

**NHS 24
BOARD MEETING**

**29 AUGUST 2024
ITEM NO 10.3
FOR ASSURANCE**

EQUALITY, INCLUSION AND RIGHTS GROUP (EIRG) – PROGRESS REPORT

Executive Sponsor:

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Action Required

The Board is asked to note the progress in year 1 for the Equalities, Inclusion and Rights Group (EIRG).

Key Points for this Committee to consider

- The EIRG is taking confidence from and has ensured oversight of the approach developed within NHS 24 to mainstream equality, inclusion, and rights.
- The EIRG has noted significant progress and set this out against themed areas of focus for consideration. Progress is noted in strategic planning and implementation, workforce and culture, volunteer and community engagement and demonstrable approach to developing user-centred design.
- The EIRG has also ensured governance across the equality, diversity and inclusion agenda has been strengthened.

Governance process

The EIRG is a short life working group of the Board.

Strategic alignment and link to overarching NHS Scotland priorities and strategies

This paper aligns with the key strategic priorities below and appropriate SG policies:

- NHS 24's Corporate Strategy
- Equality Act 2010 and associated legislation
- SG's A Fairer Scotland for All: An Anti-Racist Employment Strategy
- SG's Anchor Strategic Plan

Strategic alignment and link to Corporate Delivery Plan activity

Ambition two - We want to reduce health inequalities. We will engage directly with communities across Scotland to improve an understanding of the care, advice, and information available.

Key Risks

None identified.

Financial Implications

All recommendations made should be achieved within business as usual. Any activities that were beyond that would require EMT approval.

Equality and Diversity

The EIRG has enabled Board members, Executive Team members, public partners and staff involved in mainstreaming equality, human rights, and community engagement to debate and consider the steps and approaches necessary for NHS 24 to further the mainstreaming of equality across the organisation.

1. RECOMMENDATION

- 1.1 The Board is asked to note the progress in year 1 for the Equalities, Inclusion and Rights Group (EIRG). A copy of the EIRG's Terms of Reference is attached (Appendix A).

2. TIMING

- 2.1 This update covers the first of two years for the group.

3. BACKGROUND

- 3.1 The Clinical Governance Committee and Staff Governance Committee, each have a lead role in providing assurance to the NHS 24 Board in respect of equality, inclusion, and rights.
- 3.2 To strengthen governance across equality, inclusion, and rights, at a time when legislative and policy changes were anticipated approval was given for the establishment of the EIRG as a working group of the NHS Board, initially for a period of two years.
- 3.3 The EIRG reports directly to NHS 24 Board and a review process is in place to establish if improvement outcomes have been achieved and if the group can subsequently be dissolved, or if there is further requirement to continue.
- 3.4 The EIRG has input from Board members, Executive leads, and senior staff from within TSPP, Workforce, and clinical directorates, and includes PPF members.

EIRG FOCUS

- 3.5 The EIRG is not intended to duplicate the work ongoing through standing governance arrangements and business systems and processes, rather it seeks to provide assurance to the Board that adequate progress is being

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made in embedding NHS 24’s approach to equalities, inclusion, and rights across the organisation.

3.6 As such the EIRG developed a workplan to track progress and focus organisationally, aligned to key themes agreed through the group and into Board. Specifically, the plan set out commitments in the following areas of focus:

Enabled Workforce	Scope and develop knowledge, understanding and confidence at all levels across our organisation.
Inclusive Design	Achieve an inclusive and person-centred approach to strategic planning and service development, particularly aligned with NHS 24s key Strategic Programmes (Digital Transformation/Service Transformation/Workforce)
Informed Decision-Making	Evidence due consideration to equality led matters in strategic decision-making. General Equality Duties met.
Strategy Implementation	Meaningful contribution supporting NHS 24 realise its strategic ambitions particularly those aligned with: <ul style="list-style-type: none"> - Reducing health inequalities - Improving people’s experience - Listening to people – identifying need and understanding behaviour - Access and accessibility
Equality Legislation and Policy	Contributing to a refresh of the Equalities Duties in Scotland.
Volunteer and Community Engagement	Enhance portfolio of external engagement to advance: <ol style="list-style-type: none"> 1. NHS 24 Public Partnership Forum (PPF) and Youth Forum. 2. Opportunities to strengthen NHS 24 identity and enable relationship building across communities of place and communities of interest.

