



# Single Equality Scheme 2010 - 2013



**META DATA**

|                               |  |
|-------------------------------|--|
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## Foreword from the Chief Executive and Chairman

Over the years, Heart of England NHS Foundation Trust has welcomed its responsibility to reflect diversity and promote equality amongst staff, patients, visitors and the general public in line with Equal Opportunities legislation.

We fully understand the need to provide services that are accessible, appropriate and of a high standard for all. We have therefore implemented a system for continuously monitoring and assessing services and policies to ensure that targets to promote equality are met across our hospitals.

This statutory requirement for the development and publication of the Trust's Single Equality Scheme will provide further assurance that action will be taken to ensure services do not discriminate or disadvantage anyone because of their disability, race, age, gender, sexual orientation, religion/belief, language or human rights.

Implementing this scheme across such a large organisation as Heart of England NHS Foundation Trust, serving different communities and demographics on multiple sites will be a major task and will undoubtedly reveal many challenges. However; the Trust is committed to ensuring that our local communities will be fully involved in the consultation and involvement processes, to ensure the services we provide meet the needs of all our patients.

At the heart of the revised Operating Framework for the NHS in England 2010/2011 [published on the 21 June 2010] is the recognition that we live in a diverse society. NHS organisations are required to put patients at the heart of decision making; focus on quality/outcomes and have greater devolved responsibilities. In addition; the document indicated there are real opportunities presented by the implementation of the Equality Act, 2010 for developing diverse services which are personal and fair, identifying differing needs and skills.

The Equality Act has created a new obligation on public authorities to consider inequalities of health outcomes that may result from socio-economic disadvantage when making strategic decisions. There is also strengthening of the protection from discrimination for disabled people and carers.

Heart of England NHS Foundation Trust is committed to the principles of the Single Equality Scheme and the Trust Board commend this document to all of our patients, their families and carers and our staff.

Dr Mark Newbold  
Chief Executive

Mr Clive Wilkinson  
Chairman

## Executive Summary

This Scheme sets out the way the Trust intends to meet its duties under the Race Relations Amendments Act 2000, the Disability Discrimination Act 2005, the Sex Discrimination Act 1975 [amendment] Regulations 2008 and the new Equality Bill which places a new duty on public bodies to bring together existing equality duties and extend them to gender reassignment, age, sexual orientation and religion/belief.

In the development of our Single Equality Scheme, the Trust has sought to involve and consult with representatives of those groups on whom the schemes will have an impact. Those who have contributed to the scheme will be informed of its publication, as its success is dependent on how well we communicate it to others as well as how we deliver the actions within the scheme.

The implementation of this Scheme will be monitored through mainstream business planning processes and the Head of Equality and Diversity will report annually on progress to the Board of Directors.

Monitoring is an essential tool for ensuring services are accessed in an equitable way. The Trust is committed to gathering and analysing data on all the equality strands and acting upon the information received.

The Trust has a policy of openness and transparency. We will publish information on our workforce and report the progress made in the delivery of the action plans within this scheme, using language appropriate to the intended audience and ensure our information is available in accessible formats.

The Trust is committed to engaging with all stakeholders [including those hard to reach communities] and ensuring consultation with public and service users is an essential part of service development or service change.

The Trust will ensure its staff are adequately informed in the implementation of the Equality Act 2010 and is committed to ensuring the employment and representation of women, black and ethnic minority staff and disabled staff at all levels in the organisation and equal pay between male and female staff through the implementation of positive action; where indicated.

The Trust has an Equality Impact Assessment [EIA] system which determines the extent to which policies, procedures and services impact upon individuals and groups in relation to one or more of the equality categories: disability, race, age, gender, sexual orientation, religion/belief, language and human rights.

## Introduction

Historically, the law has focused upon eliminating discrimination on the grounds of Gender, Race and Disability until the Human Rights Act was adopted into UK Law in 2000. Since then; the focus of directives and law has expanded to include Age, Religion/Belief and Sexual Orientation, thereby resulting in six equality strands. It is likely that, over time, this will increase further.

The anti-discrimination laws of the 1960s and 1970s laid down basic standards of behaviour between people at work and in wider society. These laws have largely succeeded in changing our culture so that, for example, relatively few people would find it acceptable for open discrimination to take place because someone's skin colour was different; or for a woman to be paid less than a man sitting next to her doing the same job.

More recently, the law has required employers and service providers to make it possible for disabled people to take part in the activities non-disabled people take for granted, for example, ensuring that a consultation event is not arranged upstairs if it means that a wheelchair user would be unable to attend. The legislation requires fair treatment for people at work – and in most cases more widely – whatever their age, sexual orientation, religious or non-religious belief or gender identity.

