



## EQUALITY IMPACT ASSESSMENT

### BACKGROUND

<b>Date of Assessment:</b> (dd/mm/yyyy)	<b>17/05/2022</b>
<b>Title of document being assessed:</b>	AHSCP Workforce Plan 2022 - 2025
<p><b>1. This is a new policy, procedure, strategy or practice being assessed.</b> (If <b>Yes</b> please check box) <input checked="" type="checkbox"/> X</p> <p><b>This is a new budget saving proposal</b> (If <b>Yes</b> please check box) <input type="checkbox"/></p>	<p><b>This is an existing policy, procedure, strategy or practice being assessed?</b> (If <b>Yes</b> please check box) <input type="checkbox"/></p> <p><b>This is an existing budget saving proposal being reviewed</b> (If <b>Yes</b> please check box) <input type="checkbox"/></p>
<b>2. Please give details of the Lead Officer and the group responsible for considering the Equality Impact Assessment (EQIA)</b>	Fiona Rennie, Principal Planning Officer AHSCP Workforce Steering Group.
<b>3. Please give a brief description of the policy, procedure, strategy or practice being assessed, including its aims and objectives, actions and processes.</b>	<p>Scottish Government requires the Angus Health and Social Care Partnership (AHSCP) to have a 3 year workforce plan commencing July 2022. In 2019 the Scottish Government's Integrated Workforce Plan for Health and Social Care confirmed that Workforce Planning for NHS Boards and Health and Social Care Partnerships should be undertaken on a three-year cycle to align with Financial and Operational Planning cycles.</p> <p>The purpose of this workforce plan is to Support the AHSCP to have the right people, with the right skills, in the right places, at the right time, to fulfil its mandate and its strategic objectives, and to continue to provide high-quality, person-centred care now, and in the future.</p>
<b>4. What are the intended outcomes of this policy, procedure, strategy or practice and who are the intended beneficiaries?</b>	The plan provides an analysis and forecast of workforce supply and demand informed by local and national workforce challenges and demographic changes. It is accompanied by a clear action plan on how we will attract, retain and develop our workforce in order to meet current and future workforce requirements and contribute to the national long term aim for health and social care in Scotland for people to live longer, healthier lives at home

	<p>or in a homely setting. The intended beneficiaries are our workforce and the supported people that receive input from our services.</p>
<p><b>5. Has any local consultation, improvement or research with protected characteristic communities informed the policy, procedure, strategy or practice being EQIA assessed here?</b></p> <p><b>If Yes, please give details.</b></p>	<p>Research has been conducted around the growing demographic pressures in older people's services and the growing trend towards care at home and ongoing reduction in demand in the care home sector. Cognisance has been taken of several national and local strategies and plans such as The six steps to workforce planning, the National Workforce Strategy for Health and Social Care and An Integrated Health and Social Care Workforce Plan for Scotland. Cognisance has also been given to the NHS Recovery Plan as well as local plans such as the Angus Health and Social Care Partnership Strategic Commissioning Plan and Strategic Financial Plan. This Workforce Plan for 2022-2025 also links with both the national and local Remobilisation Plans that have been developed.</p> <p>During October 2021, the AHSCP Workforce Steering Group commissioned a questionnaire to be sent to all services across the AHSCP to inform the draft workforce plan in relation to:</p> <ul style="list-style-type: none"> <li>• Vacancy Information</li> <li>• Recruitment Challenges</li> <li>• Changes to staffing models (current and projected)</li> <li>• Planned Workforce Efficiencies and Likely Impact</li> <li>• Wider Issues Affecting Service Demand and Anticipated impact on Staffing</li> <li>• Skills development and Future Models of Care</li> <li>• Main Workforce Challenges</li> <li>• Workforce Risks</li> </ul> <p>The draft plan was then developed, and further engagement took place, via a survey monkey, across a wide range of stakeholders. The survey ran from 10 March 2022 – 15 April 2022.</p>
<p><b>6. Fairer Scotland duties:</b></p> <p><b>1) Does this report have an impact for Angus citizens under Fairer Scotland? Yes</b></p> <p><b>2) If Yes, what are these implications and how will they be addressed?</b></p>	<p>In February 2019, the Fair Work Convention published its report "Fair Work in Scotland's Social Care Sector". The report called for urgent reform to improve the quality of work and employment for the 200,000 people who work in social care support in Scotland. Key to recruiting the workforce we need is ensuring that employers and employment across the health and social care sector is seen as attractive. Stability of staff and</p>