PROGRESS TO DATE

Enabled Workforce

- 3.7 A separate Equality, Diversity & Inclusion workplan is in place with cross-directorate input. NHS 24 has made significant strides through the workforce plan and this specific plan, as regards the diversity and inclusivity of its workforce, with a strong focus on continuing to develop and embed a values-led culture. Through this the diversity of our workforce continues to evolve, an example of which is ethnic diversity, increasing from 5.95% to 7.14%, with increases for people who identify as disabled and/or LGBT. Further improvements include attrition decreasing from 21.15% to 18.99%.
- 3.8 The EIRG has met on 3 occasions throughout the year and has had presentation and discussion across a number of different elements of the equalities, inclusion and rights approach within NHS 24, including:
- A presentation to the group setting out the legal and policy framework that supports equality, inclusion, and rights within the public sector in Scotland and examples of the steps being taken by NHS 24 to embed and mainstream related activities.
 - An update was provided on the actions that NHS 24 took to work with colleagues across Scottish Government directorates to try and find a way to improve [communication for people](#) (link to CivTech Challenge), recognising the challenges people can face in accessing public services via the phone or when using digital tools.
 - Work undertaken with the then Scottish Council on Deafness to pilot a service, which was funded by the Scottish Government. This proved successful and is now “business as usual” and called [Contact Scotland BSL](#).
 - Activities being undertaken in advance of the introduction of the United Nations Convention on the Rights of the Child (UNCRC) and the work of the cross-directorate Children and Young Persons Group; an invitation has been sent to the Youth Forum to join the group. This includes a review of the Equality Impact Assessment template to accommodate requirements of UNCRC which involved engagement with the Children and Young Persons Group and wider consultation ahead of implementation in July 2024.
- 3.9 In addition, there has been a focus on Board development and raising awareness of the equality, inclusion, and rights agenda approach. A specific Board development session was held in March looking at both the equalities agenda and the wider work in terms of volunteer and community engagement.

- 3.10 Similarly, sessions have taken place with SMT in the review of NHS 24's Equality Outcomes and in the work associated with the United Nations Convention on the Rights of the Child (UNCRC).

Inclusive Design

- 3.11 NHS 24 has developed a robust Framework for Change, which factors in equality considerations aligned to our corporate strategy.
- 3.12 A number of key pieces of work have been progressed this year which are beginning to demonstrate a consistent user-centred design approach, including:
- Review of NHS 24 mental health services and ongoing collaboration with Police Scotland and Scottish Ambulance Service to deliver the enhanced pathway for those in mental health distress.
 - Strategic review of NHS inform, including accessibility audit, significant user research, and stakeholder engagement.
 - Shaping Service Transformation Portfolio and understanding expectations of those using NHS 24 services, notably the 111 service.
 - Development of National Sexual Health digital resource.
 - Building lived experience into Mind to Mind and Surviving Suicidal Thoughts digital resources.
- 3.13 Stakeholder engagement has been extensive in the development of NHS 24's strategy and plans and the Board workshop showcased some of the work being taken forward with a range of partners and stakeholders. A refreshed Stakeholder Engagement Framework has also been developed with strong cross-directorate working as a key principle in the approach being taken.

Informed Decision-Making

- 3.14 The EIRG reviewed the requirement for NHS 24 to set equality outcomes by May 2025 and also reviewed progress against the three equality outcomes set out in 2021.
- One outcome concerned the fact that there was under representation of minority ethnic staff and recognised the marked increase in the percentage of our minority ethnic workforce.
 - Secondly, consideration of disabled people and how they access the NHS 24 services. The CivTech Programme which NHS 24

participates in was provided as an example of positive progress against this outcome.

- The final outcome was with regard to young people and how NHS 24 has raised awareness of its Mental Health Services. NHS 24's Youth Forum has been engaged in the development of the Mental Health Hub and input to the ongoing review of digital mental health resources.