It is true to say that some people's attitudes have not kept pace with the legal requirement to treat everyone fairly; so that both low level and very serious incidents of discrimination, bullying, harassment and even hate crime continue to occur. The current laws are still required but British society has become increasingly tolerant over the last 30 years; with a substantial liberalisation of social attitudes. Most people today recognise that every individual, whatever his or her different characteristics, is entitled to a fair chance to make the best they can of themselves.

However; despite this important change in individual behaviour and attitudes, inequality and unfairness persist. The cause is as likely to be failure by policy-makers, service providers and employers to tackle the most entrenched and persistent inequalities than simply personally held prejudices. Governments have accepted that voluntary schemes to challenge and adjust behaviours and attitudes have not, on the whole, had much impact. Thus, as well as the law, there are many policy initiatives and practice based procedures designed to ensure that rhetoric does indeed become reality.

Equality Impact Assessment [EIA] is a mechanism for examining how the services we provide and the employment practices we use; impact on our patients and staff. It is a tool to identify whether or not policies, services and procedures are having an impact on a particular group of people due to age, disability, gender, ethnicity, religion/belief and sexual orientation. It aims to ensure that we are not providing services or using employment practices that discriminate

against any equality groups. It enables us to critically examine our practices and identify any institutional barriers, acts or omissions that detrimentally affect individuals and communities.

The EIA process requires us to look at each equality group in turn and consider whether there is evidence or reason to believe that a policy, service or function affects that group differently. It asks us to look at evidence and identify whether there is anything we can do to change the policy or function to reduce the impact on equality groups. Our aim is to respond to issues raised and to make sure that our policies, services and functions are more accessible and responsive to the needs of all the communities we serve. EIA of Trust policies and services forms part of the mandatory requirement to implement key components of Equal Opportunities legislation. The Trust has developed relevant assessment tools [Appendix 7] and training which are being delivered to key staff on an on-going basis. This will assist with mainstreaming of the process across the Trust.

Heart of England NHS Foundation Trust currently operates across four sites, namely Birmingham Heartlands Hospital in Bordesley Green East, Solihull Hospital, the Birmingham Chest Clinic and Good Hope Hospital in Sutton Coldfield. We have a combined workforce of approximately 10,000 staff. The Trust is therefore a major acute healthcare provider across North, East and South Birmingham. Our aim is to be the provider of choice, delivering high quality services to local people.

The City of Birmingham has a culturally diverse population. Over 29.7% [figure drawn from the 2001 National Census] of the population comes from an ethnic minority background. In the Solihull area this figure decreases to 5.4%, whilst in the vicinity of the Heartlands Hospital this increases to 75% [figures drawn from Neighbourhood Statistics Online, [www.statistics.gov.uk](http://www.statistics.gov.uk)].

The Trust has a policy of equality of opportunity in the recruitment, retention, development and support of staff from all groups. We also have effective policies and procedures which enable staff to raise concerns. We strive to eliminate discrimination and have successfully been awarded the Two Ticks disability symbol.

Our aim is to be responsive to the needs of different groups and individuals within society. With reference to service provision, we place great importance on the consultation and involvement of users when reviewing services and developing new initiatives to better serve patients.

## **Our Purpose**

The purpose of this strategy is to make this vision a reality. In achieving the vision we can expect to see the following measurable outcomes:

- consistently high ratings from staff, patients and the public regarding our Values, how our staff behave and the quality of patient care
- strong leadership that delivers high performing, productive, cost effective services and top quality patient care
- a national and local reputation as the first choice/first class employer
- capacity and skills to manage change and meet challenges

The Trust aims to provide better focused care for customers, this includes local GP's and healthcare partners, in addition to staff and other interested parties.

## **Our Diversity Strategy**

Our diversity vision statement for the Trust is as follows:-

“Heart of England NHS Foundation Trust will continuously improve its employment practices and service provision to ensure that all staff and patients are valued and treated with dignity and respect in an inclusive environment, renowned for celebrating diversity. In order to achieve the above we have set out a comprehensive action plan in relation to the following strategic objectives:

- we will strive to recruit and develop a workforce that reflects the diversity of the local community
- we will continue to monitor our workforce in all areas. This baseline information will provide us with a guide on our progress to recruit more people from diverse groups.
- we will ensure fair employment practices, achieving equality of opportunity in the workplace for people from all groups
- we will ensure that our bullying and harassment policy and initiatives are effective in promoting a zero tolerance environment
- we will fully involve people from all groups in shaping and developing new systems and practices to progress our diversity agenda
- we will provide a service that is appropriate and of high quality to all that wish to, or need to, use it, effectively ensuring that all patients can get the right service, at the right time, in the right place and in the right way
- we will increasingly look at patients/users to be involved in the shaping and design of services”.