<p>What evidence do you have about any socio-economic disadvantage/inequalities of outcome in relation to this strategic issue?</p> <p>Are there any potential impacts this strategy may have specifically on the undernoted groupings? Please remember to take into account any particular impact resulting from Covid-19. Please state if there is a potentially positive, negative, neutral or unknown impact for each grouping.</p> <p>1.Low and/or No Wealth (e.g. those with enough money to meet basic living costs and pay bills but have no savings to deal with any unexpected spends and no provision for the future.</p> <p>2.Material Deprivation (i.e. those unable to access basic goods and services e.g. repair/replace broken electrical goods,</p>	<p>continuity of care is important for people who access support, and progression and professional development for social care workers will result in better quality services and more rewarding careers.</p> <p>In April 2022, Scottish Government began a process of engagement with Local Government, COSLA and other partners across the sector to develop a work programme to oversee distinct areas aimed specifically at improving and sustaining the social care workforce. That programme will include Pay and Conditions; Workforce Planning and Learning and Development.</p> <p>The AHSCP Workforce Plan includes a range of actions aimed at attracting people into the social care workforce and the retention of our current staff.</p> <p>The general levels of pay within social care are low, with the majority of workers at the lower end of the pay scale. During 2021, Scottish Government announced an increase in pay for frontline adult social care workers, raising pay from at least £9.50ph to at least £10.02ph. This is the minimum rate of pay that commissioned providers in Angus pay, some pay above that rate. Angus Council staff receive significantly higher rates of pay.</p> <p>Could be positive and negative implications here. Employment can be a way out of poverty however if someone is in part time or low paid work then this may still be an issue. We know that the communities in Arbroath experience challenges associated with deprivation although there are pockets of deprivation throughout Angus. This is particularly associated with inequality in these communities around income, employment and health.</p> <p>N/A nothing specific for this point.</p>
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warm home, leisure and hobbies

3.). Impact Area Deprivation (i.e. where people live (e.g. rural areas), or where they work (e.g. accessibility of transport).

4.). Impact Socio-economic Background i.e. social class including parents' education, people's employment and income

Where there is the potential for service users, carers or family members to have to travel further to access service or visit loved ones, consideration will be given to ensure that transport isn't a barrier for people joining the workforce, especially in our rural communities and also areas of deprivation. Consideration will also be given to potential travel costs for the public, as that could also be detrimental to those on low incomes or in areas of deprivation.

May be positive impact here, some entry level jobs within social care may not require a high level of formal qualification. The actions within the report may improve socio-economic standards for those without employment currently.

Continued close engagement will be undertaken with groups and communities to understand the nature of the socioeconomic impact arising from the proposals and any mitigating actions that may be available.

## EQUALITY IMPACT ASSESSMENT (EQIA) - RELEVANCE SCREENING

**1. Has the proposal already been assessed via an EQIA process for its impact on ALL of the protected characteristics of: age; disability; gender; gender re-assignment; pregnancy/maternity; marriage and civil partnership; race; religion and belief; and sexual orientation? No**

**1 a. Does the proposal have a potential to impact in ANY way on the public and/or service users holding any of the protected characteristics of age; disability; gender; gender re-assignment; pregnancy/maternity; marriage and civil partnership; race; religion and belief; and sexual orientation?**

**Yes** - Proceed to the Full Equality Impact Assessment (EQIA).

No - please state why not (specify which evidence was considered and what it says)?

