ANGUS
Health & Social Care
Partnership

Equalities Mainstreaming Report
2025-2027











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Foreword

Welcome to the Angus Integration Joint Board's (IJB) Equalities Mainstreaming Report 2025-2027. The report highlights the significant progress that has been made to ensure we remain fully compliant with the requirements of the Equalities Act 2010.

The IJB Strategic Commissioning Plan (SCP) 2023 - 2026 is clear that equality will be at the heart of everything that we do, including how we will take into account the protected characteristics in the planning and commissioning of health and social care services. It is vital that our health and social care services reflect the demographics of Angus. The SCP recognises that the main challenges to improving health in Angus are due to an ageing population, persistent health inequalities, the continuing shift in the pattern of disease towards long term conditions and growing numbers of people with multiple conditions and complex needs. The IJB is committed to the development of a preventative and proactive care to tackle social inequalities and improve wellbeing in our communities.

Our Equalities Mainstreaming Report demonstrates our commitment through wide ranging activities, best practice and honest reflection on how we can work together to create a more inclusive partnership. We continue to ensure that our workforce take responsibility for implementing the requirements of the Equalities Act as part of their core day to day role, embedding equalities through all that we do, placing the people of Angus at the heart of our services.

Working with our service users, staff and partners we have developed a set of new and ambitious equality outcomes for 2025-2029. These outcomes are aligned with those of Angus Council and NHS Tayside, allowing us to work in partnership to deliver on our outcomes. In turn, this will ensure we can truly make significant progress on removing discrimination, advancing opportunities for all and fostering good relations with the people of Angus.

Steven Whyte - Chairperson
Angus Integration Joint Board

Jillian Galloway - Chief Officer
Angus Health & Social Care Partnership

Introduction

Angus Health and Social Care Partnership (AHSCP), formed in 2016, delivers services for Angus Council and NHS Tayside. This means that we have a single system for planning and delivering local health and social care. The AHSCP Chief Officer is responsible for the management of planning and operational delivery on behalf of Angus Integration Joint Board (IJB). Angus Council and NHS Tayside have integrated the planning and delivery of all community health and social care services for adults and older people. Angus IJB is a separate legal entity responsible for directing the work of the delegated services. The IJB includes members of Angus Council and NHS Tayside (voting members) as well as those representing the interests of the Third Sector and Independent Providers, Carers, staff and service users.

The vision for health and social care in Angus is to work together, developing communities that actively care, promoting wellbeing and creating the best possible health and social care across Angus. Our vision and priorities were developed through public events and conversations in the development of the Strategic Commissioning Plan 2023-2026, it can be accessed here: **AHSCP Strategic Commissioning Plan 2023-2026**.

Our Vision, Mission and Values

Our Strategic Ambitions & Priorities for 2023-2026

The information outlined in the Strategic Needs Assessment, performance reports and the legislative and policy context highlight the need to do things differently. As a result, we have identified three Strategic Ambitions:



Our Vision - People in Angus receive the best services possible and enjoy physical and mental health to their full potential.



Our Values - We are caring, compassionate, person-centred, honest and respectful.



Our Mission - Working together, being courageous and innovative, always aiming to provide safe, effective high-quality health and social care.

- Support people to be independent for as long as possible.
- Ensure services are sustainable and proportionate to need.
- Provide integrated and co-ordinated care.

We have identified the following Strategic Priorities to support these ambitions:

- Priority 1. Prevention and proactive care
- Priority 2. Care closer to home
- Priority 3. Mental health, learning disabilities & substance use recovery

We have also identified five Strategic Enablers to help support the delivery of our Plan. These are:

- Workforce
- Financial planning
- Collaborative Commissioning
- Communication and Engagement Infrastructure
- Data and Technology

The three priorities of the AHSCP Strategic Commissioning Plan aim to deliver on the nine National Health and Wellbeing Outcomes.

The National Health and Wellbeing Outcomes apply across all integrated health and social care services, ensuring that Health Boards, Local Authorities and Integration Authorities are clear about their shared priorities by bringing together responsibility and accountability for their delivery. They provide a strategic framework for the planning and delivery of health and social care services. Our priorities, commitments and the actions within the Strategic Delivery Plan (SDP) are aligned to delivering the national outcomes.

Progress against these deliverables is reported in the annual performance and strategic progress report published annually.