## **NHS Constitution**

Lord Darzi was asked to lead a review of the NHS in England in July 2007. Clinical Working Groups were established in each NHS region [Strategic Health Authorities] to identify potential improvements to local services. In total 74 such groups, led by 2,000 frontline clinicians [doctors, nurses and other health and social care professionals], have examined services across 8 or more “pathways of care” from maternity to end-of-life, engaging with patients, NHS staff, stakeholders and the public.

In June 2008, the final report of the Review was published “NHS Next Stage Review – High Quality Care for All”. One of the outcomes of the Review was the proposal to create an NHS Constitution. At the heart of the Constitution is a requirement that all NHS organisations when making decisions and carrying out its functions have a duty to safeguard the rights and responsibilities of patients and staff as follows:-

- patients and the public have the right to feel secure in the knowledge that they will not to be discriminated against in the provision of NHS services, on grounds of age, disability, gender, race, religion/belief and sexual orientation.



- staff have the right to work in a diverse working environment, free from discrimination on the basis of race, sexual orientation, sex, disability, age or religious belief
- staff have the right to be treated fairly in recruitment and career progression e.g. promotions to posts in the NHS
- staff have the right to work in an environment where equality of opportunity is promoted for all those who work in it

The NHS Constitution, published on 21 January 2009, establishes the principles and values of the NHS in England. The Constitution's first principle states:

*“The NHS provides a comprehensive service, available to all irrespective of gender, race, disability, age, sexual orientation, religion or belief. It has a duty to each and every individual that it serves and must respect human rights. At the same time, it has a wider social duty to promote equality through the services it provides and to pay particular attention to groups or sections of society where improvements in health and life expectancy are not keeping pace with the rest of the population.”*

It is intended that all NHS bodies and private and third sector providers supplying NHS services will be required by law to take account of this Constitution in their decisions and actions.

The Constitution includes the following rights and pledges, which are of particular relevance to the ability of people with disabilities in terms of their access to premises where services are delivered:-

*“You have the right not to be unlawfully discriminated against in the provision of NHS services, including on the grounds of gender, race, religion or belief, sexual orientation, disability [including learning disability and mental illness]” or age.*

## **Meeting Equality Duties**

This Equality and Diversity Strategy aims to create a framework where we can ensure that by 2013, we have a culture in HEFT which means that we treat all our patients and staff fairly. This will support our Corporate Vision of providing the best healthcare to the people of Birmingham and beyond.

To support this aim we will:

- be taking a human rights based approach to equality which supports basic human rights to which we are all entitled
- accept that unfairness persists for some sections of our community and work hard to eradicate this
- all share the right to be treated fairly and develop a mutually supportive environment that upholds this
- accept our responsibility to ensure that we treat others fairly

We have a legal duty to respect human rights. Our Equality and Diversity Strategy aims to address this by creating organisational change which incorporates the core principles contained in a Human Rights Based Approach. At the core of this approach are the principles of:

- **Equality**
- **Dignity**
- **Respect**
- **Fairness**
- **Autonomy**

This approach is about putting human rights at the heart of policy and planning, ensuring accountability, empowering and involving people and being non-discriminatory. Using this framework for achieving equality should improve the quality of services, patient experience and reduce the risk of complaints and litigation.

The Human Rights Based Approach can give the five principles real meaning in people's lives. This is illustrated by the following table which shows how changing a policy or practice to respect, protect or fulfil a particular human right also supports other broader principles. For example:

| <b>Principle</b> | <b>Human Right</b>   | <b>Example Policy or Practice Change</b>   |
|------------------|--|--|
| <b>Equality</b>  | Right not to be discriminated against in the enjoyment of other human rights | Ensuring that people are not denied treatment solely on the basis of their age   |
| <b>Dignity</b>   | Right not to be tortured or treated in an inhuman or degrading way           | Ensure there are sufficient staff to change wet sheets promptly to reduce the risk of people suffering degrading treatment |
| <b>Respect</b>   | Right to respect for family and private life                                 | Respecting all diverse families e.g. same sex couples with children  |
| <b>Fairness</b>  | Right to a fair trial  | Ensuring that there is a robust and fair process for disciplining staff  |
| <b>Autonomy</b>  | Right to respect for private life  | Involving people in decisions made about their treatment and care  |

These core Human Rights and principles are simple and will resonate strongly with our patients, visitors and staff. We will use these principles embedded within a Human Rights approach as the basis of our Equality and Diversity work.

## **Delivering the Single Equality Scheme**

The Trust Board will provide direction, purpose and leadership for the implementation of the Single Equality Scheme. The Board has a responsibility to ensure that the Trust is compliant with equality and human rights legislation. The Trust must measure its performance on equality and human rights; as outlined within the CQC regulations and the NHS Constitution.

The Chief Nurse has overall responsibility for the implementation of the Equality and Diversity agenda and the implementation of the Single Equality Scheme. The Director of Human Resources has responsibility for Employment aspects of the Single Equality Scheme.