**1 b. Does the proposal have a potential to impact in ANY way on employees holding any of the protected characteristics of age; disability; gender; gender re-assignment; pregnancy/maternity; marriage and civil partnership; race; religion and belief; and sexual orientation?** This applies to employees of not only NHS Tayside and Angus Council, but also the 3<sup>rd</sup> sector.

**Yes** - Proceed to the Full Equality Impact Assessment (EQIA).

No - please state why not (specify which evidence was considered and what it says)?

**2. Name:** Fiona Rennie

**Position:** Principal Planning Officer

Date: 17/05/22



## FULL EQUALITY IMPACT ASSESSMENT (EQIA)

### Step 1.

**Is there any reason to believe the proposal could affect people differently due to their protected characteristic?** Using evidence (e.g. statistics, literature, consultation results, etc.), justify whether yes or no. If yes, specify whether impact is likely to be positive or negative and what actions will be taken to mitigate against the undesired impact of a negative discrimination. When considering impact, please consider impact on: health related behaviour; social environment; physical environment; and access to & quality of services of NHS Tayside, Angus Council or 3<sup>rd</sup> sector social justice.

### 1a. The public and/or service users holding the Protected Characteristics:

	POSITIVE IMPACT	NEGATIVE IMPACT	Intended mitigating actions against the b) Negative Discrimination
	a)Positive Action	b)Negative discrimination	
<b>AGE</b>	Yes	Yes	It is likely that the plan could have both positive and negative impacts on the people we support of all ages. The plan contains a wide range of improvement activity and service redesign. Some of this will involve changes to pathways and models of care and support and changes to how services are delivered. Much of this will relate to older people, due to changing demographics and the increase in the older population. However, it is likely that changes will affect people of all ages. The welfare of the individuals affected is paramount, and they will remain at the centre of any plans going forward. We will aim to minimise impact and to support individuals as much as possible by approaching

			this in a planned way, taking into account their needs, and by ensuring that clear and consistent communication and engagement take place.
<b>GENDER</b>			
<b>DISABILITY</b>	Yes	Yes	It is likely that the plan could have both positive and negative impacts on the people we support, many of whom have both physical and mental disabilities. The plan contains a wide range of improvement activity and service redesign. Some of this will involve changes to pathways and models of care and support and changes to how services are delivered. The welfare of the individuals affected is paramount, and they will remain at the centre of any plans going forward. We will aim to minimise impact to individuals as much as possible by approaching this in a planned way, taking into account their needs, and by ensuring that clear and consistent communication. We will involve and engage with individuals to ensure the health needs of the residents are fully taken into account. Much of our workforce improvement activity is focussed on improving health and wellbeing of individuals including improved pathways for accessing support.
<b>ETHNICITY/ RACE</b>			"We will continue to monitor the impact of BREXIT on recruitment to ensure equality and inclusion within our workforce."
<b>SEXUAL ORIENTATION</b>			
<b>RELIGION/ BELIEF</b>			

<b>GENDER REASSIGNMENT</b>			
<b>PREGNANCY/ MATERNITY</b>			
<b>OTHER: CARERS OF OLDER AND/OR DISABLED PEOPLE</b> (Although carers are not considered as a PC in itself, they are protected by the Equality Act 2010 from “discrimination by association” with the PCs of age and disability)	There is potential for some positive impact for some carers depending on where they live and where their relative is moved to. It could be closer to their home/better bus route etc, making it easier for them to visit.	Yes, there will be a negative impact as the service provided is for older people who will have to move to alternative accommodation. Some of the older people affected will have dementia and may also have other physical disabilities or long term conditions. This may cause anxiety for carers and family members.	The point above in relation to age and disability, will also relate to carers.

