

FINANCE AND PERFORMANCE COMMITTEE – 31 July 2019

Equality and Diversity Update July 2019

<p>Purpose of report and executive summary (250 words max): This paper provides an update on the Equality Delivery System Stakeholder event that took place on 22 July 2019 and the Workforce Disability Equality Standard that is due for publication on 1 August 2019.</p> <p>It seeks approval to publish the required data set for the WDES metrics and the associated narrative report.</p>		
<p>Action required: For approval</p>		
<p>Previously considered by: HR senior team</p>		
<p>Director: Chief People Officer</p>	<p>Presented by: Head of HR</p>	<p>Author: Equality, Diversity and Inclusion Advisor & Head of HR</p>

Trust priorities to which the issue relates:	Tick applicable boxes
Quality: To deliver high quality, compassionate services, consistently across all our sites	<input checked="" type="checkbox"/>
People: To create an environment which retains staff, recruits the best and develops an engaged, flexible and skilled workforce	<input checked="" type="checkbox"/>
Pathways: To develop pathways across care boundaries, where this delivers best patient care	<input checked="" type="checkbox"/>
Ease of Use: To redesign and invest in our systems and processes to provide a simple and reliable experience for our patients, their referrers, and our staff	<input checked="" type="checkbox"/>
Sustainability: To provide a portfolio of services that is financially and clinically sustainable in the long term	<input type="checkbox"/>

<p>Does the issue relate to a risk recorded on the Board Assurance Framework? YES</p> <p>1. There is a risk that the trust is unable to recruit and retain sufficient supply of staff with the right skills to meet the demand for services</p> <p>2. There is a risk that the culture and context of the organisation leaves the workforce insufficiently empowered and motivated, impacting on the trust's ability to deliver the required improvements and transformation and to enable people to feel proud to work here</p>
<p>Any other risk issues (quality, safety, financial, HR, legal, equality):</p> <p>Ineffective or inefficient staff management is likely to increase negative staff survey results, turnover, sickness absence and replacement costs.</p>

Proud to deliver high-quality, compassionate care to our community

EQUALITY, DIVERSITY AND INCLUSION UPDATE JULY 2019

1. Introduction

NHS England, with its partners, has prioritised its commitment to tackling discrimination and creating an NHS where the talents of all staff are valued and developed. Respect, equality and diversity are central to changing culture and are at the heart of the workforce implementation plan (NHS Long Term Plan).

The NHS Workforce Equality Standards are designed to address under-representation in the areas of Race (WRES) and Disability (WDES) with development underway for a further standard focussed on Sexual Orientation. Both standards use nationally designed spreadsheets supported by technical guidance bulletins and regional briefing events to ensure national comparisons can be made. Timeframes for completion of the data spreadsheets and supporting narrative are determined nationally.

The WDES metrics and narrative report must be published by 1 August 2019 with additional analysis and action plans required by 30 September 2019. The WRES metrics and actions plans are due for development and publication by the end of August 2019.

This report provides the Board with the initial WDES data set and narrative due for publication on 1 August 2019. It also provides an update on the Equality Delivery System Stakeholder grading event that took place on 22 July 2019.

The Board is asked to approve:

- the submission of the metrics and narrative report for the WDES and
- the amended equality objectives identified in relation to the EDS2.

2. Workforce Disability Equality Standard (WDES)

The Workforce Disability Equality Standard (WDES) came into force on 1st April 2019. It is mandated through the NHS Standard Contract. The WDES evolved from the design of the WRES with some adaptive changes. There are ten metrics that enable NHS organisations to compare the experiences of Disabled and non-Disabled staff, which they will then use to implement action plans.

3. Workforce Disability Equality Standard Metrics

The Trust is required to submit the data set using the national format. The full metrics report is included at appendix 1 in excel format.

The highlights of the report are:

1. Percentage of disabled staff in each band shows a significant proportion of staff do not report whether they consider themselves to have a disability or not.

		% Disabled	% non-disabled	% unknown
non clinical	Bands 1 - 4	3%	61%	36%
	Band 5 - 7	2%	62%	35%
	Bands 8a - 8b	1%	68%	31%
	Bands 8c - 9 & VSM	1%	71%	28%
clinical	Bands 1 - 4	3%	63%	34%
	Band 5 - 7	2%	63%	35%
	Bands 8a - 8b	1%	48%	51%
	Bands 8c - 9 & VSM	0%	44%	56%
medical	Consultants	1%	37%	62%
	Non-Consultants career grade	1%	42%	57%
	trainee grades	0%	50%	50%

- Likelihood of being appointed from shortlisting is 1.62; therefore applicants are 60% less likely to be appointed than non-disabled applicants.
- Likelihood of entering capability process is 0.00. As a Trust we have not managed any disabled staff under formal capability and therefore those with a disability are less likely to enter a formal process than those without. It is also worth noting that there were only 12 capability cases in the period in question.
- From the staff survey - In the last 12 months, percentage of staff experiencing bullying, harassment or abuse from:

	% disabled	% Non-disabled
patients/service users, their relatives or other members of the public	35.0%	30.0%
managers	25.0%	16.0%
other colleagues	27.0%	21.0%
at work, they or a colleague reported it	41.0%	41.0%

- From the staff survey - Percentage of disabled staff (76%) compared to non-disabled (82%) staff who believe the Trust provides equal opportunities.
- From the staff survey – percentage of disabled staff (36%) compared to non-disabled staff (24%) who have felt pressure to attend work despite not feeling well enough to do so.
- From the staff survey – percentage of disabled staff (33%) compared to non-disabled staff (45%) report they are satisfied with the way the organisation values their work.
- From the staff survey – percentage of disabled staff (77%) who have reported that the Trust has made adequate adjustments for them to do their work.

9.
 - a. Overall engagement scores of disabled staff (6.4) compared to non-disabled staff (7).
 - b. Has the Trust taken action to facilitated disabled voices in the organisation. Yes – via the Disabled Staff Network and Disability Confident framework.

10. Board representation

	% disabled	% non-disabled	% unknown
Total Board members - % by Disability	0%	79%	21%
Voting Board Member - % by Disability	0%	73%	27%
Non Voting Board Member - % by Disability	0%	100%	0%
Executive Board Member - % by Disability	0%	0%	0%
Non Executive Board Member - % by Disability	0%	79%	21%
Overall workforce - % by Disability	2%	60%	38%
Difference (Total Board - Overall workforce)	-2%	19%	-17%
Difference (Voting membership - Overall Workforce)	-2%	13%	-11%
Difference (Executive membership - Overall Workforce)	-2%	-60%	-38%

4. Workforce Disability Equality Standard narrative

Attached at Appendix 2 is the draft narrative report recommended for publication on 1 August 2019.

5. Equality Delivery System 2 Stakeholder Event Update

The equality Delivery system (EDS2) stakeholder event was held on 22 July 2019, opened by Nick Carver and Ellen Schroder. There was a variety of stakeholders in attendance from local transgender support group, Hertfordshire Equality Council, Access Disability Groups staff and patient members.

Presentations were given on improvements for patients with dementia, member engagement, the value of volunteers and staff survey and workforce initiatives.

All participants then scored the Trust against the outcomes contained within the EDS2 using voting button and the following grading system.

Grading	Undeveloped	Developing	Achieving	Excelling
	People from all protected groups fare poorly compared with people overall OR evidence is not available	People from only some protected groups fare as well as people overall	People from most protected groups fare as well as people overall	People from all protected groups fare as well as people overall

The full grading is attached at appendix 2 with the majority being marked as developing. 3 outcomes were graded as achieving and 1 as undeveloped.

In all the event went well with significant engagement from the Board and stakeholders. There was positive feedback from attendees who felt the event added to their understanding of the issues felt by protected groups. It also gave an opportunity to showcase excellence across the Trust.

While the overall grading for the outcomes appears low it became apparent at the event that attendees required more quantitative data to enable them to score effectively. This has been identified as a lesson learnt and planning for next year's event will include identified outcome leads, clearer briefings for leads on data set requirements and presentation format. Those present were all clear of the need to improve our data set and analysis for protected groups so this work will be undertaken over the coming months.

6. Equality Goals

As part of the Equality Delivery System each Trust is required to publish equality goals for the coming year. The previous year goals for ENHT were:

Goal 1	To improve the delivery and outcomes of our elderly, maternity, children's and cancer services.
Goal 2	To improve the quality of information / data on our patients in relation to their protected characteristics and the information we provide them.
Goal 3	Train and raise awareness of equality, diversity and human rights issues with all staff
Goal 4	Embed equality into leadership structures across the organisation, ensuring alignment of patient/service user and workforce

Based on the information we have considered over the last six months it is suggested that these are amended to the following goals for the coming year.

Goal 1	To improve the delivery and outcomes for identified groups within all our services especially elderly, maternity, children's and cancer services.
Goal 2	To improve the quality of information / data collected for our patients and staff in relation to their protected characteristics to enable effective analysis of outcomes for identified groups.
Goal 3	Train and raise awareness of equality, diversity and human rights issues with all staff, patients, and services providers to reduce the incidents of discrimination, bullying, harassment and violence.
Goal 4	Embed equality into governance and leadership structures across the organisation, ensuring alignment of patient/service user and workforce outcome.

7. Recommendations

The Board is asked to:

- Note the contents of this report
- Approve the publication of the data set for WDES
- Approve the publication of the EDS2 grading and
- Approve the equality goals for the Trust for 2019/20.