The Head of Equality and Diversity is the Trust lead for Equality and Diversity and will have specific responsibility for advising the Board on all aspects of the scheme.

The Group Medical Directors will be responsible for the implementation and maintenance of this scheme, ensuring the equality and human rights is mainstreamed into every aspect of policy and practice in employment and service delivery.

Each member of staff has responsibility for adhering to and supporting the equality, diversity and human rights policies and is expected to:-

- familiarise themselves with equality, diversity and human rights policies
- ensure that they do not subject any colleague to harassment, bullying or discrimination
- challenge any behaviour which is observed to be discriminatory
- take responsibility for delivering a high quality service which is appropriate and culturally sensitive and meets the needs of our diverse users
- fully understand they have a responsibility to report and not collude with inappropriate behaviour, either from any other member of staff, patients or the public

## **How Heart of England NHS Foundation Trust will Meet Equality Duties?**

The key aim of the scheme is to make sure that Equality, Diversity and Human Rights are embedded into every area of Trust activity. In order to do this all the individual schemes [race, disability and gender] and the strands of age, sexual orientation, religion/belief and transgender are brought together within this scheme.

Using this model will enable the Trust to identify key requirements and the level of resource that will be needed to implement the scheme. It will highlight who will be responsible for making sure this will happen. It will also include the assessment and review of progress against the objectives identified.

The effective implementation of this scheme will depend upon clear accountabilities and responsibilities and active ownership at all levels and by all staff. The Head of Equality and Diversity, with the support of the Executive Directors, are responsible for the implementation of

the scheme. The Equality and Diversity Department will support the organisation in achieving diversity in the workforce and promote human rights, ensuring consistency across the Trust.

The Single Equality Scheme will be published on the Trust Internet website on the Equality and Diversity page.

Training will be mainstreamed and it will also be linked to the core equality and diversity competencies of the NHS's Knowledge and Skills Framework [KSF]. Heart of England NHS Foundation Trust will therefore ensure that managers and staff have the appropriate knowledge and support in the implementation and mainstreaming of the Equality and Diversity agenda.

The following training will assist staff in gaining the appropriate knowledge/skills/competencies:

- Equality Impact Assessment
- Disability Equality
- Learning Disabilities
- Safeguarding
- Human Rights
- Deaf / Deafblind Communication Awareness
- Managing Diversity
- Cultural Awareness
- Customer Care [Health Care Assistants]
- Customised E&D sessions
- Trust Induction

### **Consultation and Involvement of patients and staff**

In order to be compliant with the Disability Equality Duty, Disability Discrimination Act 2005, the Trust has moved beyond consultation and formally involved disabled people in the development in service planning activities as is required by the legislation. The Trust has established a Disability Advisory Group; which is chaired by external stakeholders. We have also established an Equality and Diversity / Learning Disabilities Steering Group, with a membership which involves patients/carers.

### **How We will Measure Success**

In the development of our Single Equality Scheme, the Trust has sought to involve and consult with representatives of all groups on whom the scheme will have an impact. The Action Plan has been drawn up using information from the Disability Equality Scheme, Race Equality Scheme, Gender Equality Scheme, and feedback gathered during the consultation undertaken by Heart of England NHS Foundation Trust in 2007 and 2010. This included staff, carers, Trust Members and other key stakeholders.

The Trust is committed to involving stakeholders in decision-making to improve our services and receiving feedback is on an ongoing process. Actions identified within the action plan are not only from direct consultation on our Single Equality Scheme but have been gathered from feedback such as patient survey results, information from user groups, NHS partners, third sector organisations and complaints.

The philosophy that consultation and feedback is an ongoing process will ensure that our scheme is a live document and such changes or additions will be reported yearly, via the Annual Report, to the Trust Board.

## **Monitoring**

This Strategy contains Equality and Diversity pledges. These pledges will be monitored on a six monthly basis by the Equality and Diversity and Learning Disability Steering Group.

An annual report will be produced each year. This will show progress against the Equality and Diversity pledges and will enable Directorates to consider the further action they need to take to deliver the Equality and Diversity Strategy.

