



CLINICAL EXCELLENCE, QUALITY & SAFETY

Equality Objectives

And

Five year work plan

2015-2020

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1. Introduction

This appendix to the Equality, Diversity and Human Rights Strategy shows our performance on Equality Objectives and how objectives have been established, evaluated and reviewed for the 5 year work plan 2015 to 2020 which includes;

- how the Trust is meeting the requirements of the Equality Act 2010 and the Public Sector Equality Duty and the work done to eliminate discrimination, advance equality and foster good relations
- the use of all Equality Information available to both:
 - evidence our equality and diversity performance within the Trust including feedback from the Equality Delivery System 2 (EDS2).
 - make informed decisions about new objectives
- our activities, outcomes and new plans

2. Process used for establishing the equality objectives

Equality objectives were developed by analysing shared themes from a number of information sources, including:

- Corporate - such as, considering the Trust's objectives and business plans and reviewing previous Single Equality Scheme action plans
- Workforce – for instance feedback from (a) the Staff Survey; (b) initial findings of a study examining BME representation in the workforce and : from (c) staff regarding performance of, and priorities for the Trust
- External looking at feedback from patients, partner organisations etc. from (a) previous years' patient surveys (b) patient experience tools and (3) as part of the EDS2 engagement process around performance and priorities

There are many potential objectives, but we are keen to focus on a number of key priority areas, based on their being achievable and also of most benefit across all protected groups, both for our service users and our workforce.

Each equality objective contributes to the Trust's wider goals of (a) ensuring fair and equitable access to employment and services for all and (b) that the workforce is competent and capable of responding to the needs of individuals, their backgrounds and human rights. See the key Equality Objectives in section 3 below as established in the Trust's first EDS grading- October 2013

3. The Trust's 4 Key Equality Objectives (As established October 2013)

These form the 4 generic key objectives for the Trust which the Trust aims to achieve through their broader objectives, actions and plans which are listed later in this document.

1- Better Health Outcomes for All

- *Services will be designed and procured to meet the health needs of local communities, promote well-being, and reduce health inequalities. In particular for patients with a disability and patients from Black and Minority groups*
- *Patients will be informed and supported so that they can understand their diagnoses, consent to their treatments, and choose their places of treatment*

2- Improved Patient Access and Experience

- *For patients who need support in understanding or communicating with clinical staff we will develop tools to support our patients and we will measure our effectiveness.*
- *We will improve the way patients and carers complaints about services are collected and seek to reduce any Inequality gaps. In particular we will ensure patients with learning difficulties and or language needs are able to access our services”*
- *We will engage more with patients, carers and family members, broadening our approach so that we can target the ‘seldom heard’ communities*
- *We will collect and analyse the demographic data of patients to ensure we get a wide range of feedback on patient’s experience*

3 - Empowered, Engaged and Well Supported Staff

- *We will through providing support, training, personal development and performance appraisal ensuring all staff are confident and competent to do their work, in order that services are commissioned and provided appropriately*
- *We will collect data for all our staff and measure our effectiveness on this objective by ensuring we close any gaps in the implementation of our policies in this objective area.*

4 - Inclusive Leadership

- *We will mainstream equality in the core business of the Trust*
- *We will ensure that there is a clear system in place for conducting an Equality Analysis on services and policy changes*

4. What has been achieved on broader plans to meet these 4 key objectives and what still needs to be done?

In the three areas of translation and interpreting, staff training and raising the profile of equality, diversity and human rights work we have achieved as follows:

Narrative and work to be undertaken	Status
1. Translation & Interpreting	
<ul style="list-style-type: none"> • Update the translation and interpreting policy. • Produce clear guidelines for the use on translation and interpreting services. • Reproduce the (Red Cross) emergency multi-lingual phrase for use across the Trust 	<ul style="list-style-type: none"> • Completed • Completed • Completed
2 Training – Ensure:	
<ul style="list-style-type: none"> • Equality, diversity and human rights is incorporated into the Induction training programme. • All staff receive equality and diversity training within last 3 years. • Equality Analysis training available to staff who require it. 	<ul style="list-style-type: none"> • Completed and training on going • Ongoing • Training presentation completed
3. Raise the profile of equality, diversity and human rights work	
<ul style="list-style-type: none"> ▪ Produce an equalities and human rights information pack for staff. ▪ Produce an equality and diversity newsletter for patients, carers, families and staff ensuring copies are circulated widely ▪ An equalities conference to launch the equality, human rights and diversity strategy. 	<ul style="list-style-type: none"> • This has been drafted and content is being reviewed • Completed a template - first copy circulated • Held 26/11/15 – numbers low so an equalities forum held instead • The EDHR Strategy will be launched more formally in early 2016.

These activities also are incorporated in the following areas (which are also covered in section 4 below):

- **Designing and procuring services**
- **Improvements through communication**
- **Improvement through complaints**
- **Improving Patient Access and Experience**
- **Empowered, engaged and well supported staff**
- **EDS2 Goal Four: inclusive leadership**

In the areas below we had undertakings of “what we said we would do” for which “evidence of progress or lack of progress” has been assessed as listed below:

4.1 Designing and procuring services

What we said we would do - “Services will be designed and procured to meet the health needs of local communities, promote well-being, and reduce health inequalities. In particular for patients with a disability and patients from Black and Minority groups”

Evidence of progress or lack of progress

Progress	Additional work required
The Trust contributes to nationally recognised and statutory partnerships through cross system networks to support high quality care and Choosing Health priorities such as cardiac network, diabetes network, mental health partnership arrangements and prevention of teenage pregnancy in maternity services.	We are in the process of rolling out a new Patient data system which has the capacity to meet all equality data requirements. We will review how we use this system and its data.
Services delivered by the Trust are developed to meet the needs and specifications of Commissioners. Evidence show’s that staff are using Equality Analysis in developing policies / designing services. Plans and training are in place to improve the quality of these assessments.	We continue to raise the profile of organ donation and cancer awareness through community events - some targeted at the ‘most at risk’ groups Health inequalities are included in staff induction training. Specific health inequalities have been captured in an equality newsletter
The Trust has been positively involved in a Learning Disability Group which sought to ensure patients in this area receive appropriate care whilst in the hospital setting. Since then coffee mornings for LD patients have been set up.	The coffee mornings continue as a forum to share issue and develop new initiatives that will support this group further.

4.2 Improvements through communication

What we said we would do - “Patients will be informed and supported so that they can understand their diagnoses, consent to their treatments, and choose their places of treatment”.

“For patients who need support in understanding or communicating with clinical staff we will develop tools to support our patients and we will measure our effectiveness”.

Evidence of progress or lack of progress

Progress	Additional work required
<p>We have reviewed our interpreting and Translation policy, with greater access to telephone interpreting services. Also produced an emergency multi-lingual phrasebook in 15 different languages to assist staff to communicate with patients needing urgent care</p>	<p>We need to develop a range of 'easy read' information sheets which includes a 'consent to treatment' leaflet In line with NHS England guidance we will be implementing the new Accessible Information Standard to help ensure support for patients with communication access needs due to a disability or sensory loss. E.g. information in large print, braille, easy read, via email or via a British Sign Language Interpreter.</p>
<p>We have developed equality training in clinical practice programme and now provide face to face equality training for all staff as part of the Trusts Induction programme.</p>	<p>Work is ongoing to ensure that equality and diversity is imbedded into all training programmes</p>

4.3 Improvement through complaints

What we said we would do - "We will improve the way patients and carers complaints about services are collected and seek to reduce any Inequality gaps. In particular we will ensure patients with learning difficulties and or language needs are able to access our services"

Evidence of progress or lack of progress

Progress	Additional work required
<p>As an ongoing process to establish the success of the complaints handling process, complainants' satisfaction questionnaires are sent out with complaint responses to find out if they were satisfied with how their complaint had been handled.</p> <p>Over the past three years there has been a 46% increase in the number of complaints received.</p>	<p>Patient Affairs team will continue to;</p> <ul style="list-style-type: none"> • issue complainant satisfaction questionnaires with responses when appropriate to complainants to monitor satisfaction. • regularly review complaints information (posters & leaflets) available around the hospital ,ensuring visibility to all service users provide training in complaints handling to front line staff whenever required • whenever possible to contact complainants in the first instance to discuss their concerns along with timeframes. • highlight to Divisions any trends identified as a result of complaints in a timely manner <p>General Managers to ensure they record and feedback actions taken as a result of a complaint at their Clinical Team meetings and to the Trust Board.</p>

4.4 Improving Patient Access and Experience

The Trust delivers services in an area of high diversity. With an estimate of **over 200 community languages spoken** across Luton and Dunstable, this poses significant communications challenges. There are other access issues the Trust regularly considers, such as physical access to services, for people with disabilities affecting their mobility or dependent on public transport.

Patients expect and deserve a positive experience when they are in the care of the Trust. We offer patient-centred communication, and appropriate training to staff and have a number of initiatives to improve the patient's experiences of care and for this element, the Trust was graded as "developing" (in terms of the second level of the EDS2)

What we said we would do - *"We will engage more with patients, carers and family members, broadening our approach so that we can target the 'seldom heard' communities" –*

"We will collect and analyse the demographic data of patients to ensure we get a wide range of feedback on patient's experience"

Evidence of progress or lack of progress

Progress	Additional work required
<p>We have run an engagement event for members of the public and staff</p> <p>We have piloted a PAL's service on Elderly care wards during September 2014.</p>	<p>We will:</p> <ul style="list-style-type: none"> • Ensure access issues are at the forefront of the planning and design process in the hospital's redevelopment programme • Build on our partnership meetings with the community via the Patient and Public Participation Group and look to broaden membership
<p>We are in the process of producing a Patient and Public Involvement Strategy</p>	<ul style="list-style-type: none"> • We need to complete this strategy and then embed the Strategy across the Trust and widen the representation of PPI members

4.5 Empowered, engaged and well supported staff

The Trust has well established systems and processes for monitoring equality and diversity in its workforce. *This was recognised by stakeholders grading the Trust as **Achieving** against goal 3 of the EDS.*

Improving the collection of data on staffs' protected characteristics

There are nine protected characteristics for data purposes; age, ethnicity, disability, gender, marital status, religion and belief, sexual orientation, transgender. An annual workforce report on this data goes to the Board and is published. There is good disclosure from staff on age, ethnicity, and gender. Sexual orientation, disability and religious belief are also included in the report, but disclosure rates for these are relatively low.

The Trust aims to improve this disclosure year on year

What we said we would do - “We will through providing support, training, personal development and performance appraisal ensuring all staff are confident and competent to do their work, in order that services are commissioned and provided appropriately”.

“We will collect data for all our staff and measure our effectiveness on this objective by ensuring we close any gaps in the implementation of our policies in this objective area”.

Evidence of progress or lack of progress

Progress	Additional work required
We have reintroduced equality and diversity to the induction training programme for all staff and have planned a revision of the Equality and human rights Information book to reinforce the message given through training	We will: <ul style="list-style-type: none"> • Complete the Equality and human rights Information book • Deliver face to face equality and diversity training for staff on wards. • Raise the profile of equalities work via quarterly publication of equality and diversity newsletter, articles in the staff newsletter and equalities events such as conferences, seminars and forums
	<ul style="list-style-type: none"> • support the development of a LGBT group for staff – • continue to raise importance of demographic data disclosure for staff

4.6 EDS2 Goal Four: inclusive leadership

One of the key aims of the Equality Act and the EDS is to encourage public sector organisations to use intelligence about equalities in considerations about the development and delivery of their services. To achieve its equality objective, the Trust needs to show that it is using Equality Information as part of its mainstream service quality and management processes.

What we said we would do

“We will mainstream equality in the core business of the Trust”

“We will ensure that there is a clear system in place for conducting an Equality Analysis on services and policy changes”

Evidence of progress or lack of progress

Progress	Additional work required
<p>The Trust has progressed here via:</p> <ul style="list-style-type: none"> • Our Equality Diversity and Human Rights Committee EDHR which is jointly chaired by the Director of Human Resources and a Non-Executive Director. Accountable to the Executive Board, it has broad representatives from Board Members and staff, to patient, 	<p>We will review:</p> <ul style="list-style-type: none"> • our policies to ensure high and consistent Equality Analysis standards across all policies. • Separate out the Equality Analysis report from our policies so that the policies do not look daunting and un-wieldy but more users friendly.

<p>community or local support groups.</p> <ul style="list-style-type: none"> • The EDHR committee ensures annual Equality and Diversity and Data reports which evidences Trust compliance with its Duty to consider Equality Information and Equality Objectives and to publish details and data on its performance. • The two Board members of the EDHR ensure this remains high profile. • Reports go to the Governance and Risk Management Committee, (a sub-committee of the Trust Board). • Production of an Equality, Diversity and Human Rights Strategy with key equality goals and standards • Production of a new Equality, Diversity and Human Rights policy 	<ul style="list-style-type: none"> • Store Equality Analyses on the website for transparency • the Terms of Reference for the Equality, diversity and Human rights committee, and strengthen: • committee membership of this group to ensure that it reflects the majority of service areas / disciplines across the Trust • encourage work in this area to focus more on benefits and values so that there is more engagement, understanding, recognition and application for our initiatives and activities and we can mainstream these more • ensure our approach is more about Dignity, Respect and Fair Treatment for all and goes beyond the protected characteristics of individuals and groups to also consider other aspects such as socio-economic factors, caring commitments and health inequalities.
<p>Managers routinely undertake Equality Analyses to document their consideration of equality issues in service and policy changes</p>	<ul style="list-style-type: none"> • We will continue to provide advice and support for staff completing Equality Analysis,
<p>Values ... embedded and part of appraisal scheme says >>>. Used in appraisals</p>	<ul style="list-style-type: none"> • We will encourage more focus on benefits and values to encourage more engagement, understanding, recognition and application for our initiatives and activities and mainstream more • We will ensure our approach is mindful of Dignity, Respect and Fair Treatment for other characteristics such as socio-economic factors, caring commitments and health inequalities

5. What else do we plan to do next? The 2016 – 2020 work plan

Along with the additional work listed in the blue shaded right hand columns in section 4, we have envisaged what our other plans

would need to be by year until 2020. These are listed in the right hand columns of each annual section below

2016/17

Narrative - Work to be undertaken	Status
1 - Information systems	
<p><i>Ensure that information systems are up to date and the Trust is able to gather information from across the equality strands.</i></p> <p><i>Analyse information and trends from data and use this information to influence actions.</i></p>	<ul style="list-style-type: none"> • <i>A new Patient Data is planned – we need to assess what functionality this has and what data is to be collected</i> • <i>Patient feedback Data has been updated and we will have the ability to monitor feedback across all the protected characteristic areas</i> • <i>On going</i>
2 - Raise the profile of equality, diversity and human rights work	
<p><i>Produce a cultural information pack for use across the Trust.</i></p> <p><i>Produce quarterly newsletters throughout the year using our template and focusing on marriage, civil partnerships and pregnancy and maternity issues.</i></p>	<ul style="list-style-type: none"> • <i>Ensuring that each copy focuses on different areas of concerns against all protected characteristics</i>
3 – Policies	
<p><i>Review policies to ensure they comply with equality legislation and that they are not having an adverse impact on any particular groups protected by legislation</i></p>	<p><i>On going</i></p>

2017/18

Narrative - Work to be undertaken	Status
1- Partnership working	
<p><i>Liaison and partnership working with seldom heard patients and stakeholders in particular the Trans and LGB groups.</i></p>	<p><i>A mailing list of over 100 groups across a wide range of communities have been produced, continue the process of engagement with these groups</i></p>

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<i>Continue to build, nurture and develop a Trust wide network of Personal, Fair & Diverse Champions</i>	<i>The network is 60 strong, continue to communicate and engage with these champions</i>
2 - Contracts and Service Level Agreements	
<i>Ensure that contracts and service level agreements contain clauses and performance measures around duties and responsibilities under equality legislation.</i>	<i>Actions were identified with the catering and cleaning contracts continue to ensure that equality measures are included in all forthcoming contracts</i>
3 - Raise the profile of equality, diversity and human rights work	
<i>Produce quarterly newsletters throughout the year focusing on age and disability issues.</i>	<i>Working with the template ensure that each copy focuses on different areas of concerns against all of the protected characteristics</i>

2018/19

Narrative – Actions	Status
1 Guidelines and training	
<i>Audit the experiences of LGBT staff and patients. - Work with local Trans and LGB groups to produce guidance and training on meeting the health needs of their communities</i>	<i>Support was given to the LGBT group for staff established in 2015, continue to support this group</i>
2 Raise the profile of equality, diversity and human rights work	
<i>Produce quarterly newsletters throughout the year focusing on sexual orientation and religion/beliefs</i>	<i>Working with the template ensure that each copy focuses on different areas of concerns against all of the protected characteristics</i>
3 Research	
<i>Audit the experiences of BME staff in relation to recruitment & selection, disciplinary, grievances, employment tribunals, access to training and career progression.</i>	<i>Query</i>

2019/20

Narrative Actions	Status
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1 - Forging new partnerships	
<i>Liaison and partnership working with patients and stakeholders from Black and Minority ethnic communities locally.</i>	<i>A mailing list of over 100 groups across a wide range of communities have been produced, continue the process of engagement with these groups</i>
2 Raise the profile of equality, diversity and human rights work	
<i>Produce quarterly newsletters throughout the year focusing on race equality and human rights</i>	<i>Working with the template ensure that each copy focuses on different areas of concerns against all of the protected characteristics</i>
3. Research	
<i>Audit the experiences of female staff returning to work following maternity leave Audit the take up of work life balance initiatives across the trust.</i>	