- 3.15 Engagement across NHS 24 through EIRG, EMT and SMT as well as PPF and YF is supporting the refresh of the 2025 Equality Outcomes, with initial set to be identified by November 2024.
- 3.16 An Equality, Human Rights and Community Engagement governance matrix has been developed, a helpful tool for identifying accountability for specific equality focused actions. The matrix is used to help ensure that appropriate governance is applied to all equality, human rights and community engagement responsibilities NHS 24 has. This matrix has been reviewed by each of the Board Committees where relevant and the Integrated Governance Group.
- 3.17 NHS 24 Anchors Strategic Plan has been approved, which is primarily focussed on NHS 24's role as a local employer, building community wealth through procurement, estates, and employment opportunity.

Strategy Implementation

- 3.18 There is demonstrable evidence of an equality, inclusion and rights approach building in the delivery and implementation of NHS 24's strategy and Corporate Delivery Plan, including:
- User-centred design approach as described above in shaping service and digital transformation work.
 - Specific social value and accessibility functional and non-functional requirements incorporated into the procurement process for the new CC/CRM system, a critical component of service transformation and improved accessibility.
 - Workforce plan and Equality, Diversity, and Inclusion Plan delivery, inclusive of anti-racism approach and development of a fair, equitable and inclusive culture.
 - Partnership working with PHS to develop data and business intelligence and support development of preventative and proactive care approach.

- 3.19 As our services transform, so to do we need to take account of the publication of [Planning with people, community engagement and participation guidance](#) – updated 2024 for health and social care.
- 3.20 Healthcare Improvement Scotland considers service change to be a service development or change in the way in which patients and service users access services. This may include the enhancement of a service through increased access, new resources and technologies, or new build facilities. It may also include reduction, relocation or withdrawal of a service or the centralisation of specialist services. Some changes are made on a long-term or permanent basis while others are provided on a temporary basis.
- 3.21 Service change, including major service change, requires that health boards inform, engage and where relevant consult member of the public, and that any proposed changes should be subject to the equality impact assessment process. Planning with People will support further development and implementation across our digital and service transformation work.

Equality Legislation and Policy

- 3.22 There are already significant existing legislative and policy considerations for our organisation to comply with, and further changes are expected to be introduced, each of which will have some impact on our organisation. The EIRG is best placed to support the implementation of these changes, providing opportunities to discuss and mainstream equalities, inclusion, and rights across directorates.
- 3.23 The Scottish Government have consulted on changes to the Public Sector Equality Duty. Initially this will include delivering on two key prioritised regulatory changes, which are intended to be highly impactful in terms of advancing equality in Scotland for some of the most disadvantaged groups, with the aim of implementing these changes by 01 May 2025. These are: revising the current pay gap reporting duty to include reporting on ethnicity and disability pay gaps; and introducing a new duty on listed public bodies in relation to their use of inclusive communication. The extent to which inclusive communication is being proposed is not known at present, however, as Scotland's provider of digital health and care services, inclusive communication should always be central to our core aim.
- 3.24 The United Nations Convention on the Rights of the Child (UNCRC), as described above sets out steps that our organisation needs to take to benefit children. Similarly, the intention of the [Scottish Human Rights Bill](#) is for more people in Scotland to have all of their human rights respected, protected, and made real, and incorporating international human rights and NHS 24 has engaged in the work to develop this.
- 3.25 The Scottish Government are also introducing legislation on [Learning Disabilities, Autism and Neurodivergence](#). The Bill identifies that people with

learning disabilities and neurodivergent people can be amongst the most vulnerable and disadvantaged in our society. The objectives of this Bill are to better respect, protect and champion the rights of these groups, and to build a fairer Scotland for everyone.

- 3.26 Other equality led legislation and policy drivers already in place include our duties as a Corporate Parent, our role within the Armed Forces Covenant Duty, the Scottish Government's approach to anti-racism behaviours and the requirements to meet the Fairer Scotland Duty, which places a legal responsibility on particular public bodies in Scotland, including NHS 24, to actively consider ('pay due regard' to) how they can reduce inequalities of outcome caused by socio-economic disadvantage, when making strategic decisions.

