



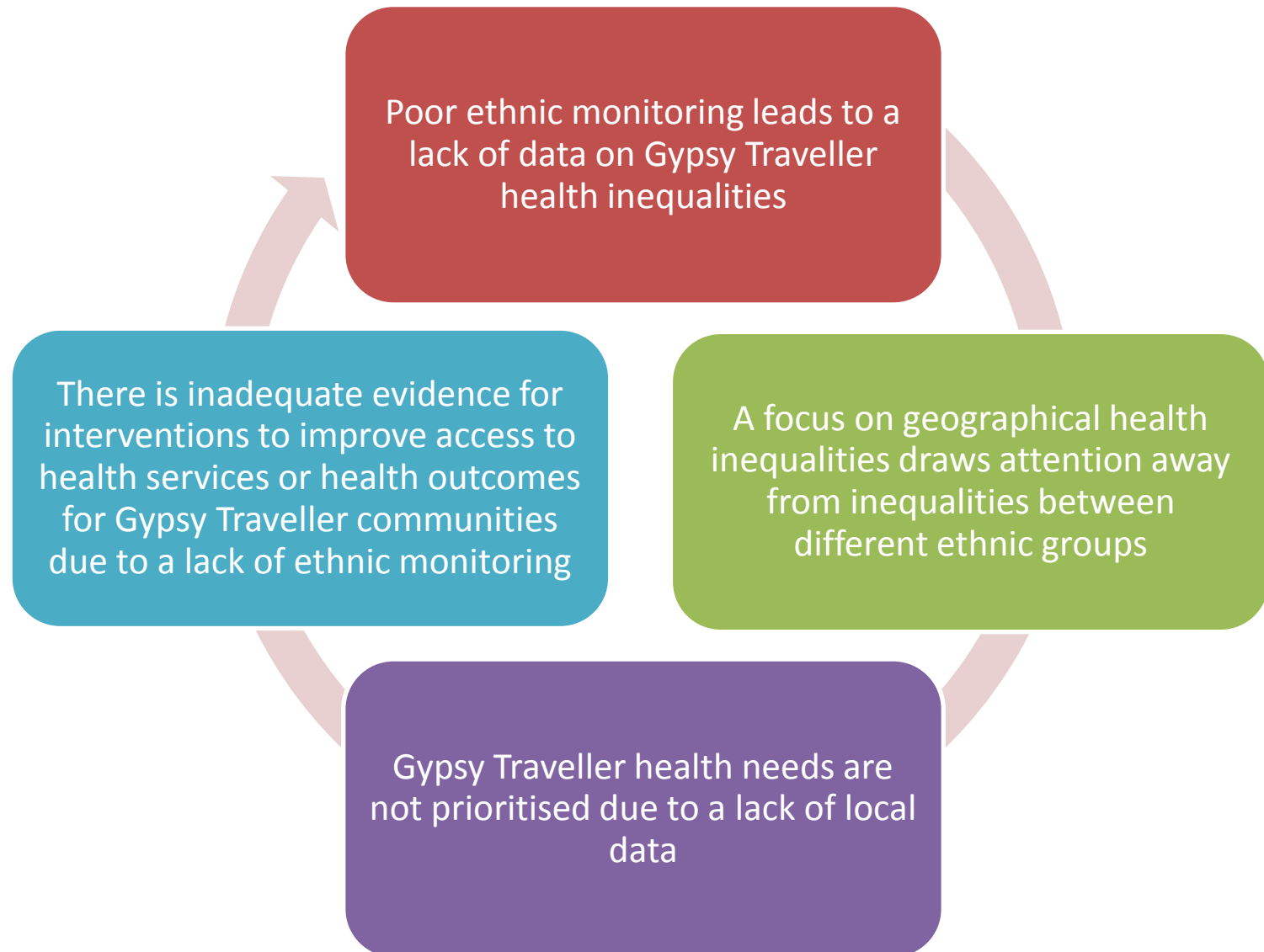
# **Monitoring and evidence based commissioning**

**Friends, Families and Travellers**

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# A Cycle of Exclusion



# Health Inequality Duty

- The health inequality duty is a general duty and commissioners are responsible for identifying health inequalities locally taking a 'whole population' approach.
- The Health and Social Care Act 2012 conveys a legal duty on CCGs to reduce inequalities in **ability to access** health services and **outcomes achieved**
- “Publishing guidance or policies, or making decisions without demonstrating how you have paid due regard to the Duty leaves the organisation open to legal challenge.”
  - NHS Guidance for [NHS commissioners on equality and health inequalities legal duties](#)

# 2011 Census and the NHS Data Dictionary



- 'Gypsy/Traveller' was included in the 2011 Census for the first time
- The NHS Data dictionary has not yet been updated to include 'Gypsy Traveller'
- This lack of inclusion significantly impedes the ability of CCGs to identify inequalities in access to services and health outcome

# Ethnic Monitoring and Trust



- Improving ethnic monitoring takes more than including categories on forms
- An environment in which Gypsies and Travellers have the confidence to declare their ethnicity without fear of prejudice or discrimination must be fostered
- Investment in building cultural competency relationships of trust between professionals and Gypsy Traveller communities is crucial

# Inclusive JSNAs

**As a minimum a good JSNA should:**

- Provide an accurate picture of the demographics of vulnerable groups
- Include health and social needs
- Describe how existing services meet needs and where there are any gaps in provision
- Use a range of qualitative and quantitative data

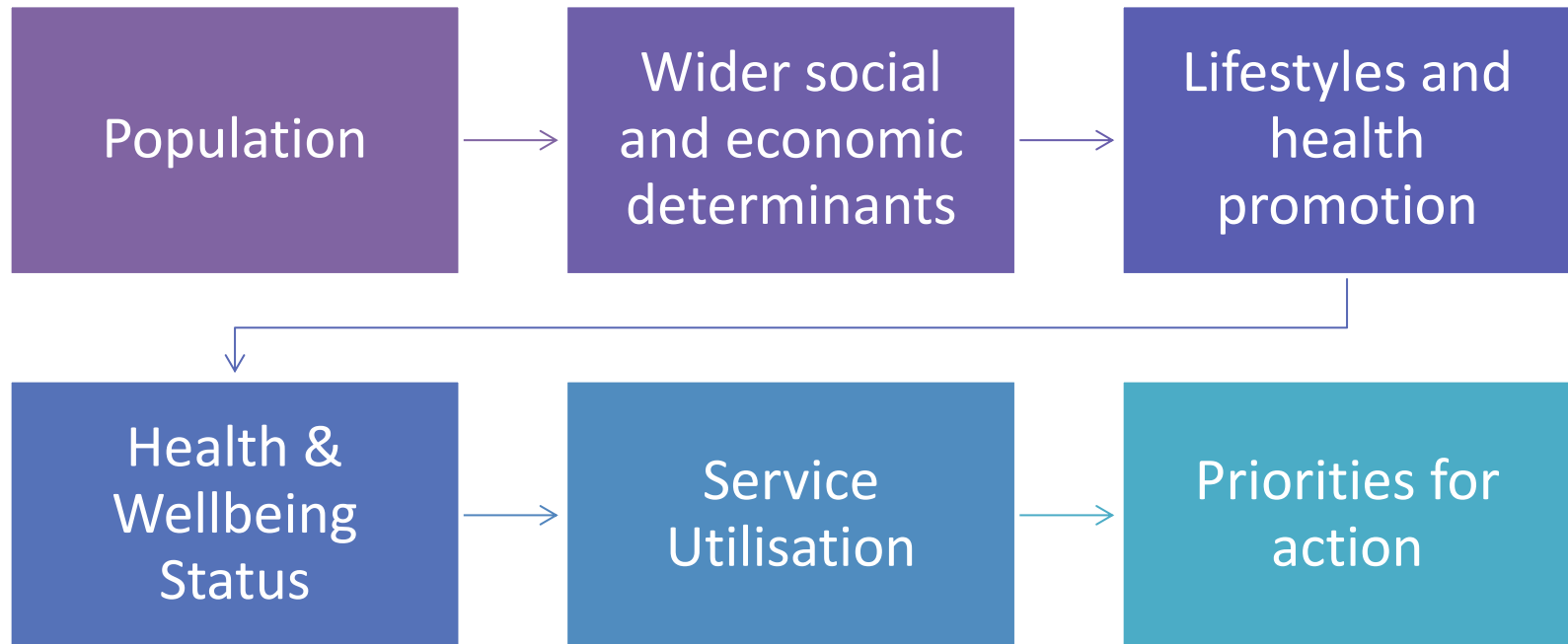
Improving access to health care for Gypsies and Travellers, homeless people and sex workers