Legislative Background

Equalities

The Equality Act 2010, sets out the full range of the nine 'protected characteristics', which are protected from discrimination on the basis of:

- age
- disability
- gender reassignment

- marriage and civil partnership (applies to duty as an employer only)
- pregnancy and maternity (applies to duty as an employer only)
- ethnicity
- religion and belief
- sex
- sexual orientation

However, not all protected characteristics are treated in the same way since disability characteristics requires additional compliance associated with "reasonable adjustments" to be put in place. The Act makes provision of a voluntary "positive action" available to organisations who wish to, based on evidence of disadvantage, put measures in place that mitigate against evidence disadvantage for protected characteristics. Further information can be found at Appendix 1.

The Act also introduced a **General Equality Duty**, which applies only in the public sector. This Duty requires public bodies, in the exercise of their functions, to have due regard to the need to:

- eliminate unlawful discrimination, harassment and victimisation.
- 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 those who do not share it.

The Specific Equality Duties

The Equality Act 2010 (Specific Duties) (Scotland) Regulations 2012 came into force in May 2012. These specific duties are designed to help public bodies in their performance of meeting the General Duty.

The key legal requirements for AHSCP contained in these Specific Duties are to:

- Report progress on mainstreaming equality.
- Publish equality outcomes and report on progress.
- Assess and review policies and practices against impact on "protected characteristics".
- Consider award criteria and conditions in relation to public procurement.
- Publish equality information in a manner which is accessible.

Fairer Scotland Duty

From April 2018, the Fairer Scotland Duty, Part 1 of the Equality Act 2010 came into force in Scotland. It places a legal responsibility on particular public bodies in Scotland to actively consider ('pay due regard' to) how they can reduce inequalities

of outcome caused by socio-economic disadvantage, when making strategic decisions. Further information can be found in Appendix 1.

United Nations Convention on the Rights of the Child

New legislation has been introduced to incorporate the UNCRC into Scots law within the powers of the Scottish Parliament. The new duties under the United Nations Convention on the Rights of the Child (Incorporation) (Scotland) Act 2024 came into force in July 2024.

The Act aims to ensure that:

- Children's rights are respected and protected in the law in Scotland; and
- Public authorities are legally required to respect and protect children's rights in the work they do.

The ambition of the UNCRC Act is to deliver a proactive culture of everyday accountability for children's rights across public services in Scotland. It requires all of Scotland's public authorities to take proactive steps to ensure the protection of children's rights in their decision-making and service delivery and make it unlawful for public authorities, including the Scottish Government, to act incompatibly with the UNCRC requirements as set out in the Act.

In 2024, AHSCP introduced an updated Combined Impact Assessment to take cognisance of the requirements under Fairer Scotland Duty, United Nations Convention on the Rights of the Child as well as the Equality Act. This helps to acknowledge that equalities and poverty related issues can often be interconnected.

Mainstreaming Equality

Mainstreaming equality means integrating equality into the day-to-day working of the AHSCP. This means taking equality into account in the way we exercise our functions. Equality should be a component of everything we do.

The benefits of mainstreaming equality are:

- Equality becomes part of the structures, behaviours and culture of the organisation.
- AHSCP knows and can demonstrate how, in carrying out its functions, it is promoting equality.
- It contributes to continuous improvement, better performance and better value.

AHSCP is responsible for mainstreaming and integrating equality into day-to-day activities as well as strategies, etc. Equality and diversity will be embedded into our

delivery of person-centred outcomes. We are also committed to integrating equality into our business tools, an example of this is the AHSCP Combined Assessment which contains an Equality Impact Assessment (EIAs), Fairer Scotland Duty Assessment (FSD) and Child Rights and Wellbeing Impact Assessment (CRWIA) within one template. We continue to ensure equality is explicit and proportionate in business planning and decision-making including gathering and analysing the population data of Angus.

This report has been prepared to demonstrate Angus Health and Social Care Partnership's compliance with the Equality Act 2010 and the Public Sector Equality Duty as it applies in Scotland. The Equality Act 2010 (Specific Duties) (Scotland) Regulations 2012 require us to:

- report on mainstreaming the Equality duty
- publish new equality outcomes for 2025–2029
- assess and review our policies and practices for their compliance with the Act
- publish in a manner that is accessible.

A Snapshot of Angus

The total resource within the Angus Health and Social Care Partnership for 2024/25 was approximately £240 million. A list of the services and functions delegated to Angus Integrated Joint Board (IJB) can be found in Appendix 2.

The Third Sector is defined as comprising of local charities, voluntary organisations, volunteer movements and social enterprises. These are greatly diverse by size and sovereignty. Voluntary Action Angus (VAA) are a key point of intelligence about local third sector organisations and volunteering and understand the local landscape and how it affects the third sector's ability to contribute to local outcomes and national strategies (such as health and social care, community empowerment). We identify support needs for local community groups, voluntary organisations, social enterprises and volunteering. TSIs can identify third sector issues and perspectives that can feed into both local and national policy. VAA is a member of strategic partnerships across the county and are a vital partner with Angus Council, Angus IJB and AHSCP.