### Single Equality Scheme Action Plan [2010-2013]

| Activity   | Race  | Disability  | Gender  | Age  | Sexual Orientation   | Religion/Belief  |
|--|---|---|---|--|--|--|
| <b>Prepare and publish scheme</b>  | Race Equality Scheme produced 2006. Now incorporated into Single Equality Scheme. | Disability Equality Scheme produced 2006. Now incorporated into Single Equality Scheme. | Gender Equality Scheme produced 2007. Now incorporated into Single Equality Scheme. | No legal requirement. Developed as part of Single Equality Scheme. | No legal requirement. Developed as part of Single Equality Scheme. | No legal requirement. Developed as part of Single Equality Scheme. |
| <b>Data collection, analysis and reporting</b>   | Established for staff, patients and members.                                      | Established for staff and members but not for patients [on voluntary basis].            | Established for staff, patients and members.  | Established for staff, patients and members                        | Part of NHS application process for staff [on voluntary basis].    | Established for staff and patients [on voluntary basis].           |
| Specific Actions   |   |   |   |  | Lead   | Date For Completion  |
| <ul style="list-style-type: none"> <li>Trust Board formally approves the revised Single Equality Scheme and makes a public commitment to eliminating discrimination and promoting equality.</li> <li>Continue to collect/monitor/publish/use existing Equality data and work collaboratively with I.T. Department to include patient Disability data collection; via HISS or any other I.T. system.</li> <li>Work collaboratively with Primary Care/Commissioners to explore the collection of data concerning the Gypsy and Traveller communities as part of the Ethnicity data collection.</li> <li>Work collaboratively with HR to collect/analyse/monitor/publish staff equality data</li> </ul> |   |   |   |  | Chief Nurse  | Dec 2011   |
|  |   |   |   |  | Director of I.C.T.   | April 2011   |
|  |   |   |   |  | Head/Deputy Head of E&D  | April 2011   |
|  |   |   |   |  | Director HR  | Ongoing  |

| Activity   | Race   | Disability | Gender | Age | Sexual Orientation   | Religion/Belief            |
|--|--|------------|--------|-----|--|----------------------------|
| <b>Continue to undertake Equality Impact Assessments</b> | Equality Impact Assessment on new/revised Trust services/policies.<br>Continue publication of Equality Impact Assessments/Action Plans on E&D Trust webpage.<br>Continue the delivery of Equality Impact Assessment training.<br>Continue to support/provide guidance to Trust staff to ensure all business cases, for developing services, include an Equality Impact Assessment. |            |        |     |  |                            |
| <b>Specific Actions</b>                                  |  |            |        |     | <b>Lead</b>  | <b>Date For Completion</b> |
| As above.  |  |            |        |     | Head/Deputy Head of E&D; Group Operations Directors; Group Medical Directors | On going                   |

| Activity   | Race  | Disability | Gender | Age | Sexual Orientation  | Religion/Belief  |
|--|---|------------|--------|-----|---|--|
| <b>Equal access to information about the Trust and it's services</b>   | Continue to provide Interpreting/Translation services as per the Trust's Interpreting/Translation Services Operational policy<br>Continue to provide patient information as per the development of Patient Information policy |            |        |     |   |  |
| Specific Actions   |   |            |        |     | Lead  | Date For Completion  |
| <ul style="list-style-type: none"> <li>• As above.</li> <li>• Translation of patient Information.</li> <li>• Continue to implement the Trust's Interpreting/Translation Services Operational policy within the Trust</li> <li>• Review/present business case to the Trust Board for Language Line Interpreting service, across the Trust</li> <li>• Ensure the Trust's Complaints Policy is accessible to all patients/carers</li> <li>• Promote the provision of advocacy for patients who are vulnerable [HEFT Safeguarding Steering Group, PALs, Disability User Advisory Group, Ethnic User Advisory Group; ICAS and the E&amp;D / LD Steering Group]</li> <li>• Request patients' individual needs on all Trust communications and add ALERT's on Patient Administration System [PAS] and at bedside to raise staff awareness regarding patients' specific needs</li> </ul> |   |            |        |     | Deputy Head of E&D<br>Patient Information Manager<br>Deputy Head of E&D<br>Head/Deputy Head of E&D<br>Director of Safety and Governance<br>Director of Communications<br>Chief Nurse<br>Director of ICT | On going<br>On going<br>On going<br>April 2011<br>On going<br>On going<br>On going<br>On going |



