Foreword

We are pleased to report on the progress we have made since publishing our Equality Mainstreaming Report in 2017.

Healthcare Improvement Scotland is an organisation with many parts and one purpose - better quality health and social care for everyone in Scotland. We understand that in order for us to achieve this, we must play our part to tackle the inequalities that exist in Scotland.

Embracing, understanding and mainstreaming equality across our organisation is therefore key to achieving our commitment to support the highest standards of health and social care in Scotland.

This report sets out how Healthcare Improvement Scotland works to ensure equality is embedded into our work, and provides the information we are required to publish by the specific duties of the Equality Act 2010.

This report also provides an update on the progress of our Equality and Diversity Mainstreaming Action Plan 2017–2021, which we developed to pull together all the actions arising from our 2017 Equality Mainstreaming Report.

Included within this report are examples of the impact our actions have had such as the reduction of our gender pay gap and the small improvements to the diversity of our workforce. There is also an example of how we have supported our NHS colleagues to advance equality.

Moving forward, we are aware that a lot of work remains to be done to get to where we want to be, which is to be an exemplar organisation, not only within the NHS but also within the wider public sector. We are encouraged by the progress we have made and remain fully committed to supporting Healthcare Improvement Scotland to become an organisation recognised as being a champion in relation to equality and diversity.

Carole Wilkinson
Chair, Healthcare Improvement Scotland

Robbie Pearson
Chief Executive, Healthcare Improvement Scotland
Introduction

In April 2017, the Equality Act 2010 (Specific Duties) (Scotland) Regulations 2012 (as amended) required us to:

- publish a report on how we mainstream the equality duty
- report progress on the equality outcomes we set in 2013
- publish new equality outcomes for 2017–2021
- assess and review our policies and practices
- gather and use our employee information
- publish gender pay gap information
- publish a statement on equal pay between women and men, people who are disabled and people who are not, and people who fall into a minority racial group and people who do not
- consider award criteria and conditions in relation to public procurement
- use information on Board members gathered by the Scottish Ministers, and
- publish all this information in a manner that is accessible.

This report provides an update on the progress of the equality outcomes we set in 2017, along with information in relation to how we have continued to take steps to eliminate discrimination, advance equality, tackle prejudice, and promote understanding between people who share a relevant protected characteristic and people who do not.

Information relating to our workforce, including our equal pay data and employee demographic data is collated and published annually, and links to these reports are included below.

Workforce Equality Monitoring Report 2016/2017
www.healthcareimprovementscotland.org/previous_resources/policy_and_strategy/workforce_monitoring_2016-17.aspx

Workforce Equality Monitoring Report 2017/2018
Equality outcomes (2017–2021) update

The Equality Act 2010 (Specific Duties) (Scotland) Regulations 2012 required us to publish equality outcomes we intended to achieve over the period April 2017 to April 2021. We set the following four equality outcomes.

1. Disabled staff and job applicants experience improved support and career opportunities within Healthcare Improvement Scotland.
2. Lesbian, gay, bisexual and transgender (LGBT) people who currently work with Healthcare Improvement Scotland, who wish to work with us or who wish to volunteer with us, experience improved opportunities.
3. Minority ethnic people’s views and experiences are better represented in the design, development and delivery of Healthcare Improvement Scotland’s work.
4. Healthcare improvement Scotland will maintain an inclusive culture and environment, where staff understand the importance of equality and diversity in their work and interactions with others, and feel valued, respected and supported.

We have taken a number of actions over the past two years to help achieve these outcomes and a summary of some of our activities for each outcome is detailed below. A complete review of our equality outcomes will be undertaken and published by April 2021.

### Equality Outcome 1

Disabled staff and job applicants experience improved support and career opportunities within Healthcare Improvement Scotland.

Since April 2017, we have shared information in relation to a range of conditions with staff, seeking to promote understanding of different disabilities and to tackle any stigma that might exist around discussing disability.

Staff feedback has been very positive, with several staff sharing personal stories about their own experience of various different conditions.

