Bridging the Gap: exploring inequalities education
BACKGROUND

A number of policy drivers have led to the development of the NMAHP health inequalities educational resource. Better Health, Better Care (Scottish Executive, 2007) called for a greater emphasis to be given to preventative health care and early intervention, particularly in areas where health is at its poorest, and this had also been reflected earlier in Delivering Care, Enabling Health (2006) the NMAHP response to Delivering for Health.

Delivering Care, Enabling Health described the cultural, capability and capacity issues that would underpin the NMAHP contribution to implementing current health policy, and concluded by setting out actions and deliverables across a range of key issues. It stated that **NMAHP pre-registration programmes should have a strong focus on health inequalities.**

Scoping of currently available educational provision related to health inequalities and anticipatory care within NMAHP pre and post-registration education was carried out by NES in summer 2007. The report of the scoping acknowledged that the issue of Health inequalities was embedded in all pre-registration curricula, although the term was rarely explicitly mentioned or explored. The NES Health Inequalities Steering Group, viewed health inequalities in it’s widest sense. Consequently, the main recommendation from the report was to develop a flexible pre-registration health inequalities on-line resource for students, practitioners and teaching staff.

In 2008 NHS Education for Scotland commissioned 'Bridging the Gap', an on-line health inequalities educational resource which was completed by September 2008.

Bridging the Gap aims to provide pre registration NMAHPs (Nurses, Midwives and Allied Health Professionals), and others involved in tackling health inequalities in Scotland, with a flexible learning resource that introduces some of the key evidence, issues and themes in health and social inequalities, and provides access to a range of further information on tackling health inequalities.

On completing the resource it is hoped that NMAHP students, educators and practitioners will be able to:

- Recognise and describe key features of the widening health inequalities gap in Scotland
- Demonstrate an understanding of the contributing factors (wider determinants) to health
- Explain the significance of health inequalities for NHS Scotland services
- Describe ways in which their practice is sensitive to the needs of all patients, carers, service users and colleagues.

It is also hoped that the practitioners will gain a greater sense of personal commitment to tackling health inequalities in their own practice, in positively influencing colleagues, and in recognising that while we face some major challenges in reducing health inequalities, even the smallest of actions can make a difference.
Since the commissioning of Bridging the Gap, there have been numerous contextual developments which may have implications for the future of the resource. *Equally Well: report of the ministerial task force on health inequalities* (Scottish Government, 2008a), *Equally Well: Implementation Plan* (Scottish Government, 2008b), and *A Force for Improvement* (Scottish Government, 2009) both highlight and make recommendations regarding the provision of education and training on health inequalities for the health and social care workforce.

“Staff across the professions and disciplines from a range of public services need to do their jobs in a way that is sensitive to the inequalities experienced by service users. They need new skills and the ability to work across organisational boundaries.” (Force for Improvement)

“NHS Scotland, in partnership with other key players in service delivery such as NHS Health Scotland, NHS Education for Scotland (NES), and education providers will actively contribute to ensuring that all workers are health inequalities-aware and literate and have the capability and capacity required to tackle health inequalities.” (Force for Improvement)

“The Government should establish a short-life, cross-sector working group to enable different sectors and those working within them to recognise and share common values, knowledge and skills and develop a joint educational/training framework to support practice which is sensitive to inequalities.” (Equally Well)

Bridging the Gap may be one useful response to support the above recommendations.

**Consultation**

A brief scoping, via email and direct contact, took place to explore how the resource has been used to date, and what potential it may have, so that recommendations for the future of the resource could be made if required.

Comments on the use of the resource to date, and recommendations for it’s future were sought from previous steering group members, Scottish Government, Community and Voluntary Sector representatives and those involved in using the resource including: Pre-registration NMAHP lecturers and Practice Education Coordinators and Facilitators. 15 people responded to the consultation from all the stakeholders above.

Since the resource went live in September 2008, the average monthly number of hits (taken across Sept 2008 – Aug 2009) to the resource’s webpage was 70. Importantly, a number of respondents had to review the resource before responding as had not been aware of Bridging the Gap and even then their interpretation of who it was available for, was misinterpreted.

“*it could be a useful resource for HEIs if it was available as open access for students to dip into*”

“*is the pack free-standing or is it used via facilitation?*”
Overall the responses to the resource were positive:

“*We are using it in this year’s curriculum*”

“I particularly like the easy access to the resources and references”

“It very much reflects some of the teaching we do with our students, and actually some of the activities are remarkably similar”

“It was easy to use and move through and provided an overview of some of the key issues”

“liked the way it is structured; its approach, much of its content and written in plain English”

“very useful document, liked the way it integrates both equalities and inequalities”

“useful references, up-to-date policies and draws on references from Scottish literature (as well as further afield)”

“Bridging the Gap is superb, well researched and referenced, I think it is of most use for future health care staff who are in training at present, in either part time or full time study.”

Useful references, up to date policies and draws on references from Scottish literature (as well as further afield)”

“… it will be useful for students who are trying to understand where health inequalities come from and why they are such a large part of the current government’s agenda.”

The comments received were specific to Bridging the Gap, but importantly some people indicated that the resource would be useful for the wider needs of the health and social care workforce and beyond, in regard to the workforce education response to the broader inequalities challenge. Respondents felt that the content was well selected and usefully presented, and that overall it was timely, and adaptable beyond the NMAHP educational workforce.

