Ashford and St. Peter's Hospitals **NHS**
NHS Foundation Trust

TRUST BOARD
31ˢᵗ January 2013

TITLE	**Equality and Diversity Annual Report 2012**
EXECUTIVE SUMMARY	The purpose of this report is to provide assurance of the Trust's impact and effectiveness in terms the requirements for the Single Equality Scheme (implemented 2010) and ensuring compliance with the legislative framework and relevant Care Quality Commission outcome standards
BOARD ASSURANCE (RISK)/ IMPLICATIONS	The Single Equality Scheme and on-going work provides assurance that there is a framework for Ashford and St Peter's Hospitals NHS Foundation Trust to work within. Moving forward the Trust has fully endorsed and adopted the Equality Delivery System (EDS) and is committed to its implementation by April 2013.
STAKEHOLDER/ PATIENT IMPACT AND VIEWS	The Equality and Diversity Steering group (EDSG) provides a forum for the diversity champions and patient representatives to be involved in the development of action plans and policies.
EQUALITY AND DIVERSITY ISSUES	The Single Equality Scheme is central to the Trust meeting its requirements under legislation.
LEGAL ISSUES	To meet the legal requirements of the Equality Act (2010) and Public Sector Equality duty.
The Trust Board is asked to:	Approve the Report.
Submitted by:	Kyriacos Kyriacou on behalf of Raj Bhamber, Director of Workforce and Organisational Development
Date:	14ᵗʰ January 2013
Decision:	For Approving

Ashford and St. Peter's Hospitals **NHS**
NHS Foundation Trust

TRUST BOARD
31ˢᵗ January 2013

Equality and Diversity Annual Report

Introduction
The purpose of this report is to provide assurance to the Board of the Trust's impact and effectiveness in terms of implementing the Single Equality Scheme since 2010 and ensuring compliance with the legislative framework and relevant Care Quality Commission outcome standards.

Ashford & St Peters' Single Equality Scheme (SES) and action plan were approved by the Board in December 2009 and implemented in January 2010. It is a three-year scheme with an in-built commitment to review and update it on an annual basis. Implementation of the SES has been led by the Equality & Diversity Steering Group on behalf of the Trust Executive Committee.

The SES provided a strong focus to the work of the Equality & Diversity Steering Group throughout 2012. The group, chaired by the Chief Executive, is well established with a full complement of staff champions for the nine protected characteristics included within the Equality Act (2010). Steering Group meetings have been well attended.

For 2013/14 onwards, the EDS will be implemented. The EDS is designed to support NHS organisations to provide services to patients that are personal, fair and diverse and to ensure that staff can thrive and hence deliver better health outcomes.

Action Plan 2012 Report (appendix 1)
Appendix 1 provides commentary and analysis regarding the various achievements during 2012, set against the Single Equality Scheme action plan approved by the Board in January 2012.

Objectives/Forward Plan from April 2013
The Equality & Diversity Steering Group has developed key milestones to prepare implementation and integration of the EDS. The Board will be asked to consider and approve the key milestones and action plans in March 2013

Membership and Attendance (appendix 2)
A table of membership and record of meetings and attendance for 2012 is attached as appendix 2.

Terms of Reference (appendix 3)
The Equality & Diversity Steering Group's current terms of reference are attached as appendix 3. These were last reviewed in November 2010.

Report compiled by:
Kyriacos Kyriacou
Deputy Director of Workforce & OD
Date: January 2013

Appendix 1:
Annual Report 2012 for Trust Board – Equality and Diversity

Objective	Action	Lead	Commentary	Timescale	Race & Ethnicity(6)	Disability(2)	Gender, Transgender & Pregnancy(3) (5) (8)	Age(1)	Sexual Orientation Marriage & Civil Partnership(4) (9)	Religion & Belief(7)
	Key Work Theme 1: Leadership and Governance									
Establish robust leadership and governance arrangements for equality and diversity	Publish an updated SES, including clear priorities for 2012 **(achieved)**	Director of Workforce & OD	Approved by the Board in January 2012	January 2012	✓	✓	✓	✓	✓	✓
	Equality & Diversity Steering Group with corporate leadership and champions for each of the protected characteristics **(achieved)**	Chief Executive	Quarterly meetings held – champions in place covering all 9 protected characteristics in the Equality Act (2010)	Ongoing						
	Provide quarterly reports to Trust Executive Committee **(achieved)**	Deputy Director of Workforce & OD	Reports submitted	March-December 2012						
	Publish an annual Board Report **(achieved)**	Deputy Director of Workforce & OD	Report submitted to Trust Board	January 2013						
	Key Work Theme 2: Equality Act 2010 and Care Quality Commission essential standards									
Implementation of the Equality Act 2010	Monitor the implementation of the new Public Sector Equality Duty and produce an action plan for local implementation **(achieved)**	Deputy Director of Workforce	Updates provided to EDSG meetings and plans in place to ensure compliance. Tabled Mar 2012. This has focused on eliminating discrimination, harassment & victimisation and	March 2012	✓	✓	✓	✓	✓	✓