**Scottish Stammering Network event**

For example, in October 2018, our Equality and Diversity Advisor facilitated an interactive breakout session at the Scottish Stammering Network’s national annual event, exploring the Equality Act 2010 definition of disability and discussing whether stammering might meet that
definition. The event was attended by over 80 people and feedback from the session was extremely positive. A staff intranet news article relating to the event led to members of our staff feeling more confident to talk about how stammering has had an impact on them. Staff members commented how great it was to read about how Healthcare Improvement Scotland is committed to supporting everyone, and were particularly encouraged to have stammering highlighted in such a way.

**Mental health awareness**

Also, during Mental Health Awareness Week in both 2017 and 2018, we showed our support and took action to improve understanding of mental health and tackle stigma.

In 2017, we embraced the Mental Health Foundation’s “Surviving or Thriving” campaign. Information stalls were set up in both our main offices and support materials were shared electronically with all staff.

In 2018, we embraced See Me’s “Pass the Badge” campaign. See Me is Scotland’s programme to tackle mental health stigma and discrimination. The Pass the Badge campaign seeks to raise awareness of the fact that we all have mental health and it encourages people to feel more comfortable and confident to talk about mental health.

There was overwhelming support from staff for the Pass the Badge campaign. Staff used social media to share pictures of themselves passing their badges, having conversations about mental health and taking part in activities that help them to maintain good mental health. The in-office conversations, the personal stories shared on social media, and the pictures taken demonstrated strong support for the campaign and each other’s wellbeing.

Wendy McDougall, who is a Project Officer in our Standards and Indicators Team, is also a See Me Community Champion. See Me Community Champions are trained leaders and activists who play a lead role in stopping mental health stigma and discrimination in their local communities. Wendy has been a strong supporter of our work to advance equality within Healthcare Improvement Scotland and we are delighted to include a poem she composed about her own experience of mental ill health.
Mental illness doesn’t discriminate

Do you think I chose this? No, it chose me
Mental, physical illness – the parity
What’s invisible to you, eats me from inside
There’s nowhere to run, nowhere to hide
Yes, I understand the challenge you face
Unconscious bias, like religion or race
But I don’t want to hurt you or anyone else
So please don’t judge me
My thoughts are about myself
I worry that I’m not good enough for this world
And constantly compare
What’s my purpose here? And how do I fair?
Tea and sympathy doesn’t cut it when irrational thoughts take over
So, raising awareness of poor mental health is my four leaf clover
You see, the more society embraces that we’re all unique
The language will diminish, no more “psycho”, “schizo”, “freak”
So all I can ask to plant the seed in your mind
Is my wish for all of you, stop the stigma, please be kind.

Wendy McDougall
Community Champion, See Me Scotland
Disability Confident logo
In June 2017, we successfully obtained consent to use the government’s Disability Confident logo in our job adverts for a period of two years. The Disability Confident scheme is designed to help employers recruit and retain disabled people, helping to remove barriers to their participation. As part of this scheme, we are committed to:

- interviewing all disabled applicants who meet the minimum criteria for a job vacancy and to consider them on their abilities
- discussing with disabled employees, at any time but at least once a year, what we can do to make sure they can develop and seek to progress if they wish to
- making every effort when employees become disabled to help them stay in employment
- taking action to ensure that all employees develop the appropriate level of disability awareness needed to make these commitments work, and
- reviewing these commitments every year, assessing what has been achieved and planning ways to improve on them.

Glasgow Centre for Inclusive Living
Our staff supported the shortlisting and recruitment process for the Glasgow Centre for Inclusive Living’s NHSScotland Professional Careers Programme. This programme provides disabled graduates with an opportunity to gain work experience within NHSScotland.

We were delighted to welcome our second graduate, Allan Barr, from the programme to our organisation in 2018. Allan was happy to share his experience with us so far, as detailed below.