“(It) does have the potential to be useful and accessible to a wider audience than, nurses, midwives and allied health professionals”

“Potential to be taken to further education colleges”

“should state it is useful for all, not just pre-reg NMAHPs”

“Organisations from the third sector could well use it as a resource when they are providing health inequalities training, for example by taking a module and delivering it to a group of people.”

Respondents made some useful observations regarding the content and sustainability of the resource, which should be taken into account when making recommendations:

“some of the links don’t work”

“I need some flyers to help publicise”

“It would be useful for HEIs if the resource was regularly updated”

“The time taken to go through the resource is quite high, can students dip into it?”

“stronger approach to merely being sensitive to diverse needs, would suggest that workforce is encouraged along the path of inclusive practice, which consistently adheres to meeting diverse needs and consistently reflected in behaviour and care standards”
Recommendations for the resource

Taking the above and additional comments into account, a number of recommendations have been made for the NMAHP pre-registration resource in Table 1 below. See Table 2 for recommendations made as a consequence of the resource being made available.

The below table offers short-term recommendations for the resource:

**TABLE 1**

<table>
<thead>
<tr>
<th>Action</th>
<th>Timeframe</th>
</tr>
</thead>
<tbody>
<tr>
<td>Make current content easily printable – Health Inequalities matter e.g. similar to spiritual care matters</td>
<td>March 2010</td>
</tr>
<tr>
<td>Link to appropriate websites e.g. flying start and Effective Practitioner</td>
<td>March 2010</td>
</tr>
<tr>
<td>Marketing campaign – HEIs, HI Educators, chex snippets, IDEA website, NES focus, NMAHP forum, flyers, etc</td>
<td>March 2010</td>
</tr>
<tr>
<td>Professionalise - Map whole resource to KSF (Ann Cambell)</td>
<td>March 2010</td>
</tr>
<tr>
<td>Resource location – explore relocating webpage to simpler URL</td>
<td>December 2009</td>
</tr>
<tr>
<td>Update content – check links and stats, level 9 SCQF</td>
<td>December 2009</td>
</tr>
<tr>
<td>Make Bridging the Gap Multi-disciplinary</td>
<td>March 2010</td>
</tr>
</tbody>
</table>

Other possibilities include accrediting the resource, Test for the Best the resource, let users know who is using the resource (in intro), use the note for educators boxes (as used in spiritual care matters) and:

“after the reflection box useful to ask how identified issues would be addressed in own practice”

“some examples of how workforce have taken steps or can demonstrate that they have tackled inequalities in their day to day practice”

“use of graphics and photographs – a plate of chips not very inspiring”

A number of individuals recommended that the resource should be mapped to the KSF. However one colleague mentioned that rather than break down the resource, the whole resource itself should be evaluated against the KSF.

Other comments suggested that the resource should use a patient pathway approach as one of the activities and be more about inequalities practice ensuring that the practitioner understands their role in tackling inequalities.

The NES Health Improvement team should ‘test for the best’ the ‘Bridging the Gap’ resource and also look at the potential next steps in regard to how to respond to the inequalities challenge from an NHS workforce perspective. Therefore, before carrying out any of the above it should be agreed by the NES Health Improvement team that Bridging the Gap fits with the longer term agenda. It should also be agreed whether the scope of the resource remains focussed at the same level and professional group. If not, the resource will need to be amended.
Further recommendations

One of the most common suggestions from the respondents was that Bridging the Gap is a useful resource for the wider workforce, which has numerous implications, including responding well to Equally Well:

“There is an increasing recognition that staff across professions and disciplines need to do their jobs in a way that is sensitive to inequalities. Some relevant education and training is already taking place, for example equality and diversity training, leadership preparation and partnership working. Much of this training tends to focus on particular practitioner groupings and is sometimes specific to policy areas and types of service. In reality, there are many common aspects where learning could be shared.”
(Equally Well)

The below table offers longer-term recommendations for the inequalities workforce:

<table>
<thead>
<tr>
<th>Action</th>
<th>Timeframe</th>
</tr>
</thead>
<tbody>
<tr>
<td>Explore delivering health inequalities face to face workshops to senior managers in Health and social care</td>
<td>2010</td>
</tr>
<tr>
<td>Explore further links with Equality and Diversity agenda</td>
<td>2010</td>
</tr>
<tr>
<td>Inequalities framework for practitioners/ wider workforce or refer directly to PHSCF? Explore further use by FEI and HEI courses</td>
<td>2010</td>
</tr>
<tr>
<td>NES to link with SG cross sector group</td>
<td>March 2010</td>
</tr>
<tr>
<td>Re-review international health inequalities good practice examples</td>
<td>March 2009</td>
</tr>
<tr>
<td>Test for the Best the educational solution</td>
<td>February 2010</td>
</tr>
</tbody>
</table>

Bridging the Gap was developed for pre-registration NMAHPs in response to DCEH and an NMAHP need, via consultation with NMAHP education providers. Although it could be adapted for other professions and for people with varying degrees of Health Inequalities aspects to their role, it is just one approach available for the workforce to respond to the health inequalities issue in Scotland. Therefore further exploration should be carried out to ensure that if used for the wider workforce, it is the most appropriate educational solution and does not detract resource from other educational solutions.
References

Scottish Executive Health Department (2006) Delivering Care, Enabling Health, Scottish Executive, Edinburgh