Objective	Action	Lead	Commentary	Timescale	Race & Ethnicity(6)	Disability(2)	Gender, Transgender & Pregnancy(3) (5) (8)	Age(1)	Sexual Orientation Marriage & Civil Partnership(4) (9)	Religion & Belief(7)
			advancing equality of opportunity.							
Support and provide assurance of compliance with equality & diversity elements of CQC essential standards	Continue to improve records of patients' demographic data to ensure individual needs can be anticipated **(achieved)**	Patient Access Manager	Quarterly reports produced and trends monitored, with remedial actions instigated.	March- December 2012	✓	✓				✓
	Quarterly reports to EDSG re. CQC outcome standard compliance supplemented by regular audits to provide assurance that outcomes are embedded at ward level **(achieved)**	Deputy Chief Nurse	Reports submitted for CQC outcome, standard compliance. Quarterly complaints + PALS are now flagged up with E&D Champions in 'real time' and improvement in accessibility for raising concerns and complaints undertaken. Support to raise awareness and confidence within the Patient Experience Team to identify and report potential E&D issues continues.	March-December 2012	✓	✓	✓	✓	✓	✓
	Monitor E&D profile of complaints and PALS issues. Report to EDSG quarterly and refer issues to relevant champions. **(achieved)**	Head of Patient Experience	As above. All issues now referred to E&D Champions in 'real time'.	March-December 2012						
	Key Work Theme 3: Finance									

Objective	Action	Lead	Commentary	Timescale	Race & Ethnicity(6)	Disability(2)	Gender, Transgender & Pregnancy(3) (5) (8)	Age(1)	Sexual Orientation Marriage & Civil Partnership(4) (9)	Religion & Belief(7)
Ensure the SES and priorities are adequately resourced	Programme to identify budget and manpower to achieve action plan **(achieved)**	Deputy Director of Workforce	Budgets for all projects has been identified and supported.		✓	✓	✓	✓	✓	✓
Differences in pay between genders continue to decrease or have been eliminated	Carry out follow-up, enhanced equal pay review and act on results **(pending from Dec 2012 meeting)**	Deputy Director of Workforce	Current review of gender & ethnicity differences in pay with paper planned for March 2013.				✓	✓		
	Key Work Theme 4: Equality impact assessments									
Equality considerations are fully embedded in the development, delivery and evaluation of our policies, procedures, services and functions by carrying out EqIA's effectively	Carry out EqIAs in accordance ensuring they are of a high quality, support and training is provided to staff and the assessments are made publicly available. **(achieved)**	Deputy Director of Workforce	Completion and assessment of EqIA's are carried out and published within individual policies by the policy owner. Quality Department provides advice and training in completion of EqIA's as required.	Ongoing	✓	✓	✓	✓	✓	✓
	Key Work Theme 5: Accessibility									
Improve the accessibility of information, employment and services for all groups	Continue to meet the criteria for the ✓✓ scheme **(achieved)**	Recruitment Manager	Two ticks scheme award retained.	August 2012		✓				
						✓				

Objective	Action	Lead	Commentary	Timescale	Race & Ethnicity(6)	Disability(2)	Gender, Transgender & Pregnancy(3) (5) (8)	Age(1)	Sexual Orientation Marriage & Civil Partnership(4) (9)	Religion & Belief(7)
	Prioritise allocated capital budget for accessibility improvements in partnership with Head of Capital Planning **(achieved)**	Disability Action Group	DisabledGo carried out site audit on 11th December 2012 to ensure on-line access guides are up to date. .	December 2012		✓				
Access audit of Trust premises to be carried out.	Site Audits to be carried out by external contractor **(achieved)**	Disability Action Group	Following on-site audit, improvements have included - Redevelopment of designated disabled parking bays at Ashford - New access guides added to locations at Ashford - Hearing assisted devices more available at St Peter's - Accessible toilets refurbished at St Peter's - Resurfaced blue badge parking bays provided at St Peter's	December 2012		✓				
	Key Work Theme 6: Building capacity and capabilities									
Increase awareness of equality and diversity in the workforce	Ongoing implementation of Level 1 awareness mandatory training for all staff (**achieved**)	Deputy Director of Workforce	52% trained as at 31 December 2012. The Equality & Diversity training was removed from the Trust Mandatory Training List in March 2012 but will be	Ongoing	✓	✓	✓	✓	✓	✓