**1b. The employees holding the Protected Characteristics:**

	<b>POSITIVE IMPACT</b>	<b>NEGATIVE IMPACT</b>	<b>Intended mitigating actions against the b) Negative Discrimination</b>
	<b>a)Positive Action</b>	<b>b)Negative discrimination</b>	
<b>AGE</b>	There could be a positive impact for some older staff if they are nearing retirement and are able to access ER/VR package.	There could be a negative impact for some staff if they are required to work in a different way, in a different environment, in a different location and they are not favourably disposed towards these changes.	Some of the improvement activity is likely to have a direct effect on some staff in relation to service changes and ways of working. Training will be provided for staff in relation to changes to ways of working. Our desire is to avoid any compulsory redundancies and work will be ongoing to identify alternative employment options through the Council's Managing Workforce Change policy, where this relates to any improvement activity.
<b>GENDER</b>		Yes – the majority of the workforce within the AHSCP are female.	Any decision made is likely to have a direct affect on some staff in relation to service changes and ways of working. Our desire is to avoid any compulsory redundancies and work will be ongoing to identify alternative employment



			<p>options through the Council's Managing Workforce Change policy. Although the majority of the workforce are female, there is no difference in how female employees are supported. All employees, regardless of their gender, will be supported with the same options and opportunities as specified in the 'Managing Workforce Change' policy.</p> <p>A small percentage of posts held by staff within the AHSCP are also in part time positions and we would take this fully into account through the 'managing the workforce change' process in terms of identifying suitable alternative employment opportunities that reflect their current part time positions.</p>
<b>DISABILITY</b>			<p>It is possible that some staff may have disabilities. We would ensure, through the 'Managing the Workforce Change' process that their any disabilities were taken fully into account when considering alternative employment opportunities. This would include identifying any reasonable adjustments that would be required.</p>
<b>ETHNICITY/ RACE</b>			
<b>SEXUAL ORIENTATION</b>			
<b>RELIGION/ BELIEF</b>			
<b>GENDER REASSIGNMENT</b>			
<b>MARRIAGE/CIVIL PARTNERSHIP</b>			
<b>PREGNANCY/ MATERNITY</b>			

<p><b>OTHER: CARERS OF OLDER AND/OR DISABLED PEOPLE</b> (Although carers are not considered as a PC in itself, they are protected by the Equality Act 2010 from “discrimination by association” with the PCs of age and disability)</p>			<p>It is possible that some of the staff affected are also unpaid carers. We would ensure, through the ‘Managing the Workforce Change’ process that their caring responsibilities were taken fully into account when considering alternative employment opportunities.</p>
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**1c. Does the proposal promote good relations between any of the Protected Characteristics?**

YES

NO

NOT SURE

Specify further (e.g. between which of the PCs, and in what way, or why not or not sure)

**1d. What steps will you take to collect the Equality Monitoring information needed to monitor impact of this proposal on PCs, and when will you do this?**

Equality monitoring information is collected annually in line with the equalities mainstreaming outcomes and monitoring arrangements.

**Step 2**

Publish The Equality Impact Assessment.

**Where will the Equality Impact Assessment (EQIA) be published?**

Angus Health and Social Care Partnership page on Angus Council website

**CONTACT INFORMATION**

<b>Name of Department or Partnership:</b>	<b>Angus Health and Social Care Partnership</b>
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<b>Type of Document</b>	
Human Resource Policy	<input type="checkbox"/>
General Policy	<input checked="" type="checkbox"/>
Service	<input type="checkbox"/>

Change Papers/Local Procedure	<input type="checkbox"/>
Guidelines and Protocols	<input type="checkbox"/>
Other (please specify):	<input type="checkbox"/>

<b>Manager Responsible</b>	<b>Author Responsible</b>
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<b>Signature of author of the policy:</b>	<b>Date: 17/05/22</b>
<b>Signature of Director/Head of Service: Eunice McLennan</b>	
<b>Date: 17/05/22</b>	
<b>Name of Director/Head of Service: Eunice McLennan</b>	
<b>Date of Next Plan Review: May 2022</b>	

**For additional information and advice please contact:**

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