|  |  |          |
|--|--|----------|
| <ul style="list-style-type: none"> <li>Continue electronic data collection on staff, across all Equality strands, to ensure equitable provision of training as provided by data collection via Trust Study Leave policy</li> </ul> | Head of Organisational Development & People Strategy | On going |
| <ul style="list-style-type: none"> <li>Implement Safeguarding Strategy/Policy/protocols/procedures for patients throughout the Trust</li> </ul>  | Chief Nurse  | On going |
| <ul style="list-style-type: none"> <li>Develop and implement a Learning Disabilities Policy</li> </ul>   | Chief Nurse  | On going |
| <ul style="list-style-type: none"> <li>Introduce mechanisms to identify and flag up patients with Learning Disabilities</li> </ul>   | Chief Nurse  | On going |
| <ul style="list-style-type: none"> <li>Develop and implement protocols and pathways of care which are readily adjustable to meet the healthcare needs of patients with Learning Disabilities</li> </ul>                            | Chief Nurse  | On going |
| <ul style="list-style-type: none"> <li>Provide comprehensive information jointly designed and agreed with people with Learning Disabilities and representatives of local bodies/local advocacy organisations</li> </ul>            | Chief Nurse  | On going |
| <ul style="list-style-type: none"> <li>Ensure patients with Learning Disabilities are provided with treatment options</li> </ul>   | Chief Nurse  | On going |
| <ul style="list-style-type: none"> <li>Ensure complaints procedure is easily accessible for patients with Learning Disabilities</li> </ul>   | Chief Nurse  | On going |
| <ul style="list-style-type: none"> <li>Ensure appointment system is easily accessible for patients with Learning Disabilities</li> </ul>   | Chief Nurse  | On going |
| <ul style="list-style-type: none"> <li>Provide information to ensure families/carers, who support patients with Learning Disabilities, are aware of Disability legislation and carers rights</li> </ul>                            | Chief Nurse  | On going |
| <ul style="list-style-type: none"> <li>Develop and deliver Learning Disability Awareness training in keeping with relevant Equality and Human Rights legislation</li> </ul>  | Chief Nurse  | On going |
| <ul style="list-style-type: none"> <li>Ensure training includes areas such as communication techniques and patient centred processes</li> </ul>  | Chief Nurse  | On going |
| <ul style="list-style-type: none"> <li>Trust to encourage representation of people with Learning Disabilities and their families/carers; within Trust boards/local groups and other relevant forums</li> </ul>                     | Chief Nurse  | On going |
| <ul style="list-style-type: none"> <li>Undertake audits to seek the views and interest of people with Learning Disabilities and their families/carers</li> </ul>   | Chief Nurse  | On going |
| <ul style="list-style-type: none"> <li>Report/publish and use audit findings to improve the service delivered to patients with Learning Disabilities</li> </ul>  | Chief Nurse  | On going |

| Activity   | Race  | Disability  | Gender                                     | Age   | Sexual Orientation          | Religion/Belief  |
|--|---|---|--|---|-----------------------------|--|
| <b>Human Resources – Training and Workforce Planning</b>   | Trust supports the HEFT Diversity Staff Network/E&D Champions staff support group | HEFT Diversity Staff Network/E&D Champions staff support groups established | Ensure equal pay through Agenda for Change | Staff have access to Retirement Planning sessions |                             | Multi-faith Prayer Centre established<br>Access to multi-faith Chaplaincy service<br>Introduction to E&D Department/Chaplaincy Team via Trust<br>Corporate Induction |
| <p>Equality and Diversity training incorporate all equality strands; as well as Human Rights.</p> <p>Annual monitoring of workforce, comparing with population statistics [where available], to ensure equal representation of staff within the Trust. The Trust will encourage suppliers to abide by the equality legislation as indicated in the Equality Act 2010 through:</p> <ul style="list-style-type: none"> <li>- Advertising supply opportunities within the local community</li> <li>- Developing relations with the local business community</li> <li>- Operating fair and equitable business award processes</li> <li>- Monitoring supplier compliance with Equality Opportunity legislation</li> </ul> |   |   |  |   |                             |  |
| <b>Specific Actions</b>  |   |   |  |   | <b>Lead</b>                 | <b>Date For Completion</b>   |
| <ul style="list-style-type: none"> <li>• Monitor/publish/use Equality data in relation to staff in post, staff undertaking training, staff complaints/grievance, staff PDPs, (including uptake of leadership programmes) across all Equality strands at all levels</li> </ul>  |   |   |  |   | Director of Human Resources | On going   |
| <ul style="list-style-type: none"> <li>• Positive action to ensure workforce, at all levels, reflects the community the Trust serves</li> </ul>  |   |   |  |   | Director of Human Resources | On going   |
| <ul style="list-style-type: none"> <li>• Recruitment team to identify current key community groups and develop recruitment plan</li> </ul>   |   |   |  |   | Director of Human Resources | On going   |

|   |                              |          |
|---|------------------------------|----------|
| <ul style="list-style-type: none"> <li>Information regarding national Breaking Through programme to be obtained and circulated within the Trust</li> </ul>        | Head of E&D                  | On going |
| <ul style="list-style-type: none"> <li>Develop leadership Diversity module as part of new Leadership programme</li> </ul>   | Head of E&D                  | On going |
| <ul style="list-style-type: none"> <li>Promote positive staff role models across all Equality strands to increase opportunities for career progression</li> </ul> | Director of Human Resources  | On going |
| <ul style="list-style-type: none"> <li>Raise staff awareness by the promotion of celebration days such as Black History Month and Festival of Cultures</li> </ul> | Head/Deputy Head of E&D      | On going |
| <ul style="list-style-type: none"> <li>Continue to work collaboratively with local schools/colleges/universities to recruit a diverse workforce.</li> </ul>       | Director of Human Resources/ | On going |
| <ul style="list-style-type: none"> <li>Consider job shares and part-time working.</li> </ul>  | Chief Nurse                  |          |
| <ul style="list-style-type: none"> <li>Ensure advertising of flexible working to attract more females to senior roles</li> </ul>                                  | Director of Human Resources  | On going |
| <ul style="list-style-type: none"> <li>Maintain Dyslexia website to inform staff and managers of support mechanisms for staff with Dyslexia</li> </ul>            | Director of Human Resources  | On going |
| <ul style="list-style-type: none"> <li>Review mandatory training programme to ensure inclusion of E&amp;D elements</li> </ul>                                     | Tracey Starkey-Moore/Amee    | On going |
| <ul style="list-style-type: none"> <li>Develop and deliver “Train the Trainer” sessions on relevant E&amp;D components</li> </ul>                                 | Hawkes                       |          |
|   | Head of E&D                  | On going |
|   | Head of E&D                  | On going |