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Objective	Action	Lead	Commentary	Timescale	Race & Ethnicity(6)	Disability(2)	Gender, Transgender & Pregnancy(3) (5) (8)	Age(1)	Sexual Orientation Marriage & Civil Partnership(4) (9)	Religion & Belief(7)
			reinstated on the list with the EDS. E&D embedded in corporate induction for all staff, delivered by E&D Champions, up to July 2012 then by the Deputy Director of Workforce and Organisational Development from September 2012.	Ongoing						
	Design and deliver specific E&D skills programme for line managers (level 2) within the framework of 'Living Our Values' **(achieved)**	Head of Education and Training (Head of Organisational Development from August 2012	81% trained as at 31st June 2012 on 'Living Our Values'. The formal training programme ceased at that time.	March 2012						
	Design and implement an annual calendar of events to sustain and improve the awareness of equality and diversity across the organization **(achieved)**	Staff Champions	March 2012 meeting provided calendar of events and awareness raising for 2012. The Religion/Belief event and the BME AGM took place in July 2012.							
Areas of under-representation are identified and addressed	Deliver and launch a second intake of leadership development programme for bands 5 & 6 BME staff, to include participation from partner organisations in NW Surrey **(achieved)**	Ethnicity Champion and Head of OD	Nine successful participants for the Road to Success 2 Programme commenced formal sessions in October 2012. Individual career goals identified from appraisals. One to one coaching sessions commenced in November 2012	From October 2012 October 2012	✓					

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Objective	Action	Lead	Commentary	Timescale	Race & Ethnicity(6)	Disability(2)	Gender, Transgender & Pregnancy(3) (5) (8)	Age(1)	Sexual Orientation Marriage & Civil Partnership(4) (9)	Religion & Belief(7)
	Develop enhanced quarterly workforce report, broken down by 6 strands. EDSG to identify positive action plans to address under representation and/or potential discrimination issues **(achieved)**	Deputy Director of Workforce	Quarterly workforce report produced and scrutinised at EDSG meetings. Actions identified in response to potential trends. Considerable progress achieved in closing gaps in data held especially for disability, sexual orientation and religion and belief.	March- December 2012	✓	✓	✓	✓	✓	✓
	Key Work Theme 7: Publication of monitoring, assessments and consultation									
We publicly demonstrate our commitment to embedding E&D throughout the organisation	Publish progress against the scheme and action plan **(achieved)**	Workforce & OD Director	Publication of this report once approved by Board	November 2010 and annually thereafter	✓	✓	✓	✓	✓	✓
			TrustNet and website content reviewed. Dedicated E&D page continues successfully	Ongoing						
	Each diversity champion to ensure a programme of engagement with relevant external stakeholders to facilitate joint working and ensure best practice within the organisation **(achieved)**	Staff Champions	Participation in the Stonewall Workplace Equality Index currently live with a closing date in January 2013.

Plans to hold external event at Hounslow Mosque now in place | December/ January 2013 | | | | | | |

Appendix 2: Meetings, Membership and Attendance

The membership and number of attendances during the year are as follows:

Meetings held:
15th March 2012
15th June 2012
21st September 2012
7th December 2012

Title/role	No. of attendances	Comments
1. Chief Executive (Chair)	4	
2. Director of Workforce & Organisational Development	2	
3. Chief Nurse	2	
4. Associate Director of Operations (Equality Lead – Service)	1	
5. Deputy Director of Workforce & OD (Equality Lead – Employment)	4	JO – 2, KK - 2
6. Head of Corporate Affairs	0	JG – 3, GR - 1
7. Head of Education & Training/Head of OD	2	HS – 1, JA - 1
8. Gender, Transgender & Pregnancy Champion	2	JM – 2 (left)
9. Race & Ethnicity Champion	4	CM – 2, SM - 2
10. Age Champion	4	CM – 2, SM - 2
11. Sexual Orientation and Marriage & Civil Partnership Champion	3	
12. Disability Champion	4	JC – 3, YH - 1
13. Religion & Belief Champion	3	
14. Staff Representative	0	JS now new member
15. CQC Standards	2	1 was deputy
16. Patient Demographic Data/Patient Access	4	AE – 2, HD - 2
17. Complaints & PALS	4	LR – 2, SM – 1, RJ - 1
18. External Disability Champion	1	YH
19. Patient Champion	0	
20. Learning Disabilities Champion	1	KE

Appendix 3:

NEW TERMS OF REFERENCE
EQUALITY & DIVERSITY STEERING GROUP

Constitution

The Trust Executive Committee hereby resolves to establish a sub-Committee to be known as the Equality and Diversity Steering Group.

Authority

The Group is authorised by the committee to investigate any activity within its terms of reference. It is authorised to seek any information it requires from any employee and all employees are directed to co-operate with any request made by the Group.

Membership

1 **Chief Executive (Chair)**
2 **Director of Workforce and Organisational Development**
3 **Chief Nurse**
4 **Equality Lead – Service   Head of Patient Engagement and Experience**
5 **Equality Lead –Employment   Deputy Director of Workforce & OD**
6 **Head of Corporate Affairs**
7 **Head of Organisational Development (was Head of Education & Training)**

Leads for each Key Strand:
9   **Gender, Transgender & Pregnancy**
10 **Race and ethnicity**
11 **Age**
12 **Sexual Orientation and Marriage & Civil Partnership**
13 **Disability**
14 **Religion & belief**
15 **Learning Disabilities**

16 **Recognised Staff Representative**
17 **Information Consultant**
18 **Patient Representative**
19 **External Disability Champion**
20 **Access Manager**
21 **Patient Experience Manager**

Attendance

Attendance at meetings is essential. In exceptional circumstances when a member cannot attend they must arrange for a fully briefed deputy of sufficient seniority to attend on their behalf. Members will be required to attend as a minimum, 50% of the meetings per calendar year.

Quorum

In order to be quorate there must be 6 members of the group present.

Frequency and Conduct

The Group will meet quarterly. Items for the agenda should be submitted to the Secretary a minimum of one week prior to the meeting.

Membership and terms of reference will only be changed with the approval of the Committee and will be reviewed and agreed annually.

Duties

- To provide assurance and support in respect of compliance with Equality Legislation, and equality & diversity elements of Care Quality Commission essential outcome standards:
  - Outcome 1: Respecting and involving service users (regulation 17) – providers recognise the diversity, values and human rights of people who use services

  - Outcome 4: Care and welfare of people who use services (regulation 9) – plan the delivery of care in order to avoid unlawful discrimination including, where applicable, by providing for the making of reasonable adjustments in service provision to meet individual needs
  - Outcome 5: Meeting Nutritional Needs (regulation 14)

  - Outcome 7: Safeguarding people who use services from abuse (regulation 11) – people who use services are protected from abuse, or the risk of abuse, and their human rights are respected and upheld.

- To ensure that the Trust's functions and policies have been identified and assessed in priority order with a timescale for action. To ensure that assessments are carried out every three years and that staff representatives and services users are involved in the process.
- To ensure that the full range of service users is identified and that they are aware of the Trusts involvement and consultation plans and how they can take part.
- To ensure that equality monitoring in relation to service delivery and employment is in place and the data is analysed and published.
- To monitor employee relations activity relating to bullying, harassment, disciplinary, capability and grievance matters.
- To plan and implement actions required to meet the equality standards in the Department of Health's Model Employer.
- To ensure appropriate links are made with the Quality, Clinical Governance and the Performance framework to make sure we provide equitable services for patients.

Key Responsibilities

- To oversee the introduction and management of the Equality Delivery System and Action plan, to review progress and report to the Trust Executive Committee on a quarterly basis
- To ensure that objectives and targets relating to equality are integrated into the Trust's strategic and operational plans.
- To ensure appropriate training, guidance and support is in place across the Trust to implement the Equality Delivery System.
- To ensure that the Trust is prepared for external assessment in relation to the Equality Delivery System Single and to be accountable to the Board for its implementation.

Reporting Lines

The group will report to the Trust Executive Committee.

Monitoring

The Secretary of the group will produce a quarterly report for the Trust Executive Committee and an annual report for the Trust Board.