: Staff should be recognised as key stakeholders in the successful implementation of the RRAA and FFA. Means should be found to involve staff and other workers in 2-way discussions.

24: NRCEMH should facilitate partnership working at local, regional and national levels for the core elements of a directory of individuals and organisations.

25: Boards and Trusts must address issues of capacity building and community development if strategies for public involvement and consultation are to be implemented effectively. Community members should be enabled to participate on a level-playing field basis in planning, implementation, review and evaluation. This may require access to information and resources as well as skills development in areas such as negotiations, influencing, networking and strategy development.

26: A strategy for communication should be set out by Boards and Trusts taking into account the information needs of different communities and how they will be met.

27: There needs to be a fuller recognition of the literacy and language profiles of local communities with some attention to the specific needs of asylum seekers and refugees. Steps should be taken to meet all needs identified.

28: Specify mechanisms for dissemination to and access by diverse communities to ensure that information will be freely accessible.

29: The CRE and NRCEMH should produce guidance on publishing to ensure compliance with the RRAA whilst also ensuring they address issues of multiple discrimination.

## Services

30: Boards and Trusts need to specify in more detail the practical steps they are taking to ensure services become truly accessible e.g. by signposting for users and referrals, training staff, and monitoring service uptake.

31: For national Boards, the services may be of less relevance. However, they should still consider if staff and visitors may have requirements in these areas.

32: The CRE and NRCEMH together with the Scottish Executive should consider national guidance which may be of assistance in service access issues.

33: Boards and Trusts should take steps to address personal care provision.

34: Boards and Trusts should take steps to address assessing and meeting dietary needs including consideration of visits to other organisations with a reputation for providing high quality, culturally sensitive catering.

35: Boards and Trusts should consider the development of a clear policy on interpreting for members of black/minority ethnic communities. There should be a strong linkage to the strategy for communications.

## Training

36: Schemes should be clear about the requirements of different staff thereby differentiating training contents according to their needs.

37: Consideration should also be given to how staff will be updated as their work changes or policies and services are developed or assessed for race impact as well as for possible future changes in legislation on issues such as discrimination in employment on grounds of religion.

38: Training is an area which requires some national consideration across sectors as quality and capacity for provision are relevant if public authorities are taking the RRAA requirements seriously. The CRE, NRCEMH and Scottish Executive should consider this issue together, involving other relevant partners.

39: NRCEMH should assist Boards and Trusts by facilitating information exchange about models of training which are currently happening and by providing

guidance on what is required to meet RRAA and FFA. It is important that this is addressed with some speed as Boards and Trusts will be unable to deliver much of their planned programmes without ensuring their staffs are enabled to acquire relevant skills.

40: Schemes and Action Plans should consider evaluation of their training programmes, especially in terms of the effectiveness in terms of meeting RRAA and FFA and overall impact, including change in corporate culture that may eventually result.

## Human resources

41: Boards and Trusts should address developing, disseminating and implementing an equal opportunities policy.

42: Organisations should consider the distinction between dissemination and implementation, and note that case law around discrimination is beginning to demonstrate that employers need to show more than existence and communication of policies.

43: Where policies are in existence, Boards and Trusts should indicate what steps will be taken to harmonise them across different parts of the organisation and how staff will be updated as changes are made. For example, harassment is now to be included within forthcoming equalities legislation.

44: Boards and Trusts should set out in full the arrangements to meet the specific duties on employment i.e. staff in post, applicants for employment and staff leaving employment, applicants for training, and promotion, staff receiving training, results of performance assessment procedures, grievance procedures, and disciplinary procedures.

45: Action plans should give a target date for publication of monitoring information.

46: If monitoring is stated to be in place, there should be information from that monitoring in the Scheme with comments about any trends and action resulting from analysis of such monitoring.

47: Boards and Trusts should be more explicit on reporting of monitoring information, i.e., to whom, how, and how often.

48: Boards and Trusts should consider what opportunities there are to introduce positive action.

49: There should be arrangements to ensure minority staff can participate more fully in mainstream exercises using processes which bypass hierarchical lines such as suggestions schemes and representative or weighted staff surveys.

### **Monitoring of progress & outcomes**

50: Boards and Trusts need to be more explicit about their arrangements for making race impact assessments with consideration of how to decide if a policy or function should be assessed, and whether it requires partial or full assessment. It is suggested that all new policies and functions are prioritised for evaluation to mainstream race equality as policies and functions are introduced.

51: The CRE, NRCEMH and Scottish Executive together should give consideration to providing detailed guidance on the development of race impact assessment tools, perhaps with appropriate templates which can be adapted for local use. It is also an appropriate area for work to be carried out on a national basis for similar themes.

52: All involved in race impact assessment would benefit by drawing from useful models and practice elsewhere in Europe e.g. Holland, Ireland (North and South). This work demonstrates the detailed attention which may need to be paid to this area.

53: Review the publication processes for each of the specified areas – assessments, monitoring, consultations, race impact assessments, schemes and action plans and consider how readers can give feedback on these.

54: Be more specific on the issue of publishing monitoring results and provide details on formats (including accessible formats such as different languages, large-print, Braille, audio or audio/visual formats, downloadable documents on websites, summaries, oral presentations etc. specifying which will be part of usual publication and which will be only on request).

55: Some explicit discussion about benefits across stakeholder would demonstrate how changes may benefit wider groups and contribute to the General Duty requirements of promoting equality and good relations between persons of different racial groups.

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