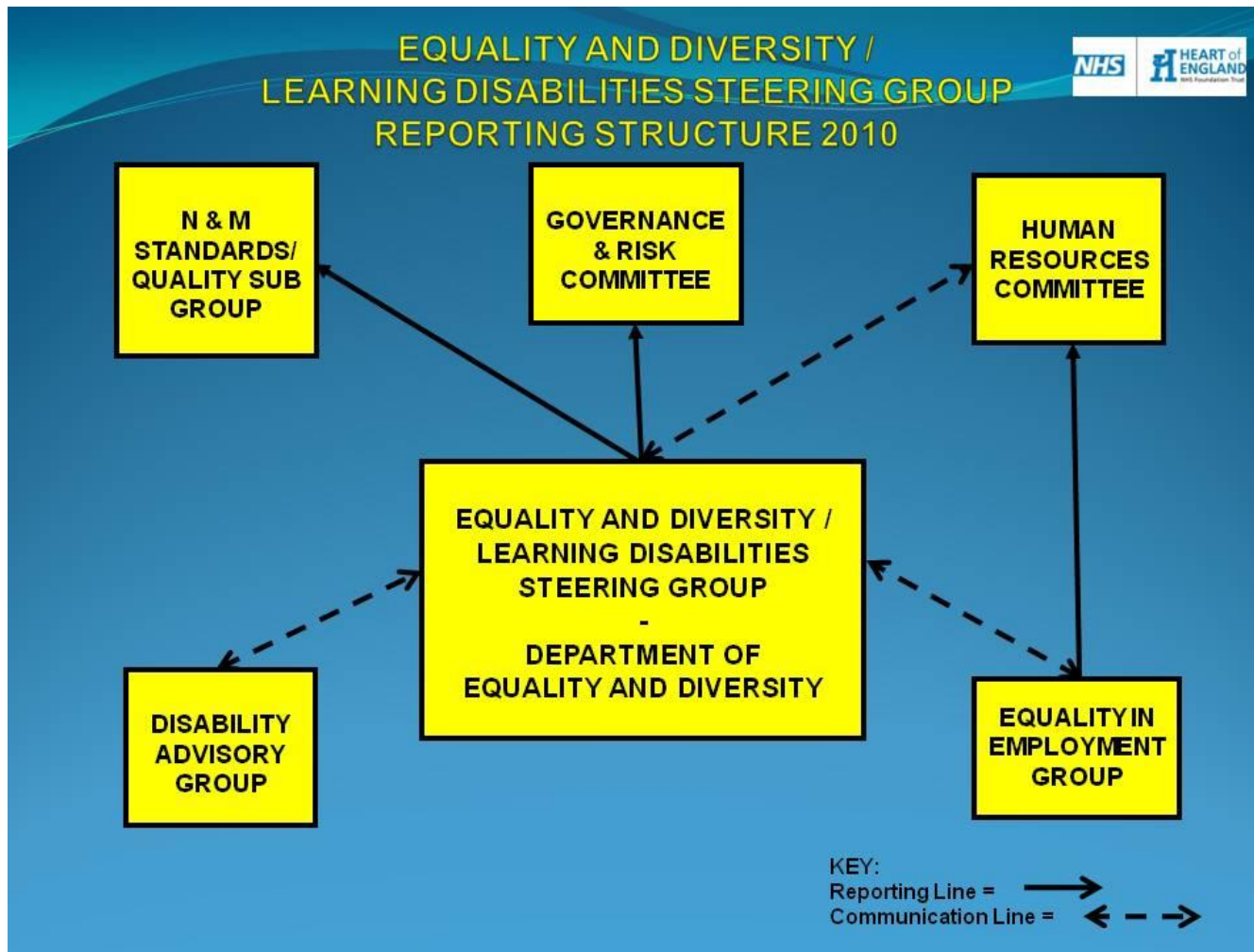
| Activity  | Race   | Disability   | Gender   | Age | Sexual Orientation                   | Religion/Belief  |
|---|--|--|--|-----|--------------------------------------|--|
| <b>Service Delivery – Patient Services and Procurement</b>  | Diverse patient diet menu implemented. Interpreting and Translation services provided. Maternity department translation support available. | Disability User Advisory Group continues to advise Trust on Disability matters. Disability Equality Training for staff. Disability car parking facility. Loop Induction at Reception desks. Accessible toilet facilities. Handrails along corridor. Bariatric equipment. | Implementation of Single Sex wards/bays. The Trust will ensure that the right protection against discrimination in the provision and delivery of services to patients with gender dysphoria. |     |                                      | Multi Faith Prayer Centres. Multi-faith Chaplaincy/Chaplaincy Volunteer service. Rapid release procedure of deceased bodies for religious reasons. Religious information booklets and services for patients/staff. |
| Specific Actions  |  |  |  |     | Lead                                 | Date For Completion  |
| <ul style="list-style-type: none"> <li>Continue to monitor/use local patient Equality data to inform service development and to be reflective of the needs of local population. Use patient epidemiology [disease pattern] and areas of deprivation to improve services.</li> <li>Use local information identified within NSFs e.g. obesity, smoking, coronary heart disease and diabetes, to develop/improve services</li> <li>Reduce DNA rates by providing appointments in more accessible formats such as phone, text or via</li> </ul> |  |  |  |     | Director of I.C.T. and Service Leads | On going   |
|   |  |  |  |     | Service Leads                        | Ongoing  |
|   |  |  |  |     | Head of                              | On going   |