An evidence-based commissioning guide for Clinical  
Commissioning Groups and Health & Wellbeing Boards



RCGP Clinical Innovation and Research Centre (CIRC)  
Paramjit Gill, Una MacLeod, Helen Lester and Adrian Hegenbarth  
September 2013

# JSNAs should include information on Gypsy Traveller communities with reference to –



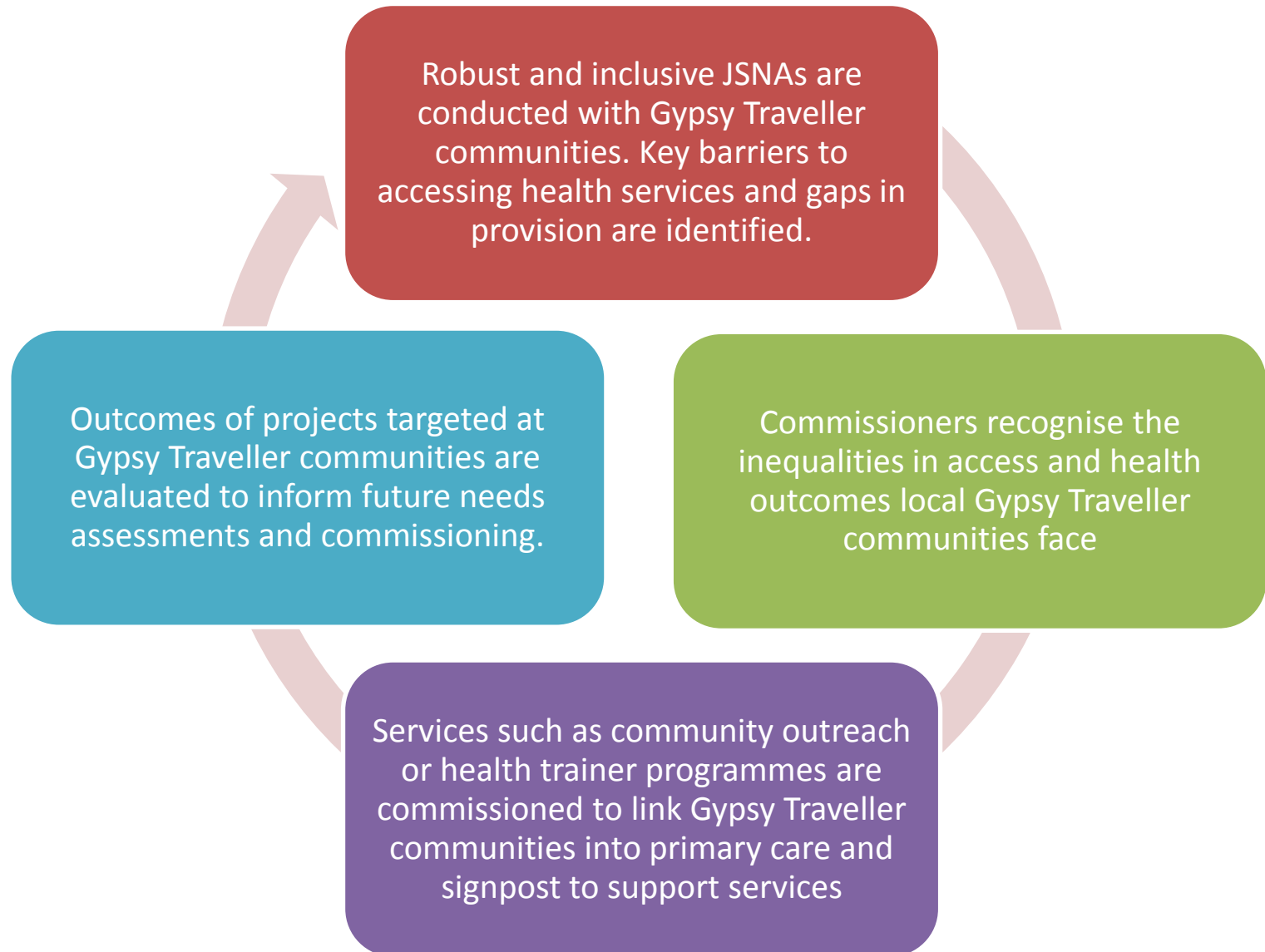
# Gypsy Traveller People are experts in their own health

- Use peer interviews, focus groups and Gypsy Traveller forums to gather community insight.
- Engage with grassroots Gypsy Traveller organisations. The National Federation for Gypsy Traveller Liaison Groups has a list of members organised by region [available here](#).
- Engage with local organisations that work with Gypsy Traveller people. FFT have a [services directory](#) of Traveller support services.





# A cycle of Inclusion



# CCG funded community engagement influencing commissioning

Following a survey into the use of urgent care services the recommendations were made and actioned –

- 3 GP surgeries and the walk-in centre were given Gypsy Traveller cultural awareness training
- Information regarding duties to register patients with no fixed abode and lack of utilities bill was provided to GP surgeries
- A help card was produced and distributed to support access to GP surgeries –



- ☒ I need help filling in forms
- ☒ I need help reading and understanding
- ☒ I would like a GP who is the same gender as me
- ☒ I would like to speak to someone confidentially

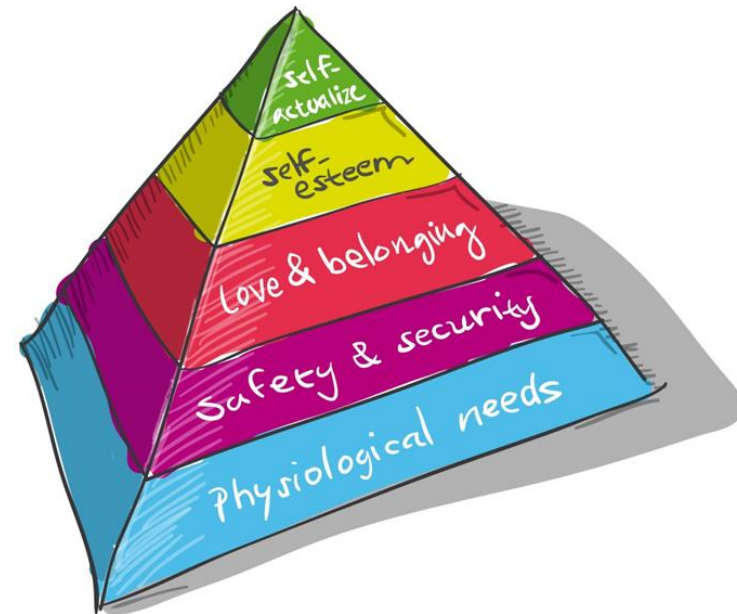
# The Challenges

- Austerity impacts directly upon the most vulnerable people in our society.
- How can we minimise the damage and make a difference to the lives of people hardest hit by austerity.
- How can small organisations remain intact in order to do the work that is needed more than ever.



# The Way Forward

- The challenges facing marginalised people and communities are often not that different:
  - **Recognition** of trauma (whether it is experienced by individuals or communities).
  - **Protection and Safety** for victims of trauma.
  - **Access** to coordinated health and social care.
  - **Support** with health literacy.



# How can we achieve this?

- Put your money where your mouth is – **Funding**. If we really want to reduce inequalities.
- **Collaboration and Partnership Working**
- **Unite** – We need a charter for Inclusion – Marginalised groups need to work together.



**Any Questions?**