“I am a project officer working with the Healthcare Improvement Scotland (HIS) Standards and Indicators team. I am also a disabled person, supported by Glasgow Centre for Inclusive Living (GCIL): a disabled person’s organisation which promotes the social model of disability. GCIL recognises that a person’s impairment is not what disables us within society: structural inequality is what disables people when compared to non-disabled people. Physical barriers, limited access to education and employment, and social attitudes towards disability are just some of the factors which define the model promoted by GCIL.

I have encountered all of these barriers when trying to attain a meaningful career. I have previously worked as an administrator for a number of different organisations, but have found it difficult to advance in my career due to the barriers which define the social model. This has, at times, had a negative impact on my confidence and self-worth. The opportunity given to me to learn and develop as a project officer with Healthcare Improvement Scotland is
helping me to tackle these barriers: increasing my confidence and offering me valuable opportunities to gain experience.

I have worked with the Standards and Indicators team since April 2018, and over this time I have been accepted and welcomed as an equal member of my team. I have been given responsibility for producing Equality Impact Assessments, which support the development of standards and indicators, and I am currently working on a new review framework. I have also helped to facilitate a focus group and participated in training opportunities.

This has only been possible, however, because I feel supported and respected by my colleagues. I am comfortable pushing myself to accept new tasks and know that my confidence and self-esteem is growing each day I work with the Standards and Indicators team. It is my hope that over my contracted two years of employment that I will continue to learn and develop, gain new skills and continue to increase in confidence. I also consider it my role to promote the value of disabled people within the workplace: potentially helping to change possible negative latent attitudes towards disabled people. These may be held amongst members of the public and staff who may have had limited interaction with disabled people.

The short time I have worked for the organisation has been the happiest of my working life. I have never before felt so respected, valued and equal to my colleagues. It is with the support of Glasgow Centre for Inclusive Living and through the positive culture of HIS that I have become hopeful for my future career.”

Since we published our Equality Mainstreaming Report in 2017, the percentage of successful job applicants that identified as having a disability has increased by 1.4%. The percentage of our staff identifying as having a disability has also increased by 1.09%.

Our work to advance equality for disabled staff and job applicants will continue and be reported by April 2021.

**Equality Outcome 2**

Lesbian, gay, bisexual and transgender (LGBT) people who currently work with Healthcare Improvement Scotland, who wish to work with us or who wish to volunteer with us, experience improved opportunities.

**LGBT Youth Scotland**

LGBT Youth Scotland co-ordinates LGBT History Month in Scotland, and in 2017 we linked in with them to seek their permission to use their materials to promote this month within Healthcare Improvement Scotland, and also externally using social media. LGBT Youth Scotland kindly agreed and during LGBT History
Month we added their promotional material to all our computer desktop backgrounds. We also shared information about LGBT history, information about the experience of LGBT people at work and information about their experience of accessing health and care services. Information about organisations that support LGBT equality was also shared. Staff feedback on this activity was extremely positive, with many expressing their happiness at seeing visual indicators of support for LGBT equality within their workplace.

In February 2018, we again linked in with LGBT Youth Scotland to use their updated promotional materials as we had previously. Additionally, we promoted our own rainbow flag campaign, which was intended to promote LGBT equality during LGBT History Month. Embracing Stonewall Scotland’s “Come out for LGBT” tag line, we asked staff to show their support for LGBT equality by sharing their pictures holding a rainbow flag. These pictures were shared internally and externally using the intranet, email and social media. Again, the response from staff to this campaign was extremely positive.

[Image]

**LGBT staff network**

Also, during February 2018, our organisation formally joined the LGBT staff network which is already attended by NHS National Services Scotland, NHS Health Scotland and Scottish Ambulance Service staff. The LGBT staff network meets regularly and is attended by staff who are LGBT as well as staff who are interested in supporting the advancement of LGBT equality.

In September 2017, we submitted our first entry to Stonewall’s Workplace Equality Index (WEI). The WEI is a benchmarking tool for employers to measure their progress on lesbian, gay, bisexual and trans (LGBT) inclusion in the workplace. Stonewall only publish information about the top 100 employers in the UK and while we did not place in the top 100, completing the index provides us with a benchmark from which we can measure our progress towards achieving our equality outcome. We submitted our second entry to the WEI in September.
2018 and we look forward to learning about how we have progressed and what areas require additional work.

Since we published our Equality Mainstreaming Report in 2017, the percentage of job applicants that identified as LGB has increased by 2.1%. The percentage of our staff that identify as LGB increased by 1.3%. We continue to have no staff who identify as trans, however our most recent data shows that 0.5% of staff shortlisted for an interview identified as trans. Previously, no staff identifying as trans had been shortlisted for an interview.

We have a pool of 42 public partners, who are members of the public who are involved in our work as volunteers. They play a pivotal role in helping shape our own work and help to ensure it reflects the needs of the people who use health and care services in Scotland. In April 2018, 39 of our 42 public partners completed and returned an equality monitoring form; 10.3% of respondents identified as LGBT.

Our work to advance equality for LGBT people who currently work with us, who wish to work with us, or who wish to volunteer with us, will continue and be reported by April 2021.

Equality Outcome 3

Minority ethnic people’s views and experiences are better represented in the design, development and delivery of Healthcare Improvement Scotland’s work.

Public involvement is an integral part of how we work. We promote good practice, exchange ideas and offer new approaches on how to involve people in the design and development of health and care services. However, we recognise that unintentional barriers can often exist, preventing certain groups of people from sharing their views using the more traditional methods of engagement.

For example, we have a pool of 39 public partners, who are members of the public who are involved in our work as volunteers. They play a pivotal role in helping shape our own work and help to ensure it reflects the needs of the people who use health services in Scotland.

Engagement with under-represented community groups

To help improve the diversity of our public partner cohort, prior to advertising the opportunity to get involved, engagement with under-represented community groups took place through facilitated discussion groups, social media and meetings with third sector organisations that represent the interests of those protected characteristic groups. Additionally, the recruitment advert highlighted our desire to attract expressions of interest from those groups currently underrepresented within the public partner cohort.

Unfortunately, no applications for the public partner role were received from people identifying as minority ethnic. We are aware that some of the minority ethnic people we engaged with requested application forms but this did not result in a completed application being returned. We recognise that aspects of the public partner role may mean that certain
groups of people are less likely to be able to get involved and we seek to ensure their views are represented through other engagement methods.

New approach to engagement

For example, when developing the draft Cervical Screening Standards, we carried out an equality impact assessment to help consider how these standards might be received fairly by everyone. A number of potential issues were identified and action was taken to engage with a number of different groups of people to help improve our understanding of how we might address these issues.

In order to obtain the views of minority ethnic people, staff from Healthcare Improvement Scotland appeared on the Awaz FM radio station to discuss the development of the standards and their importance. Awaz FM is targeted at Asian and African people living in Scotland and is broadcast in English, Urdu, Punjabi, Hindi, Pahari and Swahili. Following the radio appearance, drop-in engagement sessions were subsequently arranged with support from health and care, and community partners.

This new approach to engagement was embraced by staff and has opened up the possibility of further appearances on the radio station for future engagement activities.

Targeted engagement group sessions

Another example of when we have taken steps to ensure the views of minority ethnic people are represented is during the engagement undertaken to produce our Oral Health in Scotland report, which was published in June 2017.

The Scottish Government’s Chief Dental Officer and Dentistry Division approached our Scottish Health Council staff to ask for their assistance with its planned consultation exercise on the future of Oral Health services.

In order to explore the experience of community groups who may experience barriers in accessing oral health services, two engagement groups specifically focused on obtaining the views of minority ethnic people. Engagement sessions were arranged with the assistance of the Central Scotland Regional Equality Council and the Rainbow Muslim
Women’s Group, who are pictured on the front cover of the report along with the Chief Dental Officer and Scottish Health Council staff.

The Chief Dental Officer and Dentistry Division also wanted to obtain the views of parents of young children and this was organised with the assistance of Early Years Scotland and Saheliya. Saheliya is a specialist mental health and wellbeing support organisation for black, minority ethnic, asylum seeker, refugee and migrant women and girls in the Edinburgh and Glasgow area. Early Years Scotland facilitated access to two mother and toddler groups and Saheliya brought together parents from minority ethnic communities, and in particular women who were either refugees, migrants or asylum seekers.

Additionally, when undertaking engagement to gather views on the development of realistic medicine, there was a specific focus to gain the views of minority ethnic people. Realistic medicine is intended to put the people receiving health and social care at the centre of decisions about their care and create a more personalised approach. Aware of potential barriers minority ethnic people may face in relation to realistic medicine, engagement sessions were arranged to gather the views of a range of people.

Support to arrange engagement sessions with minority ethnic people was received from the Rainbow Muslim Women’s Group, the Central and West Integration Network and the Larkhall Gypsy/Traveller Community Group members.

When undertaking public involvement activities, our staff endeavour to ask attendees to complete equality monitoring forms. However, it is not always appropriate for many of the engagement activities undertaken across the organisation. There are many reasons why it is not always possible or appropriate to ask people to complete an equality monitoring form but using the form when it is possible gives us a good indication of who is currently taking the opportunity to get involved with our work and who is not. 2.5% of respondents who completed an equality monitoring form identified as minority ethnic, with an additional 0.6% identifying as having a mixed background.

Our work to ensure that minority ethnic people’s views and experiences are represented in the design, development and delivery of Healthcare Improvement Scotland’s work continues and will be reported by April 2021.

Equality Outcome 4

Healthcare Improvement Scotland will maintain an inclusive culture and environment, where staff understand the importance of equality and diversity in their work and interactions with others, and feel valued, respected and supported

To help maintain an inclusive culture and working environment where staff understand the importance of equality and diversity, we have encouraged staff to take part in awareness raising activities such as the Pass the Badge campaign and rainbow flag campaign as already
detailed. These activities are intended to help tackle prejudice and promote understanding between people who share a protected characteristic and people who do not.

**Dignity at work**

In 2017, we refreshed and promoted guidance intended to support and improve dignity at work. We also delivered multiple training sessions aimed at tackling bullying or harassment at work. During these sessions each of the protected characteristics were discussed and staff were made aware of the potential impact of behaviours inappropriate to the workplace. To help ensure as many staff as possible could attend the training, sessions took place on various days and times over both our main offices. Staff feedback from the sessions was very good, with many reporting an improved awareness of the importance of inclusive behaviours.

Additionally, the all staff equality and diversity induction sessions continue to receive positive feedback, with staff consistently reporting improved knowledge and understanding of how they can contribute to creating an inclusive culture and environment.

**The Margaret McAlees Award**

In August 2018, in honour of our late colleague Margaret McAlees, we established the Margaret McAlees Award, in collaboration with Unison, Scottish Health Care Branch, who Margaret was a steward for.

Margaret was a member of a number of groups that sought to promote an inclusive culture and positive working environment and was renowned for her commitment to advancing equality and promoting diversity. It was therefore fitting that the Margaret McAlees Award recognises an individual or team’s outstanding contribution to advancing equality and diversity within Healthcare Improvement Scotland.

Healthcare Improvement Scotland staff were invited to submit nominations for the award, including evidence that one of the following criteria was met:

- you have championed equality and diversity within the organisation
- you have supported inclusion, and contributed to creating a working environment where people are treated with dignity and respect
- your work contributes to HIS achieving its aim to be an organisation that fully embraces equality and values diversity
- you have taken steps to consider the needs and experiences of the diverse Scottish population, including engaging with people and third sector organisations that represent the interests of diverse groups, and
- you have shown outstanding devotion to enhancing and contributing to the equality and diversity agenda.

However, the proposed criteria were not exhaustive, and any nomination which demonstrated an outstanding contribution or commitment to enhancing equality was also welcomed.
Twelve nominations from across Healthcare Improvement Scotland were received. Each of the nominations exemplified different approaches that support people being valued, respected and treated with dignity in a number of different settings.

While the judging panel found it very hard to decide on a winner, every member gave marks to eventual winners, the Focus on Dementia team, because they could all see how dedicated the team is to helping improve the lives of people living with dementia.

In addition to their core work, the team was recognised for going above and beyond the call of duty, helping to reduce stigma, and promote understanding, inclusiveness and equality for people living with dementia. The team undertook voluntary work and numerous charitable and fundraising events in their own time. They involved people living with dementia, their carers and family in various activities, undertaking meaningful participation. This participation influenced their work, ensuring it remained focused on what matters most to people living with dementia. The team’s work has helped make a very positive difference to the lives of people living with dementia.

Our work to maintain an inclusive culture and environment, where staff understand the importance of equality and diversity will continue and be reported by April 2021.
Mainstreaming examples

The following examples illustrate how we are working towards mainstreaming equality across our organisation. While this is not an exhaustive list of examples of what we do, it provides information on a range of different areas of our activity.

Work experience

During 2018, we supported a number of work experience opportunities for young people from schools in Glasgow and Edinburgh. Our young workers spent time gathering supplies for conferences, stocktaking, and performing social media and website tasks. They also got to learn about how their views, and the views of people who use health and care services, can inform what we do.

Our work experience pupils were also given the opportunity to learn about quality improvement methodology through taking part in fun tasks such as building Mr Potato Head figures.

Some of the pupils were also given the opportunity to take part in mock interviews, helping them to understand what is expected during competency-based interviews. Feedback from pupils highlighted improved confidence and a better understanding of the range of roles available within the NHS.

James Stewart, one of our Public Involvement Advisors, supported one young person for a week, arranging their daily activities as well as acting as a mentor to them. James said, “It was wonderful to be able to give a young person the opportunity to learn about the work of our organisation and to let them meet so many of our staff in a range of roles. The impact for the young person is that it has reaffirmed their intention to apply to study medicine when they leave school, but with an improved awareness of other NHS options available to them.”

Feedback from our work experience was positive and it will be used to help inform how we support young people in the future.
Modern Apprentice

In 2018, we were extremely pleased to recruit Emma Green as our Modern Apprentice. Emma is working as a Trainee Administrative Assistant within the Quality Assurance Directorate and has undertaken an SVQ Level 3 in Business Administration. Emma was happy to share with us her experience of working for Healthcare Improvement Scotland and this is detailed below.

“I wasn’t sure what I wanted to do upon leaving school and I had no support from the careers advisor at my school as I didn’t want to go to university. I decided to get an apprenticeship as it meant I was getting experience, getting paid and getting a qualification at the end of it. I looked on an apprenticeship website nearly every day from December 2017 to check for any new opportunities. The ones that appealed to me I applied for and I got a few interviews. This helped me a lot before I applied to work for Healthcare Improvement Scotland (HIS) as I had then got experience of interviews so found it easier each time.

I started working at HIS straight after finishing my sixth year at high school, it was my first full time job. The expected start date for this job was in April 2018 but due to me still finishing my exams and wanting to attend my prom etc, it wasn’t possible for me. HIS were so accommodating about this and let me choose my start date as they understood that I wanted to complete my final year at school.

My first day was scary as I had no knowledge of working full time or doing an apprenticeship so I had no idea what to expect. I am so happy to have fitted in so quickly and to be working with such a great team within the Quality Assurance Directorate (QAD). After starting in June I found my first month or two quite hard as I wasn’t getting much work and found myself to be quite bored. I spoke to my tutor about this, who comes in every two weeks for my apprenticeship, and she then met with my line manager and mentors. After my tutor explained that I was capable of doing more, I started to get more opportunities to take on additional work.

My tutor, Beverley, comes to our office every second week and helps me complete my units. I have nine units in total to complete throughout 12 months and then I gain the qualification. Beverley checks my progress and looks at the evidence I have from any projects that I have been working on. This is then marked against the standards of the units and once I have enough evidence I can mark off a unit as complete. The evidence I need for the units contain a mix of theory work and practical. I completed all nine units on 6 February 2018 after only doing the course for 6 months!

My biggest achievement so far in the organisation is becoming a SOURCE (our intranet) super user, this gave me the opportunity to create the Quality Assurance intranet page and host three focus groups before it launched. More recently, I’m delighted to have been successful in achieving the position of a Band 4 Administrative Assistant for the Transformational Redesign
Unit in the ihub. I’m really looking forward to joining the team and learning more new skills and gaining new experience with a different part of the organisation.”

Internship

In January 2019, we were delighted to welcome Natalia Rodriguez to Healthcare Improvement Scotland to undertake a 3-month internship. Natalia is studying for a PhD, with a focus on interpreting in mental healthcare settings, at Heriot Watt University. During her time at Healthcare Improvement Scotland, Natalia will be working within the Evidence and Evaluation for Improvement Team (EEvIT), supporting them to evaluate the ‘What Matters to You? Day’ (WMTY) initiative that is facilitated by our Person-Centred Health and Care Team. Natalia was happy to share information about her experience with us so far as per below.

“When I first saw the advertisement for an internship position for PhD candidates with Healthcare Improvement Scotland (HIS) I was both thrilled and hesitant about applying. On paper, I was a good candidate, but I wondered if my academic background would be the right fit for the organisation. On the other hand, I was sure that it would be a great opportunity for me and that I definitely wanted to put my research skills to use in public healthcare.

My PhD had already given me the chance to witness the work of the NHS first-hand. For data collection purposes, I observed consultations conducted through spoken-language interpreters in two psychiatric wards within NHS Lothian for over a year. During this time, I not only collected data but also learnt lessons about human resilience that I will always carry with me. Having finished the data-collection work in December, I have now a year of funding left to convert my data into a thesis. So, the chance to work with HIS in this transition stage could not have come at a better time.

I have been assigned to support EEvIT in conducting an evaluation of the WMTY programme, led by the person-centred care team. WMTY is about supporting health and social care staff to have meaningful conversations with people that they care for by asking them what matters to them. I will be conducting interviews with the longest-standing WMTY participants to capture their learning over time and find out what they think could be done differently in the future.

I feel so lucky to have been given the opportunity to work on this project as it resonates a lot with my academic work. I have been a witness to how interpreters bring NHS staff and linguistically and culturally diverse patients together by assisting in clarifying the nuances of mental illness across cultures. To a certain extent, I also witnessed how they ensure that these populations also benefit from person-centred care principles. My work within HIS is
improving my understanding of the philosophy behind person-centred care and improvement work and I certainly plan to ensure that this is reflected in my thesis.

Since starting at HIS, my initial hesitance quickly faded away and I find my work challenging and stimulating. I am very grateful to the EEvIT and WMTY teams for providing me with all the resources, guidance and training that I need to fulfil my internship aims. I am particularly fascinated by the interdisciplinary nature of EEvIT’s work, as the Team Lead, Health Service Researchers, an Information Scientist and a Health Economist constantly work together to get results. Their diversity of skills, along with their constant support, made me feel like a real part of the team from the start as well as improving my confidence about my research skills and potential contribution.”

Corporate Parenting

In 2017, we published our first Corporate Parenting Action Plan. This action plan was developed to help us meet our duties as a Corporate Parent, as set out in Part 9 of the Children and Young People (Scotland) Act 2014. It is the duty of every Corporate Parent to promote the interests of care experienced young people and take steps to improve their opportunities and access to services.

We have taken a number of actions to help us meet our duties as a corporate parent and a report detailing this will be published by April 2020. A couple of examples of what we have done are included below.

Interactive engagement session

In March 2018, staff from our Public Involvement Unit, along with NHS 24 staff, delivered an interactive engagement session for Who Cares? Scotland’s Young Radicals. Who Cares? Scotland is a national voluntary organisation that supports care experienced people to have their voice heard. The Young Radicals is a group comprised of care experienced young people and care leavers, aged from 14 to 28, who meet regularly to discuss issues important to them. As Corporate Parents, we have a responsibility to promote the wellbeing of care experienced young people and to work collaboratively with other Corporate Parents to do this, where there are perceived benefits.

The engagement session provided care experienced young people the opportunity to consider and explore:

- what keeps them well
- where they go for support when feeling unwell
- positive and negative experiences of accessing health and care services, and
- how support could be improved for care experienced young people accessing health and care services.

Twelve care experienced young people attended the engagement session. A short report detailing the views and experiences of the care experienced young people was produced after
the session. This was shared with all staff to help them consider what they can do in their own area of work to help better meet the needs of care experienced young people.

**Care Family Christmas**
Since becoming a Corporate Parent organisation, we have built strong links with Who Cares? Scotland, and as 2018 was their 40th anniversary year, we decided to try to raise enough money to provide at least 40 care experienced young people with a gift on Christmas day during Who Cares? Scotland’s Care Family Christmas dinner. Our Public Involvement Advisor, Graeme Morrison, led the fundraising by organising sponsored staff participation in the Glasgow Santa Dash, as well as arranging bake sales, supporting raffles, and even selling handmade jewellery that was kindly donated by another member of staff. All together Healthcare Improvement Scotland staff, family and friends raised £1,428.37, which greatly exceeded our initial £400 target. Graeme was extremely pleased to share the news with staff from Who Cares? Scotland, who were delighted to receive a big cheque.

**Promoting diversity in public involvement**
Staff from our Scottish Health Council Greater Glasgow and Clyde Local Office supported staff from NHS 24 to help change how they engage with young people.

This built on the work undertaken by our staff during our Young Voices project, taking the learning from the engagement approaches previously used and applying them to inform NHS 24’s approach to youth engagement. This work undertaken by our Scottish Health Council Local Officer supported NHS 24 to embed youth engagement approaches, intended to lead to lasting improvements.

The work also sought to establish lasting relationships with a range of organisations that support young people. For example, our Local Officer supported the planning and delivery of bespoke engagement activities with the West Dunbartonshire Young Carers Group, the Glasgow Youth Council, Who Cares? Scotland’s youth group and students from Kelvin College, building relationships with the staff who support the young people.

Our Local Officer also supported additional engagement activities with young people, to gauge their interest in getting involved in the design and development of NHS 24’s services. Possible engagement approaches that supported the long term involvement of young people were also discussed and the results of these fed into a new organisational approach to youth engagement for NHS 24.
Further to the engagement sessions with young people, and organisations that support their interests, our Local Officer helped NHS 24 to establish a Youth Forum.

NHS 24’s first Youth Forum event took place in June 2018 at the Scottish Youth Theatre. The theme of the forum was mental health and featured a 'Pop up Positivity Cafe', which provided young people with an opportunity to reflect on how everyone can practise positivity in their everyday lives to improve their mental wellbeing. They have since held further forum meetings and will regularly seek the views of young people going forward.

**Equal pay**

As at 31 March 2018, we employed **426 members of staff**: 76.1% of staff identified as women and 23.9% of staff identified as men.

Based on the data in our Workforce Equality Monitoring Report 2017/2018, our mean pay gap has reduced by 1.65%, giving us a mean gap of 19.87%. Our median pay gap has significantly reduced by 10.76%, giving a median gap of 13.42%. This reduction is largely attributable to the more even gender split within the Senior Manager and Clinical pay bands.

Our equal pay statement, which was published as part of our Equality Mainstreaming Report in 2017, has been reviewed in partnership. We remain committed to what was set out in this statement and our work to close our gender pay gap will continue.

Additional work that could have an impact on the pay gap, will also be progressed and monitored by our Staff Governance Committee, for example:

- the development of a standard approach for recruitment which clearly outlines the process to be followed for each grade, job family and level, and
- the development of a training session for managers and interview panel members on the principles and best practice of interviewing.

The impact of this work will be reported by April 2021.

Further analysis of our pay gap as at 31 March 2018, and additional information relating to occupational segregation can be found in our Workforce Equality Monitoring Report 2017/2018.
Contact information

If you have any comments or questions about this report, or if you would like us to consider producing this report in an alternative format, please contact our Equality and Diversity Advisor:

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