VAA's CEO is the Chair of the Community Planning Partnership and has a key role to play at all statutory strategic meetings. The CEO also has a leadership role on the Angus IJB which is accountable for the governance of the AHSCP.

There are links to Tayside-wide hospital services at Ninewells Hospital, Strathmartine Centre and Murray Royal Hospital where a range of support for acute care, people with learning disability, adult psychiatry and drug and alcohol rehabilitation services are provided.

Protected Characteristics in Angus

Understanding the demographics of Angus is essential to ensuring that resources and services are delivered effectively and proportionately to the level of need and risk; that they meet the needs of the changing population and consider the impact of protected characteristics on equal opportunities and health inequalities

Key Facts

- In 2022, Angus's population was 115,978 people dispersed over a large rural area
- A particular challenge for Angus is that 25% of the population lives in rural areas and 1.5% in remote rural areas with access issues.

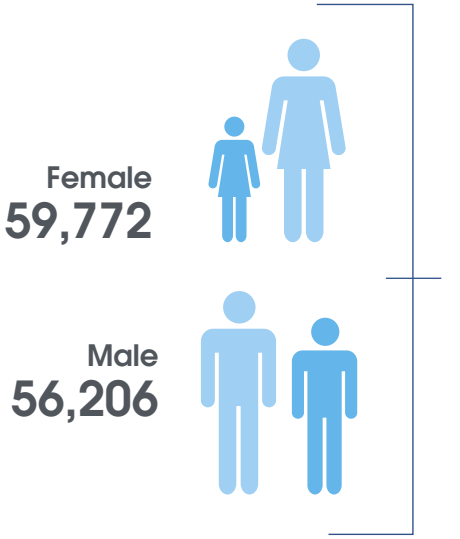
Age and Sex

Source: National Records of Scotland (Census 2022).

The population of Angus is aging with over **25% of people aged 65+**

Projected growth by 2028:

- Over-65 population to increase to **33%**



Age	Percentage %
0-15	17.46
16-24	9.53
25-44	21.42
45-64	28.93
65-74	13.46
75+	11.62

- Over-75 population to rise by **30%**
- Under-65 population to increase by **3%**

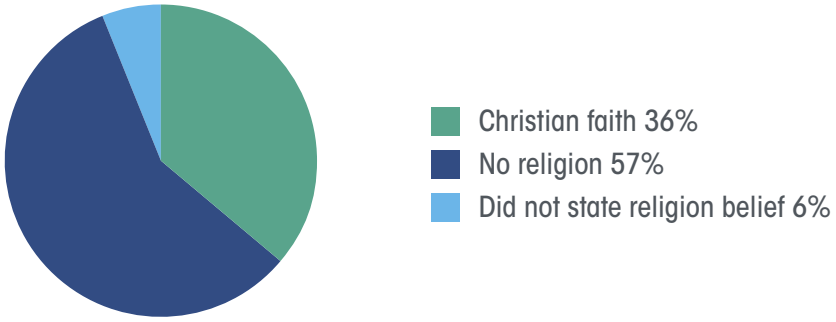
Ethnicity

At the time of the last National Census (2022), 93.9% of Angus's population considered themselves as "White-Scottish or "White-British" with a further 3.7% as "White-Irish/Polish/Other" meaning a total of 97.6% considered themselves as white. 2.4% identify as other ethnicities.



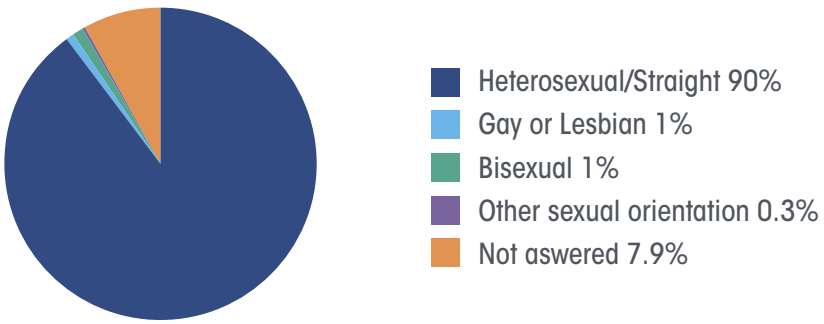
Religion

Census 2022 indicates that 36% of Angus's population are of Christian faith, 57% of no religion and 6% did not state their religion/belief.