|   |   |   |
|---|---|---|
| <p>specialist health visitor</p> <ul style="list-style-type: none"> <li>• Increase the use of information technology such as texting and electronic prescribing for patients with dyslexia/illiteracy</li> <li>• Develop elective pathway for patients with Learning Disability from GP referral to discharge</li> <li>• Implement Bereavement processes in collaboration with Chaplaincy and E&amp;D Department</li> <li>• The E&amp;D / LD Steering Group to advise on activities to meet the needs of patients/staff across all E&amp;D strands</li> </ul> | <p>PPI/Quality<br/>Director of I.C.T.<br/>and Head of<br/>PPI/Quality</p> <p>Heads of<br/>Nursing/Matrons<br/>Chief Nurse<br/>Head of E&amp;D</p> | <p>April 2011</p> <p>March 2011</p> <p>On going</p> <p>On going</p> |
|---|---|---|

| Activity                             | Race   | Disability | Gender | Age | Sexual Orientation | Religion/Belief |
|--------------------------------------|--|------------|--------|-----|--------------------|-----------------|
| <b>Commissioning and Procurement</b> | <p>Public bodies spend over £220 billion pounds on purchasing services [Equality Act 2010]. This gives them enormous buying power to encourage suppliers from whom purchases are being made to include equality in the way they work. The Trust can therefore encourage suppliers to comply with Equality legislation in the way they work.</p> <p>Heart of England NHS Foundation Trust is committed to promoting equal opportunities at all levels of employment, service planning and delivery including all parts of its commissioning and procurement activity. Procurement and commissioning are amongst the key functions of the Trust and promoting equality through contracts matters to us as a Foundation Trust and our contractors, including all private sector providers that could/may deliver services for us. The Trust had an obligation to ensure public money is not spent on supporting discriminating practices, but on those that promote equality of opportunity and excellence in service. Under previous Equal Opportunities legislation and Equality Act, 2010, all public authorities including the NHS are placed under positive legal duty to:</p> <ul style="list-style-type: none"> <li>• Eliminate unlawful discrimination</li> <li>• Promote equal opportunities</li> <li>• Promote positive attitudes and good community relations</li> <li>• Eliminate harassment</li> <li>• Encourage public participation</li> <li>• Take steps to take into consideration a persons disability and make reasonable adjustments where necessary</li> </ul> <p>Where the Trust's functions are carried out by an external supplier on its behalf, the Trust remains responsible for meeting the above duties. This means that the Trust is under legal obligations to build relevant equality considerations into commissioning and procurement processes. This is to ensure that all functions meet the requirements of all six equality strands as appropriate regardless of who is carrying them out. The duty under the above equality legislation is not optional any more. The Trust must make the promotion of equality an integral part of decision-making.</p> |            |        |     |                    |                 |

| Activity  | Race | Disability   | Gender  | Age | Sexual Orientation   | Religion/Belief  |
|---|------|--|---|-----|--|--|
| <b>Estates and Facilities</b>   |      | Disability Discrimination Act remedial work plan developed/ implemented by the Trust's Estates and Facilities Department | Provision of Single Sex patient accommodation |     |  | Multi-faith Prayer facility developed at BHH; development plan for improving existing facilities at GHH/SOL required |
| Specific Actions  |      |  |   |     | Lead   | Date For Completion  |
| <ul style="list-style-type: none"> