

NHS Forth Valley

Gender Equality Scheme

2007 – 2010

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Contents

1. Foreword – Fiona Mackenzie Chief Executive
 2. Introduction – The Gender Equality Duty
 3. Our approach to the Gender Equality Duty
 4. Demographic Profile
 5. Gender and Health Inequalities
 6. Our duties as an employer
 7. The NHSFV Consultation Exercise
 8. Our Gender Objectives
 9. Employment Monitoring
 10. Procurement
 11. Partnerships
 12. Publication
 13. Monitoring, Evaluation and Reporting
 14. Comments
- Appendices
1. Glossary of Terms
 2. Gender Action Plan

1. Foreword

NHS Forth Valley (NHSFV) is committed to both the principles of and the practice of Equality and Diversity. In all that we do we strive to deliver services and offer opportunities which are fair for all. Equality and Diversity sits as an identified strategic objective within our Strategy Map which sets out our strategic priorities.

The NHSFV Fair for All framework is an integral part of our Patient Focus and Public Involvement (PFPI) strategy. The essence of our “Fair for All” framework is based on continuous improvement focussing on agreed priorities making a difference to the population which we serve and to the staff which we employ.

NHSFV’s Gender Equality Scheme 2007-2010 sits within this approach and sets out how we will work to ensure, over the next three years, that the provision of healthcare and employment opportunities are appropriately gender sensitive.

The Gender Equality Duty (GED) which came into force in April of this year, determines our approach and priorities. This Gender Equality Scheme reflects the Board’s commitment across issues of access to and provision of healthcare services and in our role as a major employer to:

- ◆ promote equality of opportunity between women and men including transsexual people
- ◆ eliminate unlawful sex discrimination and harassment

In addition NHSFV will publish a statement on Equal Pay as required by the Gender Duty and in line with its commitment to equal pay through its developing Pay Modernisation Strategy.

Our overarching aim in relation to gender equality is to ensure that the design, development and delivery of our services are increasingly and appropriately based on identified need, taking into account the needs of women and men including transsexual people.

The legal duty is important and sets the framework for what NHSFV must do to comply with the legislation, however the heart of the matter is our commitment to provide services and employment opportunities for our local population which are fair for all and:

- ◆ Contribute to health improvement,
- ◆ Help tackle inequalities in health in the long run

This commitment places the Equality and Diversity agenda at the centre of all that we do within NHSFV to deliver on our Integrated Healthcare and Workforce Modernisation Strategies.

Fiona Mackenzie
Chief Executive

2. Introduction to the Gender Equality Scheme

2.1 The Equality Act 2006 introduced the statutory duty on gender equality. The Gender Equality Duty has both general and specific duties with which NHSFV as a public body is required to comply. However, it is the “general duty” which lies at the heart of the gender equality duty and where true progress will be made and measured. This will be assessed through real change in people’s lives.

2.2 The general duty requires public bodies, when carrying out their public functions, to have “due regard” to the need:

- to eliminate unlawful discrimination and harassment, and
- promote equality of opportunity between men and women including transsexual people.

2.3 The purpose of the “specific duties” is to help public bodies to better perform the general duty. Specific duties, set out in The Sex Discrimination (Public Authorities) (Statutory Duties) (Scotland) Order 2007, require listed authorities of which NHSFV is one:

- to publish a Gender Equality Scheme by 29 June 2007;
- to review its scheme and prepare and publish a revised scheme every three years;
- to publish a report annually summarising the actions that the authority has taken towards the achievement of the objectives identified in their scheme.

2.4 The gender equality duty also asks public bodies:

- to publish an equal pay statement which outlines that authority’s policy on equal pay between men and women by 28 September 2007;
- to review its equal pay statement and publish a report on its equal pay policy every three years.

2.5 NHSFV is a large organisation delivering services and exercising functions which cover a range of issues impacting on the people of Forth Valley. In taking this gender work forward the Fair for All Operational Group identified a lead person to both research the gender equality duty requirements and then to lead on the development of the scheme itself. Early contact was made with the Equal Opportunities Commission and the national Fair for All- Gender Lead. Participation in the Fair for All Gender Advisory Board and Network followed from this initial contact and the NHSFV lead was a named contributor to the NHS Gender Equality Guidance subsequently issued in February 2007.

The Board’s Fair for All Operational Group has provided an experienced sounding board for the development of this scheme having previously overseen the development of both the Race and Disability Equality Schemes.

2.6 Our Gender Consultation as detailed in Section 6 has been fairly comprehensive to date and we aim to expand on this activity over the three year life of this scheme. Involving NHSFV's PFPI Patient's Panel, the CHP Public Partnership Fora and each of the Staff Partnership Fora in developing this scheme has been an innovative step and will go further to ensure future engagement with key stakeholders. We have also engaged with the Scottish Health Council in our efforts to involve "hard to reach groups".

Structure of the Gender Equality Scheme

2.7 Our first Gender Equality Scheme contains 13 chapters, structured as follows:

- chapters 1 and 2 introduce the scheme and set it in the context of NHSFV's approach to gender equality and equality generally;
- chapter 3 discusses NHSFV's approach to promoting gender equality and eliminating harassment and discrimination;
- chapters 4 describes the demographic context within NHSFV both in terms of our local population, looking at trends to 2024, and in terms of our workforce demographic and then considers the available information;
- chapter 5 discusses the known local and national inequalities issues relating to gender, based on available data
- chapter 6 discusses our role as an employer;
- chapter 7 the local consultation exercise undertaken to support and inform the development of the scheme and how we will continue to involve relevant groups during the life of the scheme sets out our high level objectives;
- chapter 8 identifies our high level gender objectives
- sections 9 -11 describe our gender employment monitoring; procurement and partnership responsibilities.
- sections 12-13 detail our arrangements for publishing, monitoring and reporting on the scheme
- section 14 explains how to comment on the scheme

The Gender Equality Scheme establishes:

- Our commitment and approach to understanding and promoting Gender Equality
- Our gender equality objectives and the evidence which has been used to inform and develop them
- Our approach to ensuring that staff and people using services were consulted in the setting of the objectives
- A commitment to equality and diversity impact assess all of our services, policies and strategies to identify and provide for fairness and equity in the planning and delivery of services
- A review of our Human Resources policies in relation to how they affect men and women to ensure fairness and consistency and the elimination of potential and real discrimination

3. Our approach to the Gender Equality Duty

3.1 Board commitment and leadership

The NHS Board and each of the Executive Directors of the Board are committed to achieving Equality and Diversity in all that we do. The Board itself holds a governance role and the Executive Directors each have individual objectives relating to Equality and Diversity.

The HR Director holds the Executive Lead role on behalf of the Chief Executive across the whole organisation and she chairs both the Fair for All Development and Operational Groups tasked with leading on the Equality and Diversity agenda for NHSFV.

NHSFV has demonstrated its leadership and commitment to this work through its representation on both the national Gender Advisory Board which produced the national health Guidance, and on the Gender Network which supports all Boards in their work on Gender Equality. It is also represented on the Scottish Executive Health Department's Diversity Taskforce.

3.2 NHSFV Strategic Objectives

Equality and Diversity feature within NHSFV's strategic objectives in relation to delivery of all Health, Efficiency, Access and Treatment (HEAT) targets and the Local Delivery and Health Plans.

3.3 Mainstreaming

The new Gender Duty reinforces the scope of this challenging agenda but equally provides further evidence for the need to embed this work so that equality and diversity is mainstreamed into all that we do so that our patients and workforce experience a health service which actively promotes equality and is free from discrimination.

3.4 Local activities to embed work on gender equality

NHSFV has provided local, Board-wide leadership around this agenda in the following ways:

- ◆ Awareness of the Gender Equality Duty has been raised using the Board's existing communications and other frameworks;
- ◆ Widespread use of advertising campaign materials for Fair for All – Gender across the NHSFV sites so that these images and messages are seen and increasingly recognised;

- ◆ Leadership in Diversity event for senior managers which included input from Fair for All Gender – Lead;
- ◆ Ensuring that Gender Equality has featured at Board, Executive and management level meetings;
- ◆ Presentation and debate at NHSFV Partnership meetings to raise the profile further among senior managers and staff side representatives;
- ◆ Discussion with Community Health Partnership (CHP) General Managers’ (GMs) to ensure the profile is high at CHP discussions;
- ◆ Continued profile with Human Resource (HR) professionals;
- ◆ Ensuring Gender Equality features in Agenda for Change and Knowledge and Skills Framework (KSF) developments;
- ◆ Inclusion of Gender in Equality and Diversity staff training, including Induction and Statutory training;
- ◆ Inclusion of Gender in all Equality Impact Assessments undertaken to date
- ◆ Sharing knowledge of Gender Equality activity with Local Authority partner organisations;

Our plan is to maintain this high profile and to expand upon it. We wish to encourage new groups and individuals to become involved in our developing processes.

In the 3 year life of this first scheme we will work on an iterative basis to ensure that the work to produce the outcomes needed is responsive to changing circumstances.

4. NHS Forth Valley- Demographic Profile

The NHS Forth Valley Population

The NHSFV publication, “The Health of the Population of Forth Valley 2005-2006”, the 17th Annual Report of the Director of Public Health, provides population figures for the next twenty years based on 2004 population projections by the Registrar General for Scotland.

These are set out in Table 1.1 below and show a constant trend of a higher proportion of females than males within the population.

Table 1.1 Forth Valley population figures for 2010, 2014 and 2024, based on 2004-based Population Projections by the Registrar General for Scotland

| Table 1.1: Projected Populations, Forth Valley, 2004 - 2024 | | | | | | | | | | | | |
|-------------------------------------------------------------|----------------|----------------|----------------|----------------|----------------|----------------|----------------|----------------|----------------|----------------|----------------|----------------|
| Age | 2004 | 2010 | 2014 | 2024 | 2004 | 2010 | 2014 | 2024 | 2004 | 2010 | 2014 | 2024 |
| | Total | Total | Total | Total | Males | Males | Males | Males | Females | Females | Females | Females |
| 0-15 | 54,253 | 52,023 | 50,801 | 50,278 | 27,662 | 26,423 | 25,695 | 25,284 | 26,591 | 25,600 | 25,106 | 24,994 |
| 16-29 | 46,205 | 49,289 | 49,853 | 46,814 | 23,083 | 24,739 | 24,842 | 22,792 | 23,122 | 24,550 | 25,011 | 24,022 |
| 30-49 | 83,760 | 81,305 | 77,480 | 71,987 | 40,485 | 38,452 | 36,227 | 33,117 | 43,275 | 42,853 | 41,253 | 38,870 |
| 50-64 | 53,168 | 56,418 | 58,019 | 63,012 | 25,923 | 27,427 | 27,864 | 29,481 | 27,245 | 28,991 | 30,155 | 33,531 |
| 65-74 | 24,988 | 27,075 | 30,177 | 32,075 | 11,493 | 12,532 | 14,181 | 14,861 | 13,495 | 14,543 | 15,996 | 17,214 |
| 75+ | 19,390 | 21,630 | 24,069 | 32,211 | 7,030 | 8,535 | 9,861 | 13,871 | 12,360 | 13,095 | 14,208 | 18,340 |
| Total | 281,764 | 287,740 | 290,399 | 296,377 | 135,676 | 138,108 | 138,670 | 139,406 | 146,088 | 149,632 | 151,729 | 156,971 |

Source: Registrar General Office (Scotland) 2004-based population projections (<http://www.gro-scotland.gov.uk/>)

The Gender Balance of the NHS Forth Valley Workforce

The NHSFV Workforce Plan 2007 reports that over three-quarters of the workforce are female (82.66%). This is largely accounted for by the high proportion of females in the Nursing and Midwifery staff (91.4%), Administrative, Clerical and Senior Management staff (88.49%) and the collective grouping of Therapeutic, Healthcare Science, Technical and Pharmacy staff (85.95%).

Comparison to last year’s Workforce Plan shows that there has been no significant gender shift overall or by staff group. Further statistical analysis is provided at section 5. Our duties as an Employer.

5. Gender and Health – Inequalities

5.1 In assessing available information on gender issues, NHSFV has considered evidence from national and local NHSFV information sources. In particular, information from the Director of Public Health's Annual Reports have been utilised to ensure a local perspective is taken.

The following information describes both national and local NHSFV assessment of available information.

5.2 National Information

The NHS Fair for All framework has, until 2006, been heavily focused on issues of Race Equality with the issues of Disability Equality coming to the fore in December 2006. Issues of Gender Equality are increasingly making their way into the wider society's consciousness and that of the NHS in Scotland having been for many people broadly understood to have been delivered with the Sex Discrimination Act in 1976 and a focus on employment law.

In recent years significant work has been undertaken at national level within the Scottish Executive on research into gender and health in Scotland. The work of Fair for All – Gender is now focused on supporting NHS Scotland to mainstream gender equality considerations into planning and service delivery.

Access and barriers to health services or employment opportunities are important factors in terms of all strands of equality and diversity, however have not been well understood in terms of Gender Equality.

Based on this national research, combined with that of the Equal Opportunities Commission (EOC), the Fair for All – Gender campaign highlights a snapshot of gender specific health issues as follows:

1. Recent reports suggest women are less likely to realise they are having a heart attack than men – 54% of attacks in women go undiagnosed compared with 33% of men
2. Men typically develop heart disease 10 years earlier than women.
3. Life expectancy of women in Scotland is the lowest in the EU, and for men the second lowest
4. Male-to-female infection with HIV is more than twice that of female-to-male
5. Male populations have generally formed the baseline for study of major diseases and as such sex differences have not always been recognised, e.g. heart disease
6. Women are more likely to suffer from anxiety and depression
7. Men are more likely than women to commit suicide
8. Men are more likely than women to die of injuries, but women are more likely to die of injuries sustained at home
9. In terms of employment in the nursing profession, maternity and/or career breaks often result in career regression. If nurses do not maintain their clinical

knowledge and practice they invariably regress to a lower grade or at worse lose their registration status.

Source: Rona Fitzgerald, Gender Equality and Work in Scotland: A Review of the Evidence Base and the Salient Issues, 2006 Wisemann and Pardue, 2001.

5.3 Local Information

The NHSFV Director of Public Health's (DPH) report 2005/06 highlights the issue of Inequalities in Health and identifies that as well as those inequalities experienced between the affluent and the deprived and between different geographical areas, there are also gender issues with health inequalities clearly evident between men and women.

This report goes on to state that although life expectancy in the UK continues to sit very highly in the world ratings, there are still apparent gender differences in life expectancy. In terms of "potential life lost" there are also gender differences between the causes of premature mortality:

- ◆ Men are more than twice as likely to die prematurely from perinatal (pre birth)/congenital conditions
- ◆ Men are over 4 times more likely to die from suicide
- ◆ Men are 3 times as likely to die from accidents, and
- ◆ Men are twice as likely to die from coronary heart disease(CHD).

The report highlights that:

- ◆ Women are slightly more likely to die from respiratory conditions

It also clarifies that:

- ◆ Years lost to cancer and stroke are of similar proportions in both male and female populations

Overall, the potential years lost from all causes were 8,774 per 100,000 population for men compared with 6,363 for women.

The earlier Director of Public Health (DPH) report for the period 2001-2002 highlighted the importance of prioritising the health needs of men as well as those of women. It explained that their health needs, the effect of various diseases and ways of accessing services can differ.

Whilst progress has been made since that earlier report, with both local and national interventions e.g. in the form of targeted advertising campaigns on men's health issues, differing experiences are still in evidence.

However, it is clear from available evidence that the focus must also however be retained on women's health experience and be developed to include the experience of transgender people.

5.4 Identifying need

In addition to the information gained from national, local, and NHSFV consultation processes, Health Needs Assessments continue to be recognised public health methodologies researching into the health needs of the local and national populations. These will continue to provide rich sources of information to assist in prioritising developments in health services and health improvement and in particular NHSFV will use this data source to inform its work on Gender Equality over the life of this scheme to help us work with service managers to achieve:

- Better understanding of equality issues and barriers
- development and delivery of gender sensitive services
- improved targeting of services.

NHSFV will continue to assess its service planning and delivery for men's and women's health through the assessment of its functions and policies and the continued use of Equality Impact Assessment (EQIA) processes.

6. Our Duties as an Employer

6.1 NHSFV is also committed to equality of opportunity in the area of employment. This is a fundamental cornerstone of the NHS in Scotland's Staff Governance Standard, a framework for people management which has at its core a commitment to fairness and consistency.

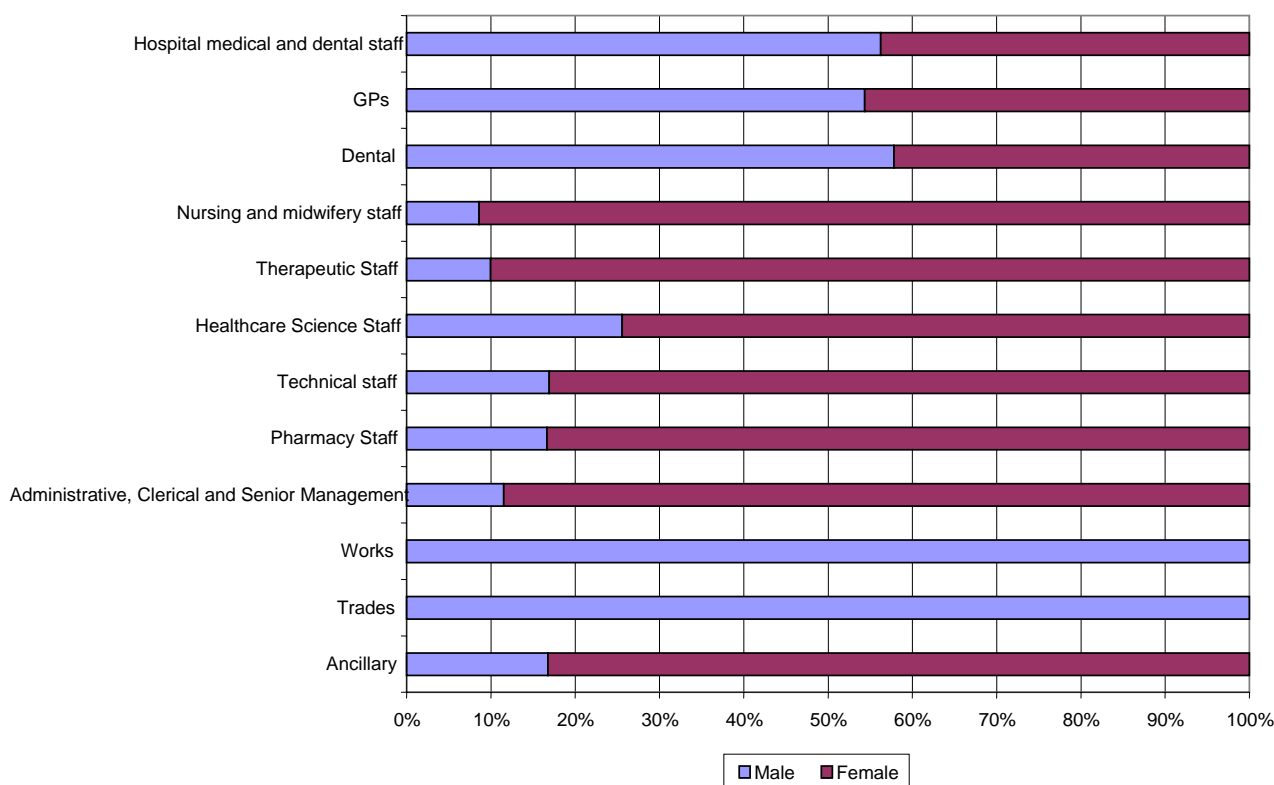
The Staff Governance Standard requires that all staff have access to fair and consistent treatment. This ranges from access to employment opportunity through to training and to equal pay. Staff Governance sets the standard on Human Resources policy and employment practice and on people management.

Such policy and practice in terms of employment begins with access to employment. NHSFV's workforce has a female demographic which is higher than the national average.

As table 1.2. shows below, the percentage of each staff group that is female ranges from 0% for works and trades staff to 91.4% of nurses and midwives

Table 1.2

GENDER SPLIT BY STAFF GROUP (HEADCOUNT) AT 30 SEPTEMBER 2006



6.2 NHSFV also has a higher than national average female cohort at senior management level. However we also have high numbers of female staff at the lower end of the pay demographic. This is consistent with the national picture, but NHSFV is committed to tackling issues of occupational segregation where they may exist.

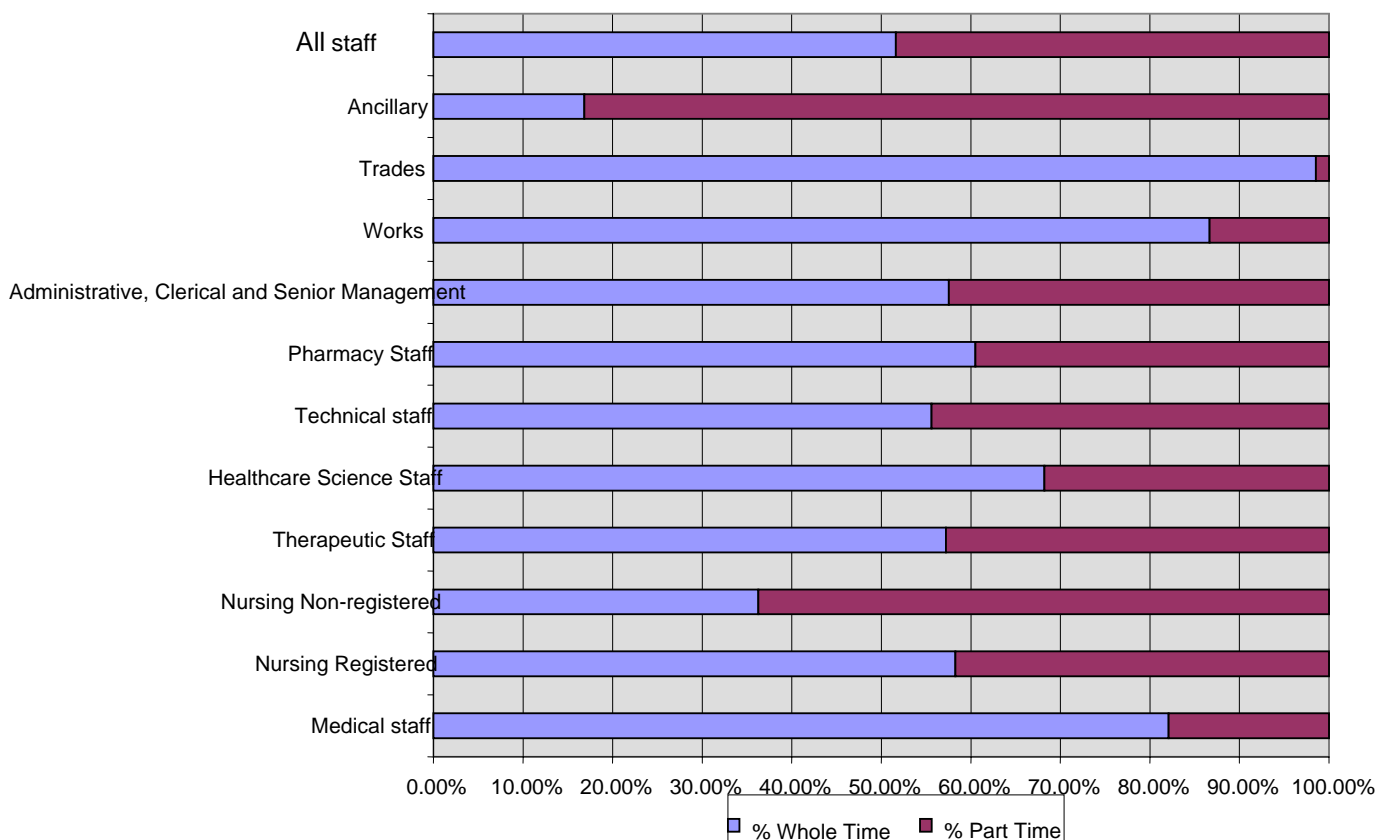
We will give further focus to this work under this Gender Scheme, firstly through research and working in partnership with trade unions and others and then through continued work to demonstrate our ongoing commitment to equal pay; flexible working and personal development.

We will further disaggregate available statistical information so that we can consider the working patterns of our workforce and in particular, we wish to know more about part-time working and how fairly and consistently opportunities are available for women and men to work on a part time basis and where these opportunities are available.

6.3 Working Patterns

Table 1.3. below shows the proportion of staff in each group working full and part-time. Within the clinical group, nursing and midwifery staffs have the highest proportion working part-time.

Contract Type by Staff Group at 30th September 2006



Many GPs (including those who have contracts) also work part time.

Within the non-clinical group, ancillary staffs have the highest proportion working part-time.

There has been a slight overall decrease in numbers of staff working part-time from 47.26% in 2005 to 45.87% in 2006.

The largest changes have been a decrease in the numbers of Healthcare Science staff working part-time from 38.52% in 2005 to 31.78% in 2006 and also in the numbers of Hospital medical and dental staff working part-time from 23.21% in 2005 to 17.91% in 2006.

There has also been an increase in the number of Technical staff working part-time from 39.72% in 2005 to 44.37% in 2006. (Source: *ISD Workforce Statistics September 2006 Table A3*)

NHSFV is aware that many female staff choose either to apply for part-time posts or to seek part-time working during their careers both of which can assist in supporting family commitments and work-life balance aspirations. We will ensure that our focus on work/life balance policies also positively emphasise that these opportunities are open to both men and women.

NHSFV is also committed to understanding and working in partnership to tackle inequalities which may impact on our workforce. Where these may arise from the employment relationship we will work to assess and eliminate such factors.

Through continued monitoring of the composition of our workforce, we will also be alert to issues of occupational segregation and will work with staff and partners at local and national level to better understand the drivers for this demographic, seeking continuous improvement

NHSFV will publish a statement on Equal Pay in support of this Gender Equality Scheme in September 2007. In the meantime NHSFV continues to work with national colleagues on current equal pay issues.

6.4 Workforce Modernisation

NHSFV, as laid out in its draft Workforce Modernisation Strategy which underpins the Board's Integrated Healthcare Strategy, aspires to be a model employer which can attract and retain the highest quality of applicant who will provide the best quality of healthcare to our local population.

Our new Recruitment and Retention Plan will focus on best practice in relation to advertising/community engagement. We want our workforce to reflect our local population and also to offer diversity in our role models for employment. We will work with varied groups to learn the best ways to attract applicants from the widest

possible catchments to ensure that we are providing the best access to our employment opportunities for all.

We will continue to promote equality and flexibility through the development of new roles and work patterns which both meet service requirements whilst also offering better employment opportunities and work/life balance to our workforce and to our potential employees. We will work to ensure that these opportunities are available to both women and men.

Model Employer

In working towards becoming a model employer we will also work continuously to achieve the Staff Governance Standard through our employment policies and practices which are underlined by the principles of equality and valuing diversity. We will promote gender equality as part of our overall commitment to equality and we will use our Dignity at Work policy and associated training to reinforce this message.

During 2007/08 NHSFV will roll out the national Diversity Champions Initiative ensuring that our workforce is further supported in terms of equality.

Our commitment extends increasingly to providing a better work/life balance for our workforce which is and will be predominantly a female and aging workforce and one that is likely to work longer.

Pay Modernisation

The Workforce Modernisation Strategy sets out our aspiration to have a modern workforce working within a modern and healthy culture. We will work continuously to achieve the benefits of Pay and Workforce Modernisation which will deliver new models of care for the patient and therefore increased role flexibility and skills development for our workforce

Within this modern culture, there is no place for discrimination or harassment. We have a positive track record in developing and implementing HR policy in this area with the recently launched Dignity at Work policy which was commended by Full Time officials within the Area Partnership Forum.

In terms of current and future focus during 2007 we will also have a new Equal Opportunities Policy set within NHSFV's strategic framework for Equality and Diversity which will be based on the new NHS in Scotland Partnership Information Network (PIN) policy to be published in October 2007.

The Workforce Modernisation Strategy itself will be monitored robustly and as we progress with the continued implementation of the Integrated Healthcare Strategy, its importance and that of its component parts cannot be overstated.

Training and Development

It is our workforce which will provide the healthcare developments which will deliver health improvements for our population and it is therefore fundamentally important that our workforce is knowledgeable and competent in delivering services which are free from bias and discrimination, which are, in the context of this Scheme, gender sensitive. Staff Training will continue to feature prominently in our Fair for All agenda and the current Diversity Champions initiative which is being piloted in three Boards including NHSFV will be a key vehicle for delivery.

This initiative will support any individual who is experiencing difficulty however importantly these champions will also be at the forefront of our Equality and Diversity strategic focus to eliminate discrimination and promote equality.

The Knowledge and Skills Framework supporting the Agenda for Change Pay Modernisation Strategy will play a key role in embedding Equality and Diversity across all of the equality strands. Staff competence in this area is fundamental to pay and career progression and this is further reinforced through the development of Personal Development Plans which highlight skills in equality and diversity.

7. The NHSFV Gender Equality Consultation – What did you tell us?

7.1 In addition to the available national and local gender information sources detailed in section 4, based on national guidance, NHSFV conducted its own Gender Equality Consultation exercise to gain first hand information from a range of stakeholders. This has been used to inform this Gender Equality Scheme and the associated action plan.

The driver for this work was the NHS guidance document, Gender Equality-Guidance for NHS Scotland, which advised NHS Boards that:-

“Consulting before producing a Gender Equality Scheme and Action Plan will be essential to the process of prioritising steps in the plan and reviewing outcomes and is a legal requirement under the specific duties of the GED.”

Following initial awareness raising activities throughout NHSFV which began in January 2007, NHS Forth Valley therefore conducted its own Gender Equality Consultation exercise aimed at finding out what would make a real difference in terms of gender equality within the context of NHSFV either as a service provider or as a present or future employer. Feedback from our service users, our staff, trades unions and other interested stakeholders were invited from the following groups:

- NHSFV Patients’ panel
- CHP Public Partnership Fora
- Representatives from NHSFV Managed Clinical Networks
- NHSFV Area Partnership Forum
- NHSFV Local Partnership Fora
- Sexual Health Professionals
- Men’s Health Leads
- Women and Children’s Services Lead
- Health Promotion professionals
- Local interest groups via Scottish Health Council
- Women’s Aid
- Chinese Women’s Association
- Local and national LGBT groups
- A range of other interested stakeholders

The following snapshot of our feedback details some of the key issues raised within the process:-

Men's issues

- Issues of attention to Men's health issues were prominent as were issues relating to women's health needs
- Requests for men's health clinics to be run at weekend and evenings to fit with men's working lives
- Men's clinics to be staffed by men
- Better access to mental health services for men

Women's issues

- Help for women who wish to complain and may find this difficult
- Use of chaperones
- A request that the focus on women's health also broaden from reproductive health to the issues of mental health and CHD
- Female clinics to be staffed by females
- Equal pay and pensions for women

Transgender issues

- A request that we take account of the needs of Transgender people.

Wider involvement

- People with learning difficulties or with mental health to be involved in our work
- Young and old people to be involved in our work

Information

- Information and training for all staff
- Requests that we keep the GES simple and easy to understand
- More face to face discussions
- Use website information on Gender Equality
- More information in plain English

Next Steps

- Request for feedback on consultation
- Continue to build in time for people to be involved
- That contributions be used inform the NHSFV Gender Equality Scheme

The initial feedback from the exercise has been captured and used to help inform the NHSFV Gender Objectives within this Scheme and the actions prioritised within the

associated Action Plan at Appendix 2. this has a three year timescale. During this period we will be prioritising actions based on all of the information available to us.

Summary

Overall, this Gender Consultation Exercise has produced a rich source of information and an enthusiastic audience with which we will continue to work as we make progress in the Gender Equality agenda. We will make best use of the rich feedback received and a full analysis of this feedback will be available to inform our continued work. All those invited to participate will continue to be involved through ongoing dialogue as requested or through dissemination of information..

We gave a commitment to circulate the final Gender Equality Scheme to all those invited to contribute and will use focus groups for future events as we continue to inform our work on Gender Equality.

The public consultation process has been key to the development of this scheme and provides assurances that the Action Plan is based on identified need. Throughout the life of the Scheme, we will build on the benefits of the initial public consultation process and other NHSFV communications networks to ensure that the Scheme is responsive to additional input.

We plan to further develop our Leadership in Diversity training using what are called “patient and user stories” thereby continuing to involve the community in our developing work.

Partnerships

We will continue to learn from partner health organisations’ experiences through the Gender Network and other Partnership arrangements e.g. through our community planning links with local authorities.

We will also build on the expertise of the Scottish Health Council in all that we do around involving people.

Our joint work with local authorities and other partners continues to grow and it is anticipated that future joint/collaborative efforts in terms of public engagement will provide the best and more responsive approach to this work.

- Where possible we plan to undertake joint consultation work to address concerns of consultation overload.
- Our Local Authority representatives who sit on NHSFV’s Fair for All Development Group provide key opportunities to share good practice and learning.
- The range of national NHS Equality Networks ensure that NHSFV is involved, informed and up to date on developments within the national scene which also involve key partners organisations such as the Voluntary sector and private business

8. Our Gender Objectives

8.1 Prioritisation

Within NHSFV we have high level of commitment and involvement in this agenda and this involvement is expanding as our knowledge and understanding of the issues grow, so that key stakeholders in the areas of planning and delivery of services are increasingly involved and accountable for improvements in their areas of control. Managers will continue to be supported in assessing their functions and policies and in using the NHSFV Equality Impact Assessment methodology. We will prioritise work on Mental Health, Coronary Heart Disease and Cancer Services in line with national priorities as well as work on domestic violence with local partners. In this way our gender priorities have been made on two levels- both nationally and locally driven.

The objectives which NHSFV has prioritised within this GES involve both a continued high level strategic focus, combined with a practical and operational drive, each focused on making a difference to peoples' lives. Each of these approaches both equally lead and support the Gender Equality work which lies ahead.

From assessment of all of the available information sources, NHSFV has prioritised a set of high level Gender Equality Objectives which are supported by an associated action plan, at Appendix 2. Our work on Gender Equality will however extend beyond the three year period.

Drawing on the information sources described, it is clear where efforts need to focus which will begin to make a difference in terms of Gender Equality. The agenda is challenging, ranging as it does from ensuring involvement in service development through to access to services and opportunity in employment.

The following areas of work will be key to making a difference in terms of Gender Equality and either:-

- featured in both our local consultation and in national and local evidence already known to us or
- are predominantly evidenced through national level research which identifies local and hidden need which we must work to address.

8.2 Service Access and Delivery

The Gender issues which relate to service access and delivery aspects of our work across our functions are increasingly better understood and the activities associated with NHSFV's Patient Focus Public Involvement (PFPI) agenda are wide in scope and underpin key service developments. An example of where this work is becoming embedded is that where appropriate and practical, NHSFV already aims to respond to requests for gender sensitive preferences in relation to staff or chaperones. This work will continue as we gain more information on patient needs.

Where we have identified need which we can act upon quickly, this will be done. However, much of our service access and delivery improvements will follow on from focused work which we will undertake to support our services as they assess their functions and policies. There will be an agreed rolling programme of activity agreed at local level within services which will further prioritise local actions to improve gender equality outcomes.

8.3 Lesbian Gay, Bisexual and Transgender issues

An area where little local information exists and common to many organisations is the need to better understand and address the needs of Transgender individuals. The previous impact assessment procedures undertaken by NHSFV during 2006 identified a limited number of issues relating to the Lesbian-Gay-Bisexual-Transgender community which suggested limited awareness of the specific needs and potential discrimination experienced by these groups. NHSFV is committed to further work in this area and will build on the contacts made through this consultation exercise. Further national guidance is awaited from the Scottish Transgender Alliance. Key activities will also relate to the work around the Board's Sexual Health Strategy and the positive work within the NHSFV Women's and Children's services.

8.4 Gender Reassignment

NHSFV will work with its workforce, partners and key stakeholders to prevent discrimination and harassment against transgender people who have undergone gender reassignment, are currently undergoing it or who intend to. Working with partner organisations, we will seek out the most appropriate ways to ensure this commitment becomes a reality and we believe that the implementation of this GES will assist in this process.

We will work with Fair for All LGBT and other groups to ensure that our training and policy awareness processes are appropriately developed, targeted and monitored. We will work to continuously improve knowledge and understanding of transgender issues which will inform both service delivery and workforce development.

To make continued progress we will build on our existing work in the fields of Race and Disability Equality, utilising the shared learning from successes and challenges. We will continue to work with national, regional and local partners and above all we will continue to work with our service users, staff, trade unions and other stakeholders to inform this developing agenda.

8.5 Employment

A major focus of the work we need to do will be in the field of employment, including Equal Pay, however this area of activity is already well understood among employers and work to continuously improve our employment policies, practice and monitoring is becoming mainstreamed across NHSFV. This work is captured at section 6.

8.6 NHSFV Objectives

The objectives have been prioritised based on both national drivers and local information. For each objective we have prioritised a number of associated actions which are detailed in the attached GES Action Plan and these will be further supplemented by local action plans developed within services themselves and informed by further user input over the life of this GES.

Our high level objectives can be summarised as follows:

1. To prioritise Gender Equality along with the other Equality and Diversity strands – within NHSFV’s top strategic priorities within its Strategy Map.
2. To ensure that Gender Equality is advanced within the Fair for All and Staff Governance agenda.
3. To ensure that gender equality and gender sensitive needs and services are better understood based on research and communications, by all staff and in particular by those who plan and deliver services including and as a priority in the national target areas of Mental Health, Cancer and CHD.
4. To support local NHSFV managers to provide health services and employment opportunities which are appropriately gender sensitive through impact assessments; training; PFPI work; and flexible employment opportunities.
5. To ensure equal pay for work of equal value through robust job evaluation and workforce modernisation developments.
6. To continue to consult with stakeholders so that our work is informed by identified need.
7. To continue work to mainstream gender equality and wider equality strands across all NHSFV functions and policies.

8.7 Action Plan

The Action Plan at Appendix 2 sets out how we will work towards achieving our Gender goals and objectives. This Action Plan sets out actions over a one, two and three year timetable. The actions are focused on what we have learned from our initial Gender Equality consultation process; what we understand from our own research and national research and what we understand will make the most difference in the field of Gender Equality. These actions will best help NHSFV achieve its objectives as laid out within the Scheme and thereby the improvements in health and employment which we seek to deliver.

These actions may be modified in the light of changing local or national circumstances and any such modifications will be reported via the appropriate monitoring structure.

The key to the Scheme and its associated Action Plan will be in the achievement of the planned outcomes which will be the true measure of its success. It will be these which will make the difference to people's experience of health services within NHSFV and to their experience as a current or future member of our workforce.

Delivery of these objectives will be the responsibility of the Director of Human Resources (as Executive Lead) with agreed ownership and local accountability throughout the organisation.

The importance of robust monitoring arrangements is therefore key. These arrangements are outlined in Section 13.

9. Employment Monitoring

NHSFV will continue to focus on making improvements in its employment monitoring capacity. We will provide reports from gender disaggregated data using our existing and developing workforce and HR systems-MARJE and SWISS.

We will report on the following:-

- applications for employment;
- applications for training;
- numbers trained;
- numbers of grievances;
- numbers of disciplinary;
- those who suffer detriment of benefit from appraisals;
- leavers.

Our workforce will continue to be encouraged to provide diversity information which will facilitate improved monitoring and reporting and in turn inform the employment process.

10. Procurement

The EOC is currently working on central guidance on procurement as it relates to The Gender Equality Duty. In addition the SEHD is also working on national guidance. NHSFV will await these documents/guidance, however in the meantime, asserts its commitment to fair treatment in procurement practice. Equally NHSFV will require contractors to comply with the anti-discrimination provisions of all equalities legislation.

11. Partnerships

In line with EOC Guidance NHSFV in all of its partnership work with other public authorities, or with private or voluntary sector organisations, will ensure that it takes all required steps to meet its gender duty

12. Publication

The NHSFV Gender Equality Scheme will be distributed to all key stakeholders across NHSFV. In addition it will be distributed to all those who were invited to contribute to its development and it will be published on our public website and internal Intranet.

The Scheme will also be available in variable formats:

You can obtain the service of an interpreter or have this document translated in your own language by contacting the interpreting services on 0845 130 1170. These services are available free of charge.

ਤੁਸੀਂ, 0845 130 1170 ਤੇ ਦੁਭਾਸ਼ੀਆ ਸੇਵਾਵਾਂ (interpreting services) ਨੂੰ ਸੰਪਰਕ ਕਰਕੇ ਇਕ ਦੁਭਾਸ਼ੀਏ ਦੀ ਸੇਵਾ ਜਾਂ ਇਸ ਦਸਤਾਵੇਜ਼ ਦਾ ਆਪਣੀ ਬੋਲੀ ਵਿਚ ਅਨੁਵਾਦ ਲੈ ਸਕਦੇ ਹੋ। ਇਹ ਸੇਵਾਵਾਂ ਮੁਫਤ ਹਨ।

آپ 0845 130 1170 پر انٹرنیٹ پر سروس سے رابطہ کر کے کسی مترجم کی خدمات حاصل کر سکتے ہیں یا اس دستاویز کا ترجمہ اپنی زبان میں کرا سکتے ہیں۔ یہ خدمات مفت دستیاب ہے۔

您可以通過撥打翻譯服務熱線 0845 130 1170 取得翻譯員服務或得到此文件的翻譯版本。 這些服務都是免費的。

Galite prasyti vertejo paslaugu arba gauti sita dokumenta isversta I jusu kalba kreipdamiesi I musu vertimo paslaugu biura skambindami 0845 130 1170. Sitos paslaugos yra nemokamos.

يمكنك الحصول على خدمة الترجمة الفورية أو القيام بترجمة هذه الوثيقة إلى لغتك الأصلية عن طريق الإتصال بخدمات الترجمة الفورية على رقم 0845 130 1170. هذه الخدمات متاحة مجاناً بدون أى مقابل مادي.

Dzwoniąc do biura tłumaczeń pod numer 0845 130 1170 możecie Państwo prosić o tłumacza albo otrzymać ten dokument przetłumaczony na wasz język ojczysty. Powyżej wymienione usługi są darmowe.

13. Monitoring, evaluation and annual reporting

NHSFV has well developed clinical and staff governance frameworks and is committed to a culture of performance management and continuous improvement.

Assessment of progress on Gender Equality will be made through regular monitoring by the NHSFV Fair for All Operational Group which meets on a monthly basis. Regular reports will be provided to this group which will also have delegated authority to make changes to objectives on a mid-year basis which are responsive to local need.

The Following groups will receive quarterly reports on progress:

- ◆The Fair for All Development Group
- ◆PFPI Committee
- ◆Staff Governance Committee
- ◆The Area Partnership Forum

The Board Executive Group will receive regular reports and in particular will receive information on areas of good practice or development need as appropriate.

The NHS Board itself will receive update reports on a six-monthly basis on the progress of the Gender Equality Scheme when it also receives reports on the Race and Disability Equality Schemes. The Board will also seek assurances through its governance structures.

In addition NHSFV will work with the Commission for Equality and Human Rights (CEHR) and other interested parties on a continuous basis and will participate in any external monitoring that is required.

An annual report detailing internal assessment of achievements under the scheme will be undertaken and reviewed by the Fair for All Development Group at the end of years one, two and three in preparation for the overall review of the 2007-2010 Scheme in 2010/11.

The Gender Equality Scheme, along with Race and Disability, work will feature within Quality Improvement Scotland (QIS), Staff Governance and Annual Review assessment and monitoring processes.

14. Comments

We are keen to continually engage and involve those who are affected by our work on gender equality or those who have an interest in it. We would like to know what you think about our gender equality scheme, and how we are progressing, Our view is that this is a developing area of work and the process an iterative one. The scheme will change over its three year lifecycle in order to take account of new and emerging evidence and new policy objectives.

Comments on the scheme or on NHSFV's work in gender equality can be sent to:

The Staff Governance Team
NHS Forth Valley
Carseview House
Castle Business Park
Stirling
FK9 4SW

GLOSSARY of Terms

Commission for Equality and Human Rights (CEHR)

This organisation will come into being in October 2007. It will bring together the Equal Opportunities Commission, the Disability Rights Commission and the Commission for Race Equality. It will also serve as the national body for three new areas of discrimination: age, religion and sexual orientation, as well as human rights.

Direct Discrimination

Less favourable treatment of a person on gender grounds compared with the treatment or likely treatment of a person of another gender in the same or similar circumstances. This could include giving a job to a male applicant when a female applicant has similar or better qualifications.

Equality Act 2006

The legislation which legally created the Commission for Equality and Human Rights and introduced the Gender Equality Duty.

Equality Bill

A bill introduced to Parliament which became the Equality Act in February 2006.

Fair for All – Gender

A partnership between the EOC Scotland and the Scottish Executive Health Department's Fair for All initiative.

Gender, Sex and Transsexual

Gender: Refers to roles, attitudes, values and behaviours given to women and men by society and can vary depending on which society we live in. For example, traditionally a gender role would suggest that women should look after children while men continue to go to work.

Sex: Refers to the biological and physical differences between men and women. People are born male or female, learn to be girls or boys and grow into women or men.

Transsexual: Is a person who intends to, is undergoing or has undergone gender reassignment to change sex. It means that a person identifies with the sex other than that on their birth certificate or feels they were born in the wrong body.

Gender Equality Goals or Objectives

Goals set by public authorities by which they aim to tackle gender inequality. Examples include promoting flexible working for men or ensuring public transport is more accessible for women.

Gender Equality Scheme

A scheme put in place by a public authority which sets out their gender equality goals, priorities or objectives. It includes tasks, timeframes, and who is accountable for delivering each area.

Gender Impact Assessment

An assessment of services and policies in regards to how they affect men and women. Public authorities can use the findings to redesign services with the needs of each gender in mind.

Indirect discrimination

When an apparently neutral criterion is applied to everyone but can only be met by a considerably smaller proportion of people from one gender and is to their detriment, which cannot be objectively justified. For example, an unnecessary requirement to be under 5' 10" would discriminate against men; a requirement to work full-time or refusal to allow flexible working might be unlawful indirect discrimination against women.

Occupational Segregation

When men or women predominate in certain jobs or industries. Examples include men working in construction or women in childcare.

Screening

The process of identifying services or policies which have a positive or negative impact on men or women. It is often used before a full gender impact assessment of service or policy.

Sex Discrimination Act 1975

Act passed by parliament in 1975, stating that it is unlawful for a person to be treated unfavourably on the grounds of their sex. For instance, your employer may have treated somebody of the opposite sex more favourably in similar circumstances. Under the SDA, this behaviour is against the law and therefore the employer can be prosecuted.

Stakeholders

Any individuals or organisations which have an interest in, or could be affected by a policy. In a school stakeholders would include pupils, teachers, parents, staff, unions, local employers and people who use the school facilities.

Statutory

Something that has been approved by Parliament and that legally has to be done. For example, local councils have a statutory duty to provide education services for children living in their area.

NHS FORTH VALLEY GENDER EQUALITY ACTION PLAN**JULY 2007 – JUNE 2010**

The agreed high level objectives are as follows:

- To prioritise Gender Equality along with the other Equality and Diversity strands – within NHSFV’s top strategic priorities within its Strategy Map.
- To ensure that Gender Equality is advanced within the Fair for All and Staff Governance agenda.
- To ensure that gender equality and gender sensitive needs and services are better understood based on research and communications, by all staff and in particular by those who plan and deliver services including and as a priority in the national target areas of Mental Health, Cancer and CHD.
- To support local NHSFV managers to provide health services and employment opportunities which are appropriately gender sensitive through impact assessments; training; PFPI work; and flexible employment opportunities.
- To ensure equal pay for work of equal value through robust job evaluation and workforce modernisation developments.
- To continue to consult with stakeholders so that our work is informed by identified need.
- To continue work to mainstream gender equality and wider equality strands across all NHSFV functions and policies.

These will be delivered through the attached Action Plan which is laid out in common with NHSFV’s Race and Disability Action Plans over 5 sections as follows:

- Leadership and Energising the organisation
- Demographic profile
- Access and service delivery
- Human Resources
- Community development

1. Leadership and Energising the organisation

| Action | Outcome | lead | timescale | progress |
|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------|-----------------|----------|
| <p>External and Internal consultation and involvement of men, women and transgender groups in the development of the Gender Equality Scheme</p> <p>To develop user friendly information/packs on Gender equality</p> | <p>GES informed by stakeholder consultation process</p> | <p>Staff Governance Team</p> | <p>May 2007</p> | |
| <p>All Executive Directors, General and Senior Managers and Clinicians will use their leadership position to promote gender equality and eliminate any harassment & discrimination within their departments and ensure that appropriate awareness raising and training is implemented</p> | <p>All senior managers will: Be informed about their responsibilities for promoting gender equality and monitoring and will:</p> <ol style="list-style-type: none"> 1. Include an objective relating to equality within their annual objectives. 2. Provide plans for ensuring that awareness raising and appropriate training is undertaken by their staff. | <p>Senior manager cohort</p> | <p>07/08</p> | |
| <p>Each CHP, Acute Service and Corporate service will identify local policies, procedures and guidelines that deliver the prioritised Gender</p> | <p>Gender equality embedded within NHS Forth Valley and regarded as an integral part of the Corporate agenda and built into</p> | <p>General Managers</p> | <p>07/08</p> | |

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| <p>Equality impact assessment requirements and build these into local work plans.</p> | <p>all work plans.</p> | | | |
| <p>Regular progress reports on the action plans outcomes will be presented to the NHS Board, Area Partnership Forum, PFPI Committee, Staff Governance Committee, and other relevant groups</p> | <p>Gender equality profile being raised and reported on at highest level within NHS Forth Valley.</p> <p>NHS Board</p> <p>Area Partnership Forum</p> <p>Staff Governance Committee</p> <p>Patient Focus Public Involvement Committee</p> | <p>Fair for All Operational Group</p> | <p>07/08</p> | |
| <p>Consult with key organisations and groups involved in Gender Equality work nationally and locally and report on these to the Fair for All Operational and Development Groups</p> | <p>Effective links established with :</p> <p>SEHD Equalities Unit</p> <p>SEHD Diversity Task Force</p> <p>NRCEMH Lead Network</p> <p>NRCEMH Policy Network</p> <p>Equal Opportunities Commission Scotland</p> <p>Fair for All Gender</p> | <p>Gender Equality Lead</p> | <p>07/08</p> | |

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| Gender Impact Assessment will be introduced to joint Health Improvement Planning Groups | A Joint Partnership Agreement between NHS Forth Valley and Local Authorities to undertake gender impact assessment | Planning Directorate | 08/09 | |
| The Fair For All Development Group at its quarterly meetings will review progress on NHS Forth Valley's Gender Equality Scheme. It will agree for publication an annual gender equality progress report reviewing progress made | Prioritise NHS Forth Valley functions for Gender impact assessment Advising NHS Forth Valley Board regarding gender issues and identify areas for action Consider complaints and agree monitoring requirements | Fair for All Operational Group | 07/08 | |
| Ensure that communications/public relations activity supports gender equality, both in internal and external communications . | Use of inclusive images and appropriate language in publications | Communications Dept | 07/10 | |
| Review the Gender Equality Scheme to ensure that targets set for year 1 have been achieved and identify actions for years 2 and 3 | Fair For All annual report is published and a revised action plan for 2008/09 is produced | Fair for All Operational Group | 08/09/10 | |

2. Demographic Profile

| Key Actions | Outcomes | Lead | Timescales | Completed |
|--------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------------------------------|-----------------------------------------------|------------|-----------|
| Continue to use local demographic information to inform GES and future work in terms of planning and delivering services | Future work is informed by up to date information | Information Services and Gender Equality Lead | 07/10 | |
| Continue to assess profile of NHSFV workforce to assess Gender specific issues – e.g. changes in the part-time full time make up of staff; Profile of workforce | Workforce information informs developments relating to gender equality | Head of Workforce Planning | 07/10 | |
| Continue to use outputs of demographic assessment plus known factors to build on gender objectives and actions. | Gender objectives are based on expressed/identified need | Information Services and Gender Equality lead | 07/10 | |

3. Access and Services Delivery

a. Monitoring of Uptake of Services

| Key Actions | Outcomes | Lead | Timescales | Completed |
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| Collection and reporting of patient gender information | Data available to inform planning and delivery of services as a priority data on mental health/CHD and cancer patient profiles will be collected for analysis and future planning | Information Services | 07/08 | |
| The annual report published by the Director of Public Health will include information on Gender Equality | Gender work continues to be informed by professional analysis | DPH | 07 | |
| To support service managers in identifying gender actions through assessment of functions and policies and the established EQIA processes | Local services identify key gender impact and actions | Fair for All Operational Group | 07/10 | |
| To cascade the outputs of the consultation exercise to key service leads for consideration | Service managers informed | Gender Equality Lead | 07 | |
| To consider and advise on gender issues in terms of accessibility of services | Facilities are equally accessible for all genders | PFPI | 07/10 | |
| To continue to have a mechanism for feedback from patient, visitors and staff to advise of improvements that are needed to accessing services, facilities and to the environments | Continue to enhance current services and practice | PFPI | 07/10 | |

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| To work with lead officers in Mental health/cancer/CHD services linking with national priorities to assess the gender equality issues relating to these services | National priority work is targeted | Fair for all and MCN/other lead officers | 07/10 | |
| To work collaboratively with Sexual health Strategy Lead officers to ensure continued focus on gender issues is achieved | Sexual health strategy is informed by work on gender equality | Lead officer on sexual health strategy/gender equality lead | 07/10 | |
| Focused work is prioritised on Men's and women's health issues and on transsexual health issues | Services can be informed by assessment of need | Lead managers | 07/10 | |

b. Gender Equality Impact Assessment

| Key Actions | Outcomes | Lead | Timescales | Completed |
|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------|-------------------------------|------------------|
| Continue to implement NHS Forth Valley's Equality Impact Assessment framework | All existing service functions and policies and practices reviewed through the equalities impact assessment framework for initial impact assessment | All managers with department responsibilities | 07/10 | |
| All heads of services to ensure initial equality impact assessments of services and policies for relevance to gender equality to ensure there are no adverse effects because of gender | Information can be used to better inform planning and delivery of services | General Managers | 07/08 as per agreed timetable | |

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| A programme of Equality Impact Assessment Training will be provided to senior staff to support them in undertaking Equality Impact Assessments | EQIA processes well understood | Equality and Diversity Project Manager | August 2007 - 2008 | |
|------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------|----------------------------------------|--------------------|--|

3.3 Complaints

| Key Actions | Outcomes | Lead | Timescales | Completed |
|---------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------|----------------------------|------------|-----------|
| Highlight concerns that are raised under the complaints process and patients surveys on gender equality issues and action plans are prepared to address these | Learning points from patients complaints received by NHSFV Complaints department are acted on | Head of Complaints Service | 07/08 | |
| Review the complaints procedure in relation to gender equality and using consultation feedback | Ensure that information is available on how to make a complaint | Head of Complaints Service | 07/08 | |

4. Human Resources – Promoting Gender Equality in Employment

4.1 Awareness, Training and Development

| Key Actions | Outcomes | Named Person | Timescales | Completed |
|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------|----------------------------|------------|-----------|
| All line managers will identify through Personal Development Plans individual learning needs relating to the promotion of gender equality and the delivery of gender sensitive services | Knowledge on gender issues is improved and service delivery also enhanced | All line managers | 07/08 | |
| Conduct general awareness sessions of the Gender Equality Duty for staff To provide Gender specific training as part of the Fair for All portfolio for all staff | GED is understood within the context of e&d work | Fair for All | 07/08 | |
| Staff information relating to gender is assessed | Collection of information to populate electronic systems for report generation | Head of Workforce Planning | 07/08 | |
| Ensure that specific action is ongoing to promote gender equality within NHS Forth Valley | General and targeted training being made available to all staff | Fair for All Group | 07/08 | |
| Evaluation of effectiveness of training | Improved training | Fair for All Group | 07/08 | |
| Introduce gender equality duty sessions within the general induction programme including general and specific duties | Staff will understand their responsibilities in accordance with the Gender Equality duty | Fair for All Group | 0708 | |

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| Equal Pay Undertake an equal pay monitoring exercise to establish any inequalities | Inequalities identified and work prioritised to address them | HR Directorate | 07 | |
|---------------------------------------------------------------------------------------|--------------------------------------------------------------|----------------|----|--|

4.2 Employment Monitoring

| Key Actions | Outcomes | lead | Timescales | Completed |
|----------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------|----------------------------|------------|-----------|
| Ensure that robust systems continue to be developed to ensure that gender information relating to staff is recorded and stored appropriately | Information being readily available to generate reports | Head of Workforce Planning | 07/08 | |

4.3 Human Resources Policy Review

| Key Actions | Outcomes | Lead | Timescales | Completed |
|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------|--------------------------------------------|-----------|
| Development of Equality and Diversity policy | To ensure that mechanisms are in place for staff to address gender issues Ensure that NHS Forth Valley comply with the Gender Equality Employment Duty | Area Policy Steering Group | In line with national PIN Policy launch-07 | |
| Assess the Dignity at Work Policy in light of gender scheme To use and continue to develop dignity at work and other policies and procedures to support individuals | Ensure that gender equality issues are understood Staff are provided with appropriate support | Head of Staff Governance | 07/08 | |

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|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------|-----------------------------------------------------|-------|--|
| To roll out the pilot Diversity Champions network across NHSFV following the initial pilot | Additional level of trained support is developed for the workforce | Fair for All Group | 07/08 | |
| Ensure in the implementation of the Flexible Working policy that the same provisions are open to all staff irrespective of gender. Ensure that Maternity & Paternity Leave policies are implemented consistently and fairly and that Breastfeeding facilities continue to be provided in line with the Breastfeeding Policy. | Ensure that the same provisions are open to all staff | Head of Staff Governance Operational HR Team | 07/08 | |
| Working with fair for all LGBT develop appropriate and effective : <ul style="list-style-type: none"> • Communications to promote equality for transgender people • Develop sensitive training programmes covering transgender issues which deliver information and instil confidence and understanding | Needs of LGBT individuals are better understood and appropriate service developments can be considered | Fair for All | 07/10 | |

5. Community Development – Promoting Participation and Involvement

| Key Actions | Outcomes | Named Person | Timescales | Completed |
|------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------|--------------------|------------|-----------|
| Circulate and discuss the Gender Equality Scheme with community organisations and groups such as Patient's | Make sure that local people as appropriate are aware of the scheme and have the opportunity to comment on its priorities | Fair for All Group | 07/08 | |

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|----------------------------------------------------------------------------------------------------------|----------------------------------|---------------|-------|--|
| Panel and CHP Public Partnership Fora | | | | |
| Share results of gender equality impact assessments and findings with appropriate groups and individuals | Improved public consultation | Service Leads | 07/10 | |
| Use focus group consultation arrangements to continue to inform future Gender equality work. | Work is based on identified need | Service Leads | 07/10 | |