Volunteer and Community Engagement

- 3.27 There has been clear progress in the approach taken to volunteering and community engagement this year, including:
- NHS 24 successfully achieved Investor in Volunteer accreditation this year, recognising the positive work with volunteers, not least the Public Partnership and Youth Forums.
 - A Community Engagement and broader Stakeholder Engagement Framework has been developed.
 - Relationship with HIS Community Engagement team has been re-established through the development of NHS 24's strategy and implementation plans.
 - Collaboration with Alliance and others such as YoungScot in supporting the strategic review of NHS inform.
 - Working with those with lived experience to support development of next phase of online mental health digital resources.
 - Engagement with a number of Third Sector Interfaces across Scotland.
- 3.28 PPF and Youth Forum have been very engaged this year as evidenced by the annual report previously presented and inclusive of representation on the EIRG to continue to build and strengthen this approach.

FURTHER ASSURANCE – YEAR 2

- 3.29 The EIRG has reflected on the progress in year 1, not least in the evidence and assurance as to the extent to which equalities, inclusion and rights feels

like an embedded approach within NHS 24. Equally, the EIRG is seeking assurance that the governance in place is robust enough to support that and provide Board assurance.

3.30 To that end, the EIRG has identified areas for further focus in year two, taking account of what it had already learned, and the legislative and policy priorities identified by the Scottish Government relative to equality, inclusion, and rights.

3.31 Key areas for further assurance the EIRG will seek in year 2 include:

- The EIRG acknowledged the importance of data collection and analysis when considering who can and who may not be able to access the services that our organisation provides due to the protected characteristics that a person has. Gaining an improved understanding of the barriers people face, through effective data collection and insights gained from engaging with diverse communities and user research, will enable the EIRG to influence how access to our services can be improved and developed further using a user-centred design approach.
- The Scottish Government are asking Boards to develop anti-racism plans recognising that most minority ethnic groups are disproportionately affected by socio-economic inequality. Structural racism exists and contributes to and creates additional barriers, challenges, and unequal treatment across wider determinants of health, for example employment and housing. Each of these impacts negatively on a person's health. Much of this work has commenced already and the EIRG will contribute to providing assurance to the Board that adequate progress is being achieved.
- Reflecting on the progress being made to further diversity within our workforce and to continue to embed a values-based culture, the Workforce Equality, Diversity & Inclusion workplan commits to further develop a modern and streamlined model for recruitment and attraction. Alongside this is the commitment to develop programmes for care experienced people, veterans, those from minority ethnic backgrounds and other people who experience barriers in gaining employment. Further activities include conducting access audits to make sure that the physical environment is accessible for disabled people and continuing to refine the Reasonable and Workplace Adjustment Policy process.
- A further area that the EIRG is intent on progressing is the transfer of knowledge across governance structures of the roles and responsibilities that senior staff and non-executives have in relation to equality, inclusion, and rights. Both individually and collectively, particularly at a time when

legislative changes have recently been introduced through the introduction of the UNCRC (Incorporation) (Scotland) Act 2024 and the anticipated changes to the Public Sector Equality Duty expected on 01.05.2025. This will enable the organisation to build upon the learning and future activities agreed following the Board 'Harnessing Collaboration in Delivering Person Centred Care' Workshop that took place on 28.03.2024. Key to this is the equality impact assessment process and meeting each of our legislative duties, including the Fairer Scotland Duty, which requires public bodies to pay 'due regard' to the socio-economic impact of strategic decisions.

- In identifying that it is imperative that equality, inclusion, and rights remains an active Board agenda item and that the EIRG has an important role to support activities across the organisation, one area of further consideration in year two will be the arrangements required beyond the initial timescales of the EIRG. This potentially includes the establishment of a working group or changes to the terms of reference for existing working groups, to be tasked with the further mainstreaming of equality, inclusion, and rights across directorates.

3.32 To support the implementation of these deliverables it is the intention of the EIRG that it increases the frequency in which it meets from three times a year to quarterly.

4. ENGAGEMENT

4.1 This report has been reviewed by the Equality, Inclusion and Rights Group and EMT ahead of consideration by NHS 24 Board.

5. FINANCIAL IMPLICATIONS

5.1 All recommendations made should be achieved within business as usual.

6. MEASURABLE BENEFITS

6.1 The EIRG enables the organisation to demonstrate the steps it has taken to embed equality, inclusion, and rights considerations at a strategic level, achieved through the involvement of Board and Executive Team members, public representatives, and staff responsible for mainstreaming these duties.

7. NEXT STEPS

- 7.1 The continued involvement of Board and Executive Team members, public representatives, and staff responsible for mainstreaming these duties in the EIRG, with a further review of its effectiveness in August 2025.
- 7.2 Consideration will also be given to any governance arrangements required beyond year 2 and the structures necessary to ensure the approach set out is embedded across NHS 24 at all levels.

Appendix A: EIRG TORs

TERMS OF REFERENCE

NHS 24 BOARD EQUALITY, INCLUSION AND RIGHTS GROUP (EIRG)

1. PURPOSE OF GROUP

- 1.1 The EIRG will be responsible for monitoring compliance with the Board's responsibilities in line with the organisation's legal duties.
- 1.2 It will identify and recommend improvement opportunities, enabling full potential in this key area, so NHS 24 can deliver best practice and flourish in its delivery of equality, diversity, inclusion, and human rights.
- 1.3 The group will have a clear oversight role across this specific improvement programme, with the role of individual Board Committees unchanged and continuing to take forward work for their areas.

2. GOVERNANCE AND REPORTING

- 2.1 The EIRG has been established with authority of the NHS 24 Board on a time-limited basis for an initial **period of 2 years** from August 2023, and will report directly to the Board. The first report will be presented to the Board in Q1 24/25
- 2.2 A formal review and report of the group's outputs will be undertaken in the last quarter of the 2-year period, to establish if improvement outcomes have been achieved and sustained. The formal evaluation report will be presented to the Board at the end of the 2nd year.

3. MEMBERSHIP

- 3.1 Membership consisting Non-Executive Directors, Executive Directors with associated remit and delegated senior managers with the knowledge and expertise to steer debate, decision making and oversight.
 - Director of Transformation, Strategy, Planning and Performance (Executive Lead: equality and public involvement portfolio) - **(Chair)**
 - Non-Executive Director (s) x2 nominated *by Board*
 - Director of Nursing and Care (Executive Lead: clinical governance)
 - Director of Workforce (Executive Lead: staff governance)
 - Executive Medical Director
 - Employee Director
 - Head of Stakeholder Engagement and Insight
 - Participation and Equalities Manager
 - Service Delivery Senior Representative
 - Public Partnership Forum Representative * *representing the views of PPF/Youth Forum*

3.2 Attendees will be co-opted where relevant to the agenda, to provide subject matter expertise.

3.3 Members can nominate a deputy to attend meetings in their absence, providing that the nominated deputy has relevant knowledge, accountability, and responsibility to take decisions and provide expert input.

3.4 Membership will be reviewed annually.

4. CONDUCT OF BUSINESS

4.1 Quorum

Meetings will be considered quorate when a minimum of one Non-Executive Director and two Executive members are in attendance.

4.2 Frequency of Meetings

The EIRG will normally meet 3 times per year. Additional meetings may be arranged at the discretion of the Chair.

4.3 Declarations of Interest

Declarations of Interest will be a standing agenda item.

5. SPECIFIC DUTIES

- Provide a cross directorate forum to facilitate debate and a dedicated focus on the equality, inclusion, and rights.
- Advise upon and oversee a programme of improvement including a set of key objectives to deliver against the entire equality, inclusion, and rights portfolio
- Increase awareness of and confidence in the Non-Executive and Executive Teams to provide greater levels of assurance to the Board that the organisation is meeting the General Equality Duty, and associated legislation
- Strengthen distributed ownership and responsibility across the organisation in meeting the General Equality Duty, and associated legislation
- Foster greater levels of awareness and understanding at all levels across the organisation creating a positive culture of equality, inclusion, and rights.
- Evidence consistency of approach and meaningful assessment of equalities considerations embedded into our strategic, business, and operational plans.

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- Ensure that equalities and inclusive design principles are consistently embedded in the commissioning, design and development of NHS 24 services, products, and tools.
- Take account of and respond to the predicted updates to the current Public Sector Equality Duty expected to be in place by 2025.

6. REVIEW OF TERMS OF REFERENCE

Terms of reference to be reviewed after 12 months.