Appendix 1



Appendix 1.xlsx

Appendix 2



Appendix 2.pdf

1.0 Better Health Outcomes

	Outcome	2019	Rationale
1.1	Services are commissioned, procured, designed and delivered to meet the health needs of local communities.		<ul style="list-style-type: none"> ▪ Working with Commissioners to ensure service meets the needs of all groups ▪ All subcontracts include EDI requirements ▪ Obligation under Health & Social Care Act
1.2	Individual people's health needs are assessed and met in appropriate and effective ways.		<ul style="list-style-type: none"> ▪ Care plans for all patients ▪ This is me booklets for patients with dementia ▪ Choice of food to meet needs ▪ Red trays for those with eating or drinking needs ▪ Engagement though Patient forums
1.3	Transitions from one service to another, for people on care pathways are made smoothly with everyone well informed.		<ul style="list-style-type: none"> ▪ Patient forums ▪ Patient information coordinator / information leaflets ▪ Referrals ▪ Standard operating procedures
1.4	When people use the NHS service their safety is prioritised and they are free from mistakes, mistreatment and abuse.		<ul style="list-style-type: none"> ▪ Complaints policies / duty of candour ▪ Reporting mechanisms – DATIX / whistleblowing ▪ Clear procedures followed for Safeguarding children and vulnerable adults ▪ Infection prevention and control

2.0 Improved Patient Access and experience

	Outcome	2019	Rationale
2.1	People, carers and communities can readily access hospital, community health or primary care services and should not be denied access on unreasonable grounds.		<ul style="list-style-type: none"> • DisableGo access audit has been completed • Interpreters available to ensure involvement • Translations and alternative formats • This is me booklet for patients with dementia
2.2	People are informed and supported to be as involved as they wish to be in decisions about their care.		<ul style="list-style-type: none"> • Care plans for all patients • Patients are given sufficient information about their care and options in all areas of the hospital patient survey outcomes • Easy read appointments and reminders via text messages • Hospital Liaison teams
2.3	People reports positive experiences of the NHS		<ul style="list-style-type: none"> • Privacy and Dignity • Compliments are collected and reported to staff • Faith Leaders Group, Exhibition of Faiths and Multi-faith space • Friends and Family outcomes • Patients speak highly of cancer care services • National experience surveys
2.4	People's complaints about services are handled respectfully and efficiently.		<ul style="list-style-type: none"> • Significant investment in team and service • PALS service • Complaints reports to the Board • Included in appraisal process • Duty of Candour

3.0 Representative and Supported Workforce

	Outcome	2019	Rationale
3.1	Fair NHS recruitment and selection processes lead to a more representative workforce at all levels		<ul style="list-style-type: none"> Recruitment and Selection Policy Recruitment data collects 7 / 9 pc's Disability confident employer Not representative workforce at band 8 and above
3.2	The NHS is committed to equal pay for work of equal value and expects employers to use equal pay audits to help fulfil their legal obligations		<ul style="list-style-type: none"> Workforce Data collected on majority of pc's Gender Pay Gap report Engagement via Trust Partnership Job matching completed in partnership
3.3	Training and development opportunities are taken up and positively evaluated by all staff		<ul style="list-style-type: none"> EDI training – eLearning and face to face Access to NHS leadership academy LEND sessions open to all with positive feedback
3.4	When at work, staff are free from abuse, harassment, bullying and violence from any source		<ul style="list-style-type: none"> Dignity at Work / Grievance Policies Staff survey results indicate level of concern is average to the NHS Speak in Confidence Speaking up Guardians
3.5	Flexible working options are available to all staff consistent with the needs of the service and the way people lead their lives.		<ul style="list-style-type: none"> Flexible Working / Retirement Policy E-rostering request and book leave Reasonable adjustments including redeployment when necessary
3.6	Staff report positive experiences of their membership of the workforce		<ul style="list-style-type: none"> Engagement maintained through Trust Partnership group Positive elements to Staff Survey Staff Friends and family test

4.0 Inclusive Leadership

	Outcome	2019	Rationale
4.1	Boards and senior leaders routinely demonstrate their commitment to promoting equality within and beyond their organisations.		<ul style="list-style-type: none"> • Annual Report on Equality and Diversity • Mandatory training for all staff • CEO – Chair of the Leadership Academy
4.2	Papers that come before the Board and other major Committees identify equality related impacts including risks, and say how these risks are to be mitigated.		<ul style="list-style-type: none"> ▪ Quality Impact Assessments include Equality issues and risks
4.3	Middle managers and other line managers support their staff to work in culturally competent ways within a work environment free from discrimination.		<ul style="list-style-type: none"> • 56% staff trained in E&D compared to 24% this time last year (1426 staff) • Staff opinion survey supports this through increase from 50 – 70 % stating they had received training • Code of conduct introduced and refreshed where necessary