Sexual Orientation

Scotland's Census data (2019) suggests that around 90% of Angus residents report to being Heterosexual/Straight, whilst around one-percent report to being Gay, Lesbian, or Bisexual. Almost 8% did not answer the question.



Unpaid Carers

The results from the 2022 Census highlight that there are 627,700 unpaid carers in Scotland in 2022, marking a rise of 27.5% since the 2011 census. The Census data shows the trend that Scotland's unpaid caring population is growing, and more and more carers are caring for longer hours. The increase is driven largely by Scotland's ageing population.

In the 2022 Census:

- 13,196 Angus people (11% population) identified themselves as carers. This has increased by 22% compared to the 2011 census;
- Females accounted for a higher percentage of unpaid carers, both in Angus and across Scotland as a whole. Most care is provided by people aged 50 – 64 years;
- 10,322 Angus people (8.9% population) said that they delivered between 1 and 49 hours of care each week; and
- 3,363 Angus people (2.9% population) said that they delivered over 50 hours of care each week.

Within Angus as of July 2025, there were 1,632 adult carers and 323 young carers recognised and accessing support through Angus Carers Centre.

Deprivation

The Scottish Index of Multiple Deprivation (SIMD) ranks all data zones in Scotland by a number of factors; Access, Crime, Education, Employment, Health, Housing and Income. Based on these ranks, each data zone is then given an overall deprivation rank. Of the 2020 population in Angus, 7.8% live in the most deprived SIMD Quintile, and 12% live in the least deprived SIMD Quintile.

Quintile	% of Population (2016)	% of Population (2020)	Difference
SIMD 1 – most deprived	7.3%	7.8%	0.5%
SIMD 2	17%	22.2%	5.2%
SIMD 3	32.7%	28.6%	-4%
SIMD 4	24.9%	29.4%	4.4%
SIMD 5 – least deprived	18.1%	12%	-6.1%

Supporting Unpaid Carers

'Carer' is a term we use for family members or friends, who may or may not live with a person who needs support, but who give care and support which is unpaid. AHSCP recognises the importance of the role carers play. Carers may need support to enable them to continue in their caring role. Support could be taking care of their own health, or financial support. Carers are integral to the successful delivery of our Equality Outcomes. Carers are protected by the Equality Act 2010 from "discrimination by association" with their caring role for an older or disabled person with a long-term illness, addiction, or other condition.

Following the implementation of the Carers (Scotland) Act 2016, a strategy for Carers in Angus was published in December 2019 and updated in August 2023, **Angus Carers Strategy**, which identified a range of improvement required to meet the intentions of the legislation. AHSCP provides resources to Angus Carers, and other carer organisations, to ensure that accessible information and services are available and that carers can access support without the need for assessment processes. A **progress report** was published in August 2024.

Carers have greater flexibility in using the budget available to them from their SDS assessment to address their needs for respite and improve personal outcomes.

We continue to improve the identification of carers with the support of **Angus Carers Centre**.

We will continue our work to help prevent crisis with carers and continue to refer carers to Angus Carers Centre, community groups, peer support, activities, to improve their lives and their caring role. We will continue to support access to SDS assessment for those who are supporting people with significant needs using the Adult Carers Support Plan and Young Carers Statement. We want to increase the number of carers who are accessing self-directed support options, when they are eligible, in the provision of their support.

Partnership Working

In Angus, local health and social care services are delivered across our four localities. This fulfils the legislative requirement to work at locality level and supports us in shaping services to be more responsive to local needs. We aim to remove unlawful discrimination from all of our services. We continue to work towards reducing the health gap generated by discrimination by working in partnership with the third and independent sectors.

We work closely with both NHS Tayside Equalities Team and the Angus Council Equality Group, to share learning and co-ordinate activity and responses, where appropriate, in order to achieve improved outcomes for the people of Angus. HSCP

representatives, attend the NHS Tayside Equality Outcomes Implementation Group and the Angus Council Corporate Equalities Group to support the Angus-wide partnership approach to equalities. AHSCP have been a key stakeholder in the development of an improved Equality Impact Assessment template for NHS Tayside, in the development of the latest set of Equality Outcomes and are part of the development group for the new Anti-Racism Plan.

Both NHS Tayside and Angus Council routinely publish Equalities progress reports which highlight the significant progress which is already being made. We continue work towards improving health and care outcomes for protected characteristic groups, recognising the additional challenges experienced by those living in poverty and facing additional geographic access issues.

AHSCP continue to work in conjunction with Dundee HSCP and Perth & Kinross HSCP to develop financial plans for services hosted by AHSCP on behalf of other Tayside HSCPs and work with other HSCPs to facilitate the financial planning of services managed elsewhere on behalf of AHSCP.

National Partners

In 2022, the Equality and Human Rights Commission (EHRC) initiated a programme of work to support IJB's with equality improvement work. During these sessions it became apparent that there was a support gap for IJB's and the work of HSCP's to be able to share information and collaborate with peers.

The Glasgow HSCP Lead for Equalities and Fairer Scotland worked with the Independent Scottish Care Lead, within Scottish Borders IJB to pilot a Scottish IJB/HSCP Equality Peer Support Network. The Network met throughout 2023, initially to support responses to compliance requests from the EHRC and then moving into a structured peer support network.

The Network meets every two months, agendas are structured around a formalised presentation on issues of national priority, for example the Racialised Health Inequality Commission, NHS Education Scotland training developments, Public Sector Equality Duty review and the EHRC. This is followed by an opportunity to share good practice and raise issues of shared concern for peer support and guidance. AHSCP is an active member within the network and regularly offers agenda items and topics for discussion. The network has had a positive impact in ensuring better joint working between HSCPs, shared learning and collaboration and increased information sharing with the EHRC and Equality Unit of the Scottish Government. The network has also helped to support the development of the new set of Equality Outcomes.

Engagement and Consultation

Engaging with communities, people who use services, carers, staff, providers and the third and independent sectors is essential if we are to deliver the best services for Angus. Engagement and Involvement has been and will continue to be an ongoing activity. It serves to ensure that we understand our localities, and that we are working in the right direction with consensus. We will therefore ensure that equality monitoring is an integral part of our activities to allow us to routinely assess their accessibility and the status of equal opportunities in Angus.

There has been a wide range of engagement work across Angus Health and Social Care Partnership so far in 2025. When conducting engagement activities, we use a variety of communication methods e.g. Easy-Read versions, online and face to face sessions, online surveys via the **Angus Council Engage platform**, online discussion, distribution of paper copies of the survey (available in large print, Easy-Read, BSL and different languages on request), advertising posters, QR codes, **website** and social media adverts.

Social Media

We launched the AHSCP Facebook page on 25 July 2017 and as of 1st July 2025 we have almost 5000 followers, with more joining each week. Of the 4981 followers, 87.7% are women and 12.3% are men. The largest percentage of female and male users are aged between 35-54.

We have an X account with 507 followers and an Instagram account with 130 followers. The AHSCP website was launched in 2018 and currently receives around 1500 visitors per month from July 2024 to July 2025. AHSCP launched a podcast "Getting to Know Angus Health and Social Care Partnership' in 2023. 20 episodes have been released so far, with 28.9k plays since launching the podcast channel. The schedule of new episodes is available via the AHSCP website.

Local Scottish Care Integration Lead

The AHSCP Local Scottish Care Integration Lead has been supporting the following initiatives:

- Facilitation of Care Home Activity Network (CHAN) meetings, which provide regular opportunities for care home residents and activity coordinators to connect, share ideas and experiences, and participate in social and recreational activities. In addition, the CHAN (comprising of activity coordinators, Scottish Care, NHS Tayside, AHSCP, and Angus Alive) is currently planning their second event, scheduled for September 2025. This event will be open to all care home residents and staff across Angus and will offer a range of inclusive activities centred around the theme of Music and Movement, delivered in a community setting.

- Continued collaboration with care homes and key stakeholders to ensure that resident inclusion continues to be recognised and upheld within the implementation of the My Health, My Care, My Home framework.
- Delivery of a weekly bulletin for independent care providers and other key stakeholders.
- Facilitation of provider forums for independent care providers, creating enhanced opportunities for integration, information exchange, and shared learning, all of which contribute to improved experiences for residents and service users.
- The Independent Sector Lead acts as the representative for independent care providers and their residents/service users within the Integration Joint Board, Strategic Planning Group and a variety of other workstreams and strategic meetings to ensure their views are appropriately represented within AHSCP.

Training, Development and Resilience

Following the review of compliance with the Equality Act conducted by the EHRC in 2022, there has been significant work within AHSCP to improve practice in relation to equality mainstreaming, this includes further training for staff, the development of an Equalities Team to build resilience around equalities support, improved inclusive communication support including support with translation and interpretation bookings, improved governance around the completion of equalities training and Combined Impact Assessments, the creation of an Equalities mailbox for any equalities related queries or support requests.

Some of the key developments include:

- New Assessments – A Health Impact Assessment and Climate Sustainability Impact Assessment have been developed. These assessments will help to identify any wider health impact or climate impact which could impact those with protected characteristics. Is it expected that these new assessments will compliment the Combined Impact Assessment. Training was delivered to staff on both of these new assessments in May-June 2025.
- Regular staff training sessions - Equality training sessions have been offered to all staff, this training is offered regularly, and specific training sessions have been delivered to individual teams.
- Ongoing review and improvement of learning materials to ensure it remains currently and reflects current.
- Development of an AHSCP Equality Action Plan to support regular reporting and updates on improvement work being carried out by the AHSCP Equalities Team. As a result of completing actions from the action plan, in June 2023, the EHRC confirmed that AHSCP were fully compliant with the legislation. In February 2025,

the EHRC conducted a compliance assessment of all health and social care partnerships. In March 2025, AHSCP received notification that it remains fully compliant.

- Ongoing monitoring of progress with the completion of Equality Impact Assessments for each area of development within the Strategic Delivery Plan is now mainstreamed within each internal progress update report. This helps to ensure that ensure that equality, inclusion and human rights are prioritised throughout each project and development area with the Partnership.
- AHSCP Equalities Team has been developed to build resilience around equality support. The team meets regularly to ensure that progress is being made with the equality outcomes, to share key developments, learning and best practice and to progress with improvements as detailed within the AHSCP Equality Action Plan.
- Ongoing and regular support from the EHRC via the IJB/HSCP Equality Peer Support Network.
- Additional training on EIAs and the new AHSCP Combined Assessment template was delivered to staff in 2023 and 2024.

Equality Outcomes

Equality Outcomes are results which we aim to achieve in order to further one or more of the needs in the general duty, that is to: eliminate discrimination, advance equality of opportunity and/or foster good relations. By focusing on outcomes rather than objectives or outputs, we aim to bring practical improvements in the lives of those experiencing unlawful discrimination and disadvantage.

AHSCP is responsible for setting and delivering on our Equality Outcomes. These outcomes are aligned to our strategic plan, with specific equalities perspectives, and identify to which National Outcomes they relate. Equalities engagement took place during June-July 2025 where we asked the public what key areas we should focus on for the next 4 years. A new set of Equality Outcomes has been developed following the analysis of the results of the engagement as well as through working with Angus Council and NHS Tayside Equalities Teams and the wider HSCP/IJB equalities network. The new set of outcomes has been developed to support the current Strategic Commissioning Plan and Strategic Delivery Plan.

The new Equality Outcomes (2025-2029) are:

- **Angus Health and Social Care Partnership will continue to work towards all services being accessible, inclusive and responsive to meet the needs of people with a protected characteristic(s).**
- **Angus Health and Social Care Partnership will continue to promote an equality driven and inclusive culture within the organisation and actively challenge any forms of discrimination.**

- **Angus Health and Social Care Partnership will actively involve people, communities, and staff—including those with lived experience—in shaping services to reflect the diverse needs of the Angus population, while empowering individuals to make informed choices and to maintain control over their own lives.**
- **Angus Health and Social Care Partnership will proactively enhance our collection, analysis, and application of equalities data in order to inform equitable decision-making and reduce health inequalities.**

We believe we will have started to realise our vision and created improved outcomes for the people of Angus, taking cognisance of their protected characteristics, if:

- more people live longer in good health;
- people are able to access support to live independently within their own communities, with support for more complex needs accessible within an appropriate environment;
- more people are cared for at home;
- more people are involved in the design and delivery of their own care;
- carers feel supported.

Equality Impact Assessments

We are committed to carrying out Equality Impact Assessments (EIAs), Fairer Scotland Duty Assessments (FSDs) and Child Rights and Wellbeing Impact Assessments (CRWIA) on our strategies, policies and services to ensure that there is no unlawful discrimination in the way that they are designed, developed or delivered and that, wherever possible, equality is promoted. We have developed a 'Combined Impact Assessment' template which includes the three assessments detailed above, EIA, FSD and CRWIA.

In meeting the terms of this commitment, in a proportionate way, we will ensure that:

- Combined Impact Assessments will be carried out on all relevant strategies, policies and services;
- We also undertake Combined Impact Assessments on any potential budget savings.

The AHSCP Equality Team actively support services, and project leads across the Partnership to understand and engage with the Combined Impact Assessment process. This ensures projects, practices and policies have a robust Combined Impact Assessment in place which is used to aid decision making.

- In 2024, 9 Combined Impact Assessments were completed and published.
- From January 2025- June 2025, 3 Combined Impact Assessments were completed and published.

AHSCP often work jointly with partner organisations. Where a policy, practice or project is being led by a partner organisation, AHSCP will work to ensure we meaningfully contribute to their Equality Impact Assessment process to ensure it complies with the Public Sector Equality Duty.

Completed assessments can be found via the AHSCP website **www.angushscp.scot/equalities**

Service Monitoring

To ensure that services are delivered in an effective, non-discriminatory way, we expect Angus Council and NHS Tayside to equalities monitor service users in line with EHRC recommended classifications. We will monitor equalities complaints to ensure no-one receives a less favourable service on the grounds of their protected characteristics.

Access to Information

The launch of the AHSCP website in 2018 has increased our ability to share information with the public. The website is updated regularly and includes information such as:

- AHSCP news
- Ongoing projects and developments
- National updates and policy changes
- Feedback and consultations
- Strategic Commissioning Plan
- Equalities reporting and completed assessments
- Performance information
- IJB membership information
- Service information
- Localities Information
- Care Opinion links
- AHSCP Podcast

We also continue to deliver:

- Regular engagement via GP Cluster meetings and Angus Clinical Partnership Groups.

- Online questionnaires developed and available via the Angus Council Engage platform.
- Regular press releases issued.
- Regular staff briefings issued.
- Senior Managers hold regular meetings with staff.
- Regular updates in the Integration Matters staff newsletter.
- Members of the public can observe IJB meetings.
- IJB papers are available on the Angus Health and Social Care Partnership webpage hosted by Angus Council
- Regular AHSCP social media updates and information sharing
- Translation and interpretation support to Angus Health and Social Care Partnership and Angus Council Services.

As of July 2025, Voluntary Action Angus have 360 third sector organisations in Angus which are registered and listed on their Community Connector.

We are committed to ensuring that all members of the community have equal access to information regarding the IJB, regardless of race, disability, gender, religion/belief, age, sexual orientation, marital/civil partnership status, gender re-assignment, and pregnancy and maternity.

In meeting the terms of this commitment, we will endeavour to ensure that:

- All members of the community are able to access information about AHSCP via our website. Improvements were made to the accessibility of the website which allow users to change language, amend text size and amend viewing options for certain file types. Information can be found on the accessibility page.
- Facilities to interpret information we produce are made available wherever a need is identified i.e., translation into other languages, audio tapes, BSL videos, Easy-Read, hearing loops, and facilities for blind and visually impaired people.
- Employees are provided with an awareness and an appreciation of the importance of ensuring that the whole community has access to our information.
- Non-stereotypical images of equality groups in publicity materials, such as leaflets, are promoted.

In terms of this document, the Equalities Mainstreaming Report and Equality Outcomes can be found on our webpages - see web address below, or alternatively if you would like a copy, please write to us at the following address:

AHSCP Equalities Team
Angus Health and Social Care Partnership
Angus House, Orchardbank, Forfar DD8 1AN

Tay.angushscp@nhs.scot
www.angushscp.scot

The content of this publication, or sections of it, can be made available in alternative formats or translated into other community languages. Please contact Angus Health & Social Care Partnership, Angus House, Orchardbank, Forfar, DD8 1AN Tel 01307 492560 for further information or email Tay.angushscp@nhs.scot

If you are or you know someone who is a BSL user who would like to contact us to request a copy of this report in an alternative format, please contact us on 01307 492560 via the Contact Scotland BSL Service, the on-line British Sign Language interpreting video relay service to provide your feedback, on **https://contactscotland-bsl.org** or call 0131 510 4555.

Appendix 1

Legislative Background – Further Information

Equality Act

The Equality Act 2010 was passed with the aim of consolidating and harmonising existing equalities' legislation and strengthening the law to support progress on equality.

The Act prohibits:

- direct discrimination
- failure to make "reasonable adjustments" for people with a disability
- indirect discrimination
- discrimination by perception
- discrimination by association
- harassment and
- victimisation

The Duty must be taken into account by public bodies in respect of how the work they do impacts on:

- The groups they provide services to
- The people they employ
- The partners they work jointly with
- Those from whom they contract and procure services

Note:

(i) Only the first requirement of 'eliminating unlawful discrimination, harassment and victimisation' applies in the case of marriage/civil partnership.

(ii) 'Due regard' means giving appropriate weight to promote equality in proportion to its relevance.

(iii) None of the employment related requirements under the Equality Act 2010 apply to AHSCP. With limited exception, staff in the Angus Health and Social Care Partnership will continue to be employed by NHS Tayside and Angus Council and will continue to be included within their own respective Equality Outcomes and Mainstreaming reports.

Fairer Scotland Duty

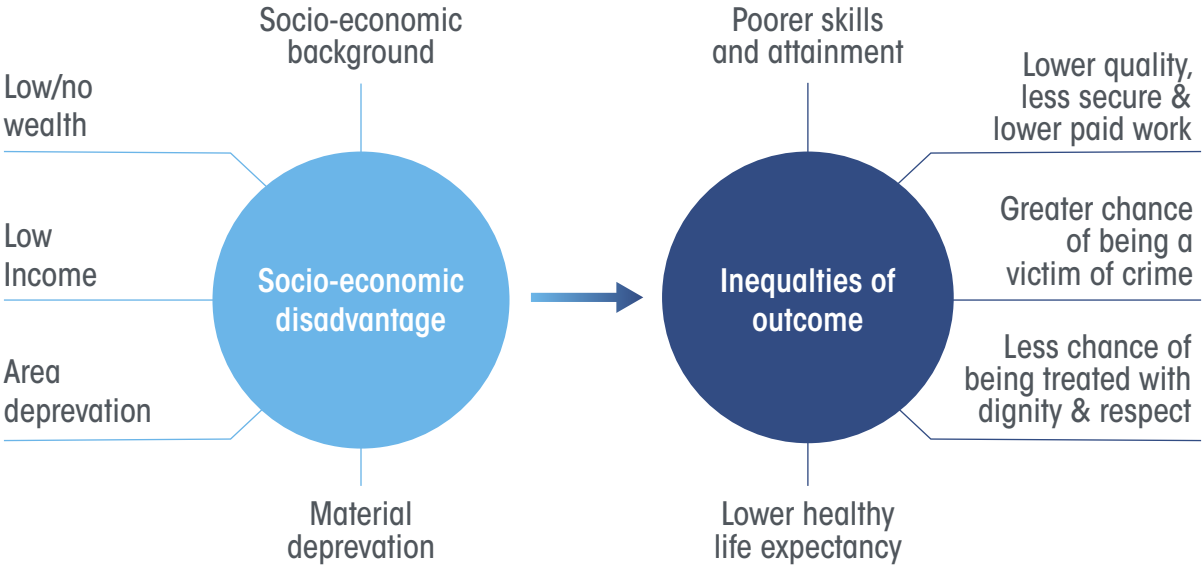
The main points to note are:

- To fulfil their obligations under the Duty, public bodies must be able to meet the key requirement in each case:
- To actively consider how they could reduce inequalities of outcome in any major strategic decision they make; and to publish a written assessment, showing how they've done this.

- The Fairer Scotland Duty applied from 1 April 2018 and does not cover decisions made before this date.
- The Duty also does not override other considerations – such as equality or best value.

The Equality and Human Rights Commission (EHRC) is the Regulator for the Fairer Scotland Duty (as well as the overarching Equality Act 2010), and is closely involved with monitoring and the development of best practice for the Duty.

Fairer Scotland Duty - diagram of some of the impacts of socio-economic disadvantage on outcomes for people experiencing them:



The National Outcomes

The nine national health and wellbeing outcomes as set out by the Scottish Government:

1. People are able to look after and improve their own health and wellbeing and live-in good health for longer.
2. People, including those with disabilities or long-term conditions or who are frail or able to live, as far as reasonably practical, independently and at home or in a homely setting in their community.
3. People who use health and social care services have positive experiences of those services, and have their dignity respected.
4. Health and social care services are centred on helping to maintain or improve the life of people who use those services.
5. Health and social care services contribute to reducing health inequalities.

6. People who provide unpaid care are supported to look after their own health and wellbeing, including to reduce any negative impact of their caring role on their own health and wellbeing.
7. People using health and social care services are safe from harm.
8. People who work in health and social care services feel engaged with the work they do and are supported to continuously improve the information, support, care and treatment they provide.
9. Resources are used effectively and efficiently in the provision of health and social care service.

Appendix 2

Snapshot of Angus – Further Information

The table below provides a summary of the services and functions delegated to Angus IJB.

Adult Social Care Services

- Adult and young unpaid carer support services
- Adult Support and Protection
- Reablement, adaptations and telecare
- Drug and Alcohol Services
- Care and support for adults with physical and learning disabilities
- Care at home services
- Community mental health services
- Social care services provided to adults and older people
- Respite provision

Community Health Services

- Community based Allied Health Professionals for example:
  - Occupational Therapy
  - Physiotherapy
- Community Hospital Inpatient Services
- Community Pharmacists
- District Nursing Services
- Minor Injury and Illness Services
- Palliative Care
- Angus Primary Care
- Services to promote public health and improvement
- Community Learning Disability Services