



# North Ayrshire Inequalities Strategy Framework Consultation Draft



**2014-2017**

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## **1. Foreword**

To be developed with CPP Chair.

## **2. Vision**

Our shared vision for Community Planning Partners in North Ayrshire is “North Ayrshire – A Better Life”.

In order to achieve this vision we require to

- Reduce local inequalities of outcome

## **3. Objectives**

To reduce local inequalities of outcome we will require to:

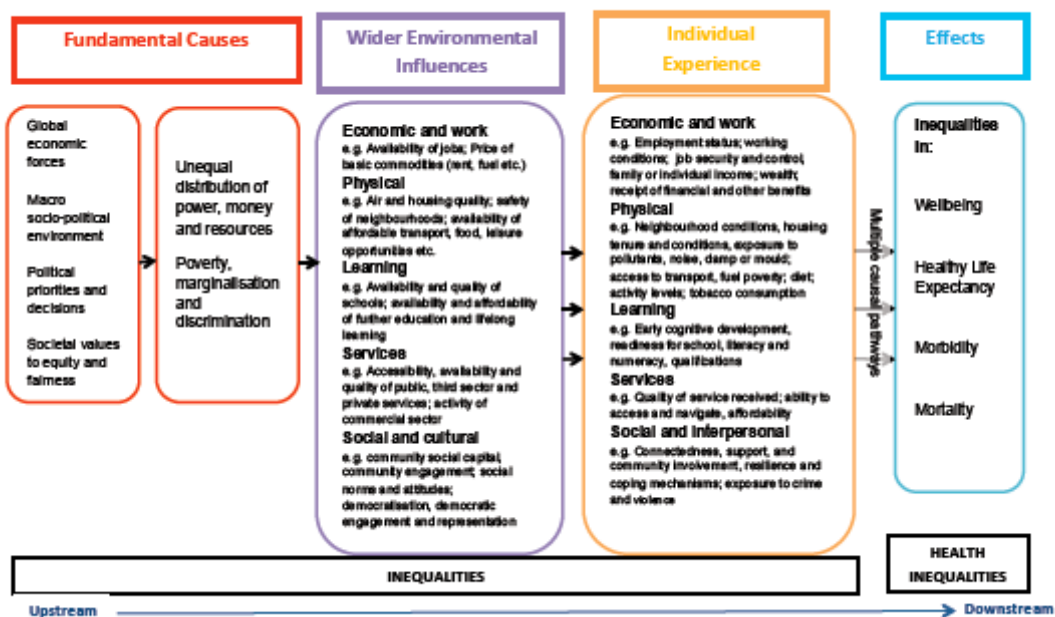
- Focus Community Planning Partner activities towards reducing inequalities gaps and achieving a faster rate of improvement among disadvantaged neighbourhoods and some population groups
- Tackle inequalities in our local neighbourhoods and with the most vulnerable in our communities by implementing proportionate universality and effective targeting
- Change and influence mainstream universal services, through effective commissioning, to ensure they are delivered with a scale and intensity proportionate to need across all socioeconomic groups
- Link to SOA measures to ensure ‘Golden Thread’ across all CPP priority areas

### **3.1 Focusing on the Causes of Inequalities**

The following model from NHS Health Scotland’s Health Inequalities Policy Review for the Scottish Ministerial Taskforce for Health Inequalities, 2013 illustrates the factors, which, when distributed unequally in society result in inequality of outcome, such as individual experiences of employment, learning and access to services. This leads ultimately to inequalities in income, educational outcomes, life opportunities and health and wellbeing across socioeconomic groups.

### 3.2 What works to address Inequalities?

Figure 9: Health inequalities: theory of causation



Although many of these factors can be influenced through the efforts of the Community Planning Partnership, it is also recognised that action on the ‘fundamental causes’ requires action nationally.

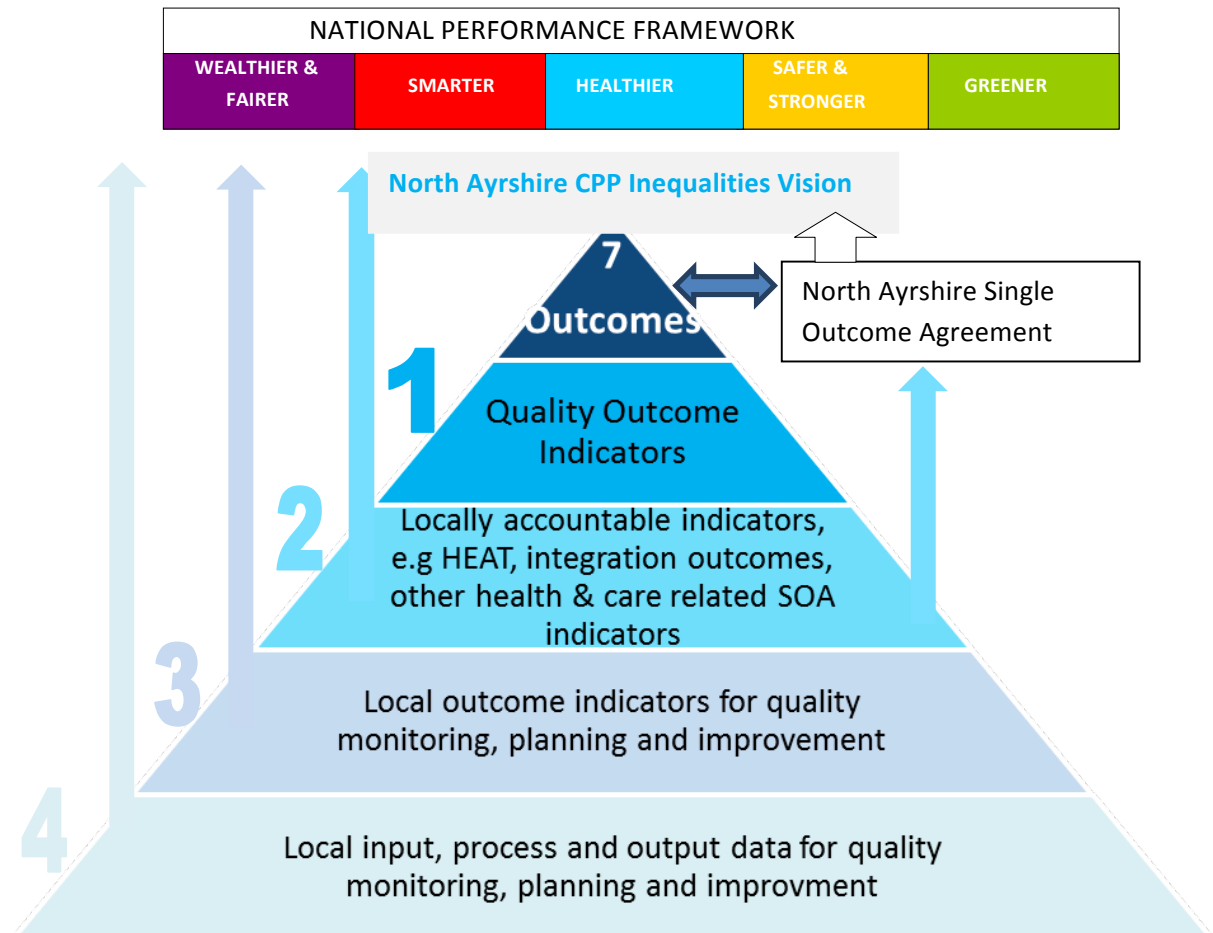
### 3.3 North Ayrshire SOA Outcomes

The North Ayrshire SOA has a key set of inequalities focused outcomes.

- Children’s health and wellbeing is improved by breaking the cycle of poverty, inequality and poor outcomes
- Worklessness is at the Scottish level and there is less inequality within North Ayrshire
- North Ayrshire is a safer place to live

However these are the start of the performance journey and require linked to intermediate and specific activities as described in diagram 1:

**Diagram 1 – Performance Framework**



#### **4. Needs and Strengths**

The following key criteria for focus have been identified:

- ❖ Reducing inequalities throughout the whole population of North Ayrshire with a scale and focus proportionate to disadvantage and need.
- ❖ Targeted support to the 5% most deprived as defined by the SIMD
- ❖ Focusing on reducing the gap between the most and least disadvantaged communities and population groups. Some tools to support this work are:

- ❖ Top 5% of SIMD as this captures issues of worklessness and employability
- ❖ A focus on SIMD domains, recognising the need for Community Planning Partners to focus activities towards reducing inequalities gaps and achieving a faster rate of improvement among disadvantaged communities and population groups.
- ❖ Recognise the challenge that people face when living in isolated rural communities in North Ayrshire
- ❖ Recognise that some vulnerable population groups may experience discrimination and therefore require more support.

## 5. Key Success Factors

- ❖ Children have the best start in life
- ❖ Access to sustained and good quality employment
- ❖ Vulnerable individuals have the opportunity to maximise their potential
- ❖ Communities have a wide range of assets and capabilities to reduce dependency of public services

## 6. Priority areas of interest

Children and Young People	<ul style="list-style-type: none"> <li>• Early Years (including Early Intervention and Prevention)</li> <li>• Parenting and Family Support</li> <li>• Curriculum for Excellence/Educational Outcomes</li> <li>• Children and Young People’s Health Strategy (including sexual health and mental health)</li> <li>• Vulnerable and disadvantaged children (including Looked After Children, Children, children experiencing homelessness, parental substance misuse and domestic abuse, and children with disabilities)</li> <li>• Improved processes to identify, assess and plan for children at risk</li> <li>• Meaningful employment for young people</li> </ul>
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	<ul style="list-style-type: none"> <li>• Workforce planning</li> </ul>
Carers	<ul style="list-style-type: none"> <li>• Focus on young carers</li> <li>• Improvements in health and wellbeing for Carers and Kinship Carers</li> </ul>
Adults and older People	<ul style="list-style-type: none"> <li>• Income maximisation, particularly for people with young families</li> <li>• Improve outcomes for people involved in the Criminal Justice particularly women with children</li> <li>• Improving access to work for people affected by mental health and learning disability</li> <li>• Improving outcomes for people involved in the Criminal Justice system leading for a reduction in their reoffending</li> </ul>
Communities and Place	<ul style="list-style-type: none"> <li>• Early intervention and prevention using targeted 'active outreach' approaches in neighbourhoods</li> <li>• Asset based co-production approaches working with communities and the third sector to develop sustainable empowerment, resilience and greater cohesion</li> <li>• Building capacity of primary care to support deprived communities</li> <li>• Vacant and Derelict Land Strategy to support regeneration opportunities.</li> </ul>

### Priority Actions

Children and Young People	<ul style="list-style-type: none"> <li>• Extend financial advice available from time of conception and in to the early years (Maternity Services and Early Years Centres) across Health Services including Primary Care, Mental Health and Community Nursing Services</li> <li>• Children Services to offer quicker permanent solutions to support children from vulnerable families</li> <li>• Improve emotional and mental health of young people to improve their self confidence and self esteem, building their resilience and reducing levels of self-harm.</li> <li>• Develop pathways for children affected by parental</li> </ul>
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	<p>addiction issues to positive destinations</p> <ul style="list-style-type: none"> <li>• Improve educational and care outcomes for Looked After Children</li> </ul>
Carers	<ul style="list-style-type: none"> <li>• Explore “Keep Well” health checks support for Carers and Kinship Carers</li> </ul>
Adults and older People	<ul style="list-style-type: none"> <li>• Explore options to develop a bridging service for those furthest away from the job market assessing the impact of the ‘Glasgow Works’ with NAC Regeneration Service and Irvine Bay Regeneration Agency</li> <li>• Align Health and Social Services within neighbourhoods in-reaching to Primary Care to provide specialist support to local General Practitioners.</li> <li>• Build a health and wellbeing approach across all CPP Partner services</li> <li>• Build a preventative approach and build integrated service models across partners to support people at earlier stages.</li> <li>• Support individuals on their release from prison into a positive role in the community.</li> <li>• Develop ‘active outreach’ model for priority improvement areas e.g. financial advice family support services, smoking cessation in pregnancy, sexual health services</li> <li>• Reduce impact of fuel poverty by implementing Housing Strategy.</li> </ul>
Communities and Place	<ul style="list-style-type: none"> <li>• Extend and join up asset/co-production work in neighbourhoods using the foundations laid by Community Learning and Development &amp; ABCD project.</li> <li>• Introduce traffic calming to improve outcomes for young people</li> <li>• Improving environmental access, play, leisure and green space, promoting active living (NAL)</li> <li>• Deliver Vacant and Derelict Strategy to support regeneration</li> </ul>
Community Planning Partners	<ul style="list-style-type: none"> <li>• Develop a joint performance reporting system across the partnership using RIPE Group</li> <li>• CPP partners to implement inequalities self assessment tool</li> </ul>



	<ul style="list-style-type: none"><li>• CPP Partners to develop a Equalities Mapping tool showing gaps in practice and neighbourhood inequalities</li></ul>
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## **7. Identifying the Gaps in Partners Practice**

### **a) CPP Partners – Inequalities self assessment**

Partners to undertake a survey of existing levels of inequalities sensitive practice across partnership.

Appendix 1 highlights some proposed questions

### **b) Inequalities Service Mapping**

Partners to identify areas of good inequalities practice, with in each of their service areas.

These examples will be used across the partnership on which to build and commission new work to close inequalities in practice and neighbourhoods.

Those examples shown below of good practice which may be short term require to be mainstream change to support a Health and Wellbeing approach, focussed on early intervention and prevention across all CPP Services: -

Examples provided:

- Early Years Services
- Family Nurse Partnership
- School meals during the holiday periods for vulnerable families
- Money Matters
- Keep Well
- Vulnerable pregnancy service
- Homelessness and Housing support services
- Multi-agency Problem Solving group
- MADART
- Home/school workers
- Campus cops
- 16+ school co-ordinators to ensure positive destinations

- Extensive Outreach services for young people
- Irvine Royal and Ayrshire College joint campus
- Activity agreements for young people
- Mentor for people in criminal justice system.
- Choose Life whole system approach to reduce suicide
- DWP Youth contracts
- DWP wage incentives for small businesses to support 18-24 year olds
- DWP work choice for people effected by disabilities
- Choose Life whole system approach to reduce suicide

Our local college supports inequalities in a number of ways

- They have a strategic priority to improve inequalities
- Liaison officer working with Police Scotland to support vulnerable young people
- Providing access course at all levels
- Offering community course to reach those furthest away from the labour market
- Through our NHS liaison officer who provides education, training and support on addictions and mental health to students, targeting the most vulnerable
- Offering advice and guidance on accessing college and the financial help available
- Supporting individual development and support plans
- Delivering employability skills

## **8. Action Planning**

The Partnership requires to identify two key actions for the 2014/15 year which will allow the testing of the performance framework and inequalities practice mapping tool.

These actions will have a named lead, timescales and identify resource implications.

Action 1      CPP Partners to map inequalities practice

Action 2      CPP Partners to develop inequalities map to neighbourhoods

## Appendix 1 – CPP Partners – Inequalities self assessment

Examples of key questions:

- Are inequalities considered at the outset of policy, strategy and service development?
- What tools are employed?
- Do you take action to remove negative impacts at the planning stage?
- How do you ensure that services being delivered to the whole population will not result in an increase in inequalities by disproportionately benefiting the most affluent?
- How do you monitor and evaluate the impact of your service on inequalities?
- How do you target those population groups known to experience the greatest barriers e.g. most deprived communities, homeless population, those with a learning disability? Do you offer more intensive support to those groups?
- How is action to tackle wider socio-economic determinants of inequalities integrated into practice e.g. do staff enquire about the work and income/benefits status as part of assessments? Do staff signpost/refer to employability/financial inclusion services?
- Do spending and investment decisions take account of inequalities and if they do what approach is taken e.g. reducing the gap, targeting the worst off?
- How do you work in partnership to ensure a holistic approach e.g. considering housing, transport, community safety?
- How do you engage with users and communities? Is this approach underpinned by empowerment and asset and skill development?
- How are goods and services procured? Do you include community benefits clauses? Do you consider how procurement practices will support economic development, particularly in the most deprived communities in North Ayrshire? Do you engage social enterprises?
- Do employment practices in the organisation support and encourage opportunities for those furthest from the labour market?
- How have services changed over the last two years?
- How have behaviours of CPP partners changed over the last five years?