



Health Inequalities Impact Assessment (HIIA)

Question 1: Who will be affected by this policy?

All adults in Aberdeen City who either currently use, or care for someone who uses, health and social care services, or may potentially do so in future and children and their families who are supported by school nurses, health visitors, and community nursing including the delivery of routine immunisations.

The Integration Joint Board's (IJB) Strategic Plan 2022-2025 details the strategic direction, over the next three years of the services delivered on its behalf by Aberdeen City Health and Social Care Partnership (ACHSCP). The direction has been proposed following a comprehensive assessment of what has been achieved over the last three years, what our data is telling us, and an analysis of the strategic context within which ACHSCP operates including planned changes that we are aware of, the most significant of which is the proposed introduction of a National Care Service (NCS). We are aware that the implementation of an NCS has the potential to divert attention from the delivery of front-line services and, as such, we have developed a detailed Delivery Plan with specific commitments to ensure we are not distracted from our focus. The overall aim of our Strategic Plan is to set the high-level direction. Within the Strategic Plan we have identified Strategic Aims and Enablers with priorities against each. These will be delivered using a programme/project management approach. A lot of the actions are to undertake reviews of current service delivery so their specific impact cannot be measured at this time. Any significant change as a result of these will be brought to the IJB with an associated, detailed impact assessment. Key aspects of the approach ACHSCP is taking to service delivery are committed to in the Strategic Plan i.e., working collaboratively with patients, clients, service users and carers, making services more accessible and addressing inequality, and ensuring services are rights based and evidence led, however we have also confirmed that we need to manage the expectations of our residents in terms of what can be achieved within the resources that we have.

Question 2: How will the policy impact on people?

Population groups and factors contributing to poorer health	Potential Impacts and explanation why	Recommendations to reduce or enhance such impacts
<p>Age: older people; middle years; early years; children and young people.</p>	<p>The Strategic Plan aims to improve the health and wellbeing of all age groups within Aberdeen City</p>	<p>We will continue to deliver services in response to assessed need regardless of age.</p> <p>We will listen to our community representatives and the voices of those with lived experience to ensure our services meet the needs of people of all ages. We understand that older people may have mobility issues or even be housebound and we will ensure they can still access services. An example of this would be delivering the Covid Vaccinations to the over 80s in their own homes. Similarly younger age groups may require appointments out with school hours and again, where possible we will ensure there is a range of appointment times to suit needs.</p>
<p>Disability: physical impairments; learning disability; sensory impairment; mental health conditions; long-term medical conditions.</p>	<p>The Strategic Plan aims to improve the health and wellbeing of all adults within Aberdeen City including those with physical impairments; learning disability; sensory impairment; mental health conditions; long-term medical conditions.</p>	<p>We will continue to deliver services in response to assessed need regardless of disability.</p> <p>We will listen to our community representatives and the voices of those with lived experience to ensure our services meet the needs of people with all types of disability, offering appropriate adjustments where possible. Again, an example of this is the quiet rooms set up at the mass vaccination centre to accommodate the needs of</p>

		people with autism and Learning disabilities. Improving access to services is one of the priorities within the Strategic Plan.
Gender Reassignment: people undergoing gender reassignment	The Strategic Plan aims to improve the health and wellbeing of all adults within Aberdeen City including those undergoing gender reassignment	<p>We will continue to deliver services in response to assessed need regardless of gender reassignment status.</p> <p>We will listen to our community representatives and the voices of those with lived experience to ensure our services meet the needs of people undergoing gender reassignment recognising that they may require particular service adjustments sensitive to these. We will link with Gender Reassignment groups to understand what particular adjustments may be required and we will train our staff to be aware of these.</p>
Marriage & Civil Partnership: people who are married, unmarried or in a civil partnership.	The Strategic Plan aims to improve the health and wellbeing of all adults within Aberdeen City regardless of marital status	<p>We will continue to deliver services in response to assessed need regardless of marital status.</p> <p>We will listen to our community representatives and the voices of those with lived experience to ensure our services meet the needs of people regardless of their marital status.</p>
Pregnancy and Maternity: women before and after childbirth; breastfeeding.	The Strategic Plan aims to improve the health and wellbeing of all women in Aberdeen City before and after childbirth and when breastfeeding	<p>We will continue to deliver services in response to assessed need to women in all stages of pregnancy and maternity support.</p> <p>We will listen to our community representatives and the voices of those with lived experience to ensure our</p>

		services meet the differing needs of women at all stages of pregnancy and maternity support. This may include accommodating the needs of women who are breastfeeding.
Race and ethnicity: minority ethnic people; non-English speakers; gypsies/travellers; migrant workers.	The Strategic Plan aims to improve the health and wellbeing of all races and ethnicity within Aberdeen City	<p>We will continue to deliver services in response to assessed need regardless of race and ethnicity.</p> <p>We will listen to our community representatives and the voices of those with lived experience to ensure our services meet the needs of people from all races and ethnic backgrounds recognising that some diseases have a higher incidence amongst certain ethnicities. Representatives of the relevant race and ethnic communities in Aberdeen will be invited to sit on the Equality and Human Rights sub group to educate and inform our thinking in this respect.</p>
Religion and belief: people with different religions or beliefs, or none.	The Strategic Plan aims to improve the health and wellbeing of people of all religions and beliefs within Aberdeen City	<p>We will continue to deliver services in response to assessed need regardless of religion and belief.</p> <p>We will listen to our community representatives and the voices of those with lived experience to ensure our services meet the needs of people regardless of religion and belief. Representatives of religious and faith communities in Aberdeen will be invited to sit on the Equality and Human Rights sub group to educate and inform our thinking in this respect..</p>

<p>Sex: men; women; experience of gender-based violence.</p>	<p>The Strategic Plan aims to improve the health and wellbeing of all men and women within Aberdeen City</p>	<p>We will continue to deliver services in response to assessed need regardless of the sex of those in receipt of these services.</p> <p>We will listen to our community representatives and the voices of those with lived experience to ensure our services meet the needs of both sexes. We will increase awareness of gender-based violence and ensure all victims are treated sensitively with due regard to their particular needs.</p>
<p>Sexual orientation: lesbian; gay; bisexual; heterosexual.</p>	<p>The Strategic Plan aims to improve the health and wellbeing of everyone in Aberdeen City regardless of their sexual orientation.</p>	<p>We will continue to deliver services in response to assessed need regardless of sexual orientation.</p> <p>We will listen to our community representatives and the voices of those with lived experience to ensure our services meet the needs of heterosexuals and the LGBTQ community. Representatives of the LGBTQ communities in Aberdeen will be invited to sit on the Equality and Human Rights sub group to educate and inform our thinking in this respect.</p>
<p>Looked after (incl. accommodated) children and young people</p>	<p>Aberdeen City Health and Social Care Partnership provide some services to children and young people. The Strategic Plan aims to improve the health and wellbeing of all children and young people including those who have been looked after and/or accommodated.</p>	<p>Staff in areas delivering services to children and young people will liaise closely with staff from Children's Services to ensure the needs of those who are looked after and/or accommodated are met.</p>
<p>Carers: paid/unpaid, family members.</p>	<p>The Strategic Plan aims to improve the health and wellbeing of everyone in Aberdeen City including paid and unpaid carers and family members.</p>	<p>ACHSCP will seek to ensure the health and wellbeing of its own paid carers through its staff welfare approaches and of the paid carers of its commissioned</p>

		<p>providers through its principled commissioning approach.</p> <p>The implementation of the revised Carers Strategy developed in conjunction with carers and their representatives will help promote the health and wellbeing of unpaid carers and family members and take their particular needs into account.</p>
<p>Homelessness: people on the street; staying temporarily with friends/family; in hostels, B&Bs.</p>	<p>The Strategic Plan aims to improve the health and wellbeing of all everyone within Aberdeen City including those experiencing homelessness.</p>	<p>We will continue to deliver services in response to assessed need regardless of whether they have a fixed home or are homeless.</p> <p>An example of this is the Marywell GP practice providing services to the homeless and the pop-up vaccination clinics aimed at homeless people.</p> <p>The Scottish Government is currently consulting on proposals to introduce a statutory duty to prevent homelessness through a housing bill expected in 2023. The proposals include changing existing homelessness legislation to ensure homelessness is prevented at an earlier stage. If the proposals are implemented as they stand, all public sector staff including ACHSCP staff would have a duty to prevent homelessness, particularly by asking and acting on a risk of homelessness. There would also be responsibilities relating to strategic and joint planning. Homelessness can have a negative impact on both physical and mental</p>

		health and wellbeing and can cause inequity of access to health and social care services. By being alert to the potential of homelessness and taking early action it is hoped that these impacts would be avoided.
Involvement in the criminal justice system: offenders in prison/on probation, ex-offenders.	The Strategic Plan aims to improve the health and wellbeing of everyone within Aberdeen City including those who have involvement with the criminal justice system.	We will continue to deliver services in response to assessed need regardless of involvement with the criminal justice system. Justice Social Work provides specific support for offenders in prison/on probation and ex-offenders. Following the recent inspection of Justice social work by the Care Inspectorate one of the actions in our Delivery Plan 2022-25 is to deliver the Justice Social Work Delivery Plan which contains improvement activity for these services. This will be delivered in conjunction with service users.
Addictions and substance misuse	The Strategic Plan aims to improve the health and wellbeing of all everyone within Aberdeen City including those with addictions and issues with substance misuse.	We will continue to deliver services in response to assessed need regardless of an individual's addiction or substance misuse. The Alcohol and Drugs Partnership provides bespoke services and support for those with addictions or issues with substance misuse. Their framework for delivery reflects the needs of their service users as identified by them.
Staff: full/part time; voluntary; delivering/accessing services.	The Strategic Plan aims to improve the health and wellbeing of everyone in Aberdeen including all staff delivering or accessing services.	Workforce is one of the Enablers in the Strategic Plan where we have committed to revising the Workforce Plan, enabling and support staff

		<p>health and wellbeing and improving recruitment and retention.</p> <p>We will continue to deliver services in response to assessed need including the needs of staff who require support.</p>
Low income	The Strategic Plan aims to improve the health and wellbeing of everyone in Aberdeen City particularly those on low incomes.	<p>We will continue to deliver services in response to assessed need regardless of income status.</p> <p>The Strategic Plan recognises the impact of low income on health and wellbeing and includes a commitment to work with partners to mitigate the impact of the wider determinants of health including poverty. We are mindful of the impact of Covid-19 and the Cost-of-Living crisis and will consider how we can reduce travel costs for people on low incomes delivering services close to their homes and in hubs where multiple services can be accessed in one visit.</p>
Low literacy / Health Literacy includes poor understanding of health and health services (health literacy) as well as poor written language skills.	The Strategic Plan aims to improve the health and wellbeing of everyone in Aberdeen City including those with low levels of literacy.	In the 'Our Approach' section of the Strategic Plan we confirm our commitment to deliver our Equality Outcomes which include improving the accessibility of information in relation to service delivery and self-care.
Living in deprived areas	The Strategic Plan aims to improve the health and wellbeing of everyone in Aberdeen City including those living in areas of deprivation.	<p>We will continue to deliver services in response to assessed need regardless of where someone lives.</p> <p>We are aware of the health impacts deprivation can bring and have committed to address key aspects of these within the Strategic Plan. We are also aware that deprivation is increasing</p>

		in the city. Our joint community planning arrangements now mean that we are working with the Priority Neighbourhood Partnerships and are much closer to understanding their particular needs and enabling these to inform service design and delivery.
Living in remote, rural and island locations	Not applicable	Not applicable
Discrimination/stigma	The Strategic Plan aims to improve the health and wellbeing of everyone in Aberdeen City without discrimination.	<p>We will continue to deliver services in response to assessed need without discrimination and taking cognisance of the stigma certain clients and patients can face.</p> <p>We will train our staff in relation to discrimination and completely eliminating it from practice.</p>
Refugees and asylum seekers	The Strategic Plan aims to improve the health and wellbeing of everyone in Aberdeen City including refugees and Asylum Seekers	<p>We will continue to deliver services in response to assessed need regardless of refugee or asylum status.</p> <p>We will continue to provide bespoke services to refugees and asylum seekers taking service delivery to them and utilising translators to ensure they understand the services that are available and how to access them.</p>
Any other groups and risk factors relevant to this policy	Not applicable	Not applicable

Question 3: How will the policy impact on the causes of health inequalities?

Will the policy impact on?	Potential impacts and any particular groups affected	Recommendations to reduce or enhance such impacts
<p>Income, employment and work</p> <ul style="list-style-type: none"> • Availability and accessibility of work, paid/unpaid employment, wage levels, job security. • Tax and benefits structures. • Cost/price controls: housing, fuel, energy, food, clothes, alcohol, tobacco. • Working conditions. 	<p>Positive impact on staff both within ACHSCP and partner organisations as well as unpaid carers.</p>	<p>One of the priorities in the Delivery Plan is the development of a Workforce Plan which aims to improve recruitment, retention and working conditions for staff.</p> <p>Another priority is to improve support for unpaid carers. A specific action against this is to revise our Carers Strategy which should enable unpaid carers to have a life alongside caring, contributing to the paid workforce if they choose to do so.</p>
<p>The physical environment and local opportunities</p> <ul style="list-style-type: none"> • Availability and accessibility of housing, transport, healthy food, leisure activities, green spaces. • Air quality and housing/living conditions, exposure to pollutants. • Safety of neighbourhoods, exposure to crime. • Transmission of infection. • Tobacco, alcohol and substance use. 	<p>Positive impact particularly on those requiring specialist or adapted housing and those who would benefit from advice and support in relation to nutrition, activity, and substance misuse.</p>	<p>One of the priorities in the Strategic Plan is to expand housing options particularly in relation to specialist and affordable housing.</p> <p>Under the Prevention priority we aim to promote healthy weight through providing advice and support for positive nutrition and an active lifestyle; reduce the use and harm from alcohol and other drugs; and deliver our Immunisations Blueprint which aims to increase the rate and uptake of vaccinations delivered thus reducing the transmission of infection.</p>
<p>Education and learning</p> <ul style="list-style-type: none"> • Availability and accessibility to quality education, affordability of further education. • Early years development, readiness for school, literacy and numeracy levels, 	<p>Positive impact.</p>	<p>Our Health Visitors and School Nurses work with young people and their families to improve the health of babies, pre-school and school age children to ensure they are as prepared as they can be for learning. One of the priorities in the</p>

<p>qualifications.</p>		<p>Strategic Plan is to deliver intensive family support particularly in relation to children with a disability and those who are exposed to the risk of trauma to keep children with their families.</p>
<p>Access to services</p> <ul style="list-style-type: none"> • Availability of health and social care services, transport, housing, education, cultural and leisure services. • Ability to afford, access and navigate these services. • Quality of services provided and received. 	<p>Positive impact particularly in relation to quality and accessibility of health and social care services.</p>	<p>The Caring Together aim within our Strategic Plan seeks to improve the quality and accessibility of social care services. This includes pathway redesign, the development of a Transitions Plan and the creation of community hubs where multiple services are available.</p>
<p>Social, cultural and interpersonal</p> <ul style="list-style-type: none"> • Social status. • Social norms and attitudes. • Tackling discrimination. • Community environment. • Fostering good relations. • Democratic engagement and representation. • Resilience and coping mechanisms. 	<p>Positive impact particularly in relation to tackling discrimination and fostering community engagement and participation.</p>	<p>The “Achieving fulfilling, healthy lives” aim seeks to address inequality and the wider determinants of health ensuring services do not stigmatise people. Under our “Caring Together” aim we have a priority to “empower our communities to be involved in planning and leading services locally”.</p>

Question 4: How will the policy impact on people’s human rights?

Articles	Potential areas for consideration	Potential impacts and any particular groups affected	Recommendations to reduce or enhance such impacts
<p>The right to life (absolute right)</p>	<ul style="list-style-type: none"> • Access to basic necessities such as adequate nutrition, clean and safe drinking water. • Suicide. • Risk to life of/from others. • Duties to protect life from risks by self/others. • End of life questions. • Duties of prevention, protection and remedy, including investigation of unexpected death. 	<p>Our strategy should have a positive impact on the right to life particularly the most vulnerable in Aberdeen City including older adults at risk of harm and those at risk of suicide.</p>	<p>Our Adult Support and Protection services have just been inspected and an action in our Delivery Plan is to implement the recommendations for improvement from that. Our services support those at the end of their life.</p>
<p>The right not to be tortured or treated in an inhuman or degrading way (absolute right)</p>	<ul style="list-style-type: none"> • Should not cause: fear; humiliation; intense physical or mental suffering; or anguish. • Prevention of ill-treatment, protection and rehabilitation of survivors of ill-treatment. • Duties of prevention, protection and remedy, including investigation of reasonably substantiated allegations of serious ill-treatment. • Dignified living conditions. 	<p>Our strategy should have a positive impact on those suffering trauma or at risk of discrimination</p>	<p>Our approach detailed in the Strategic Plan confirms our services will be trauma informed and that we will train our staff to acknowledge potential trauma and offer appropriate support. Our “Achieving fulfilling, healthy lives” aim has a priority around ensuring our services do not stigmatise people.</p>
<p>The right to liberty (limited right)</p>	<ul style="list-style-type: none"> • Right not to be deprived of liberty in an arbitrary fashion. • Detention under mental health law. • Review of continued justification of detention. • Informing reasons for detention. 	<p>Our strategy should have a positive impact on people requiring support from our Mental Health Services.</p>	<p>Our “Achieving fulfilling, healthy lives” aim has a priority around improving mental health and wellbeing and an action in the Delivery Plan to continue to progress Mental health and Learning Disabilities transformation to evidence increased community delivery across secondary and primary care.</p>

<p>The right to a fair trial (limited right)</p>	<ul style="list-style-type: none"> • When a person’s civil rights, obligations or a criminal charge against a person comes to be decided upon. • Staff disciplinary proceedings. • Malpractice. • Right to be heard. • Procedural fairness. • Effective participation in proceedings that determine rights such as employment, damages/ compensation. 	<p>Our strategy should have a positive impact on people going through the Criminal Justice system.</p>	<p>Our Caring Together aim includes an action in the Delivery Plan around delivering the Justice Social Work Delivery Plan.</p>
<p>The right to respect for private and family life, home and correspondence (qualified right)</p>	<ul style="list-style-type: none"> • Family life, including outwith blood and formalised relationships. • Privacy. • Personal choices, relationships. • Physical and moral integrity (e.g. freedom from non-consensual treatment, harassment or abuse). • Participation in community life. • Participation in decision-making. • Access to personal information. • Respect for someone’s home. • Clean and healthy environment. • Legal capacity in decision-making. • Accessible information and communication e.g. phone calls, letters, faxes, emails. 	<p>Our strategy should have a positive impact on the right to respect for private and family life particularly in relation to personal choices, participation in community life and participation in decision making as well as accessible information.</p>	<p>Our “Caring Together” aim includes a priority around empowering our communities to be involved in planning and leading services locally through participation in our Locality Empowerment Groups or other networks. This includes an individual’s right to have their say as to how their social care services are delivered under the Self-directed Support (SDS) legislation.</p> <p>Our “Achieving fulfilling, healthy lives” aim has a priority around ensuring our services do not stigmatise people which includes the implementation of our Equality outcomes and Mainstreaming Framework. Outcome 1 is Improved accessibility (to information) and confidence in using health and social care services</p>
<p>The right to freedom of thought, belief and religion (qualified right)</p>	<ul style="list-style-type: none"> • Conduct central to beliefs (such as worship, appropriate diet, dress). 	<p>Our strategy should have a positive impact on the right to freedom of thought, belief, and religion.</p>	<p>Our “Achieving fulfilling, healthy lives” aim has a priority around ensuring our services do not stigmatise people which includes the implementation of our Equality Outcomes and Mainstreaming Framework. Part of this is undertaking Health Inequality Impact</p>

			Assessments which considers the impact of service delivery or design on people with protected characteristics in terms of the Equality Act 2010 including Religion and Belief.
The right to freedom of expression (qualified right)	<ul style="list-style-type: none"> To hold opinions. To express opinions, receive/impart information and ideas without interference by a public authority. 	Our strategy should have a positive impact on the right to freedom of expression.	Our “Caring Together” aim includes a priority around empowering our communities to be involved in planning and leading services locally through participation in our Locality Empowerment Groups or other networks.
The right not to be discriminated against	<ul style="list-style-type: none"> All of the rights and freedoms contained in the Human Rights Act must be protected and applied without discrimination. Discrimination takes place when someone is treated in a different way compared with someone else in a similar situation. Indirect discrimination happens when someone is treated in the same way as others that does not take into account that person’s different situation. An action or decision will only be considered discriminatory if the distinction in treatment cannot be reasonably and objectively justified. 	Our strategy should have a positive impact on the right not to be discriminated against.	Our “Achieving fulfilling, healthy lives” aim has a priority around ensuring our services do not stigmatise people which includes the implementation of our Equality Outcomes and Mainstreaming Framework. Part of this is undertaking Health Inequality Impact Assessments which considers the impact of service delivery or design on people with protected characteristics in terms of the Equality Act 2010
Any other rights relevant to this policy e.g.	<ul style="list-style-type: none"> Convention on the Rights of the Child Convention on the Elimination of All Forms of Discrimination against Women Convention on the Rights of Persons with Disabilities 	United Nations Convention on the Rights of the Child (UNCRC) is also relevant to our strategy.	Incorporation of UNCRC will mean that ACHSCP must take steps to respect children's rights in their decisions and actions. By adopting a rights-based approach to service delivery for both adults and children and listening to the voices of our service users we should meet this requirement.

Question 5: Will there be any cumulative impacts as a result of the relationship between this policy and others?

ACHSCP's Strategic Plan links with Community Planning Aberdeen's Local Outcome Improvement Plan, the Aberdeen City Council Delivery Plan and NHS Grampian's Plan for the Future. Development of the strategy was undertaken with reference to all of these to ensure there was alignment and no unintended negative impacts. Our Approach confirms our commitment to collaborative working and we continue to link closely with our strategic partners through joint planning meetings and strategic groups. In addition, our Programme and Project Management approach includes engagement and consultation with a wide range of stakeholders prior to any changes being implemented. We are confident these approaches combined will reduce the potential of a build-up of negative impacts.

Question 6: What sources of evidence have informed your impact assessment?

Evidence type	Evidence available	Gaps in evidence
<p>Population data e.g. demographic profile, service uptake.</p>	<p>Data on Demographics from National Records of Scotland Data on Health Debt from NHS Performs Data on Long Covid from the Office National Statistics Data on Long Term Health Conditions from the Scottish Health Survey Data on multi-morbidity from the National Institute of Health Research Data on Healthy Life Expectancy, Drugs and Alcohol use, obesity, activity, smoking and mental health from the Population Needs Assessment Emergency Attendances/Admissions, and Social Care Unmet Needs from local systems Poverty data from Scottish Index of Multiple Deprivation National Indicator performance from Public Health Scotland All the above quoted in Strategic Plan</p>	<p>Data tends to be at an Aberdeen City level at best and some is historical. Going forward we will investigate obtaining more up to date data by locality and/or neighbourhood and also by protected characteristics where available.</p>
<p>Consultation and involvement findings e.g., any engagement with service users, local community, particular groups.</p>	<p>Themes from consultation noted in Strategic Plan. Consultation began with a Simulator event in relation to the refresh of the LOIP and the development of the Locality Plans. It continued with engagement linked to the development of NHS Grampian's Plan for the Future. Finally, ACHSCP undertook a series of consultation and engagement events with staff, partners, and our communities.</p>	<p>We have identified that community engagement tends to be with a restricted cohort of people and existing service users. Our challenge is to engage with the wider population and potential future patients and clients.</p>

<p>Research e.g. good practice guidelines, service evaluations, literature reviews.</p>	<p>An assessment was made of the strategic context within which ACHSCP operates. Some good practice was used for the strategy e.g., the Sexual Health Standards but these and evaluations tend to be used more for business as usual.</p>	
<p>Participant knowledge e.g., experiences of working with different population groups, experiences of different policies.</p>	<p>Communities, staff and partners have contributed their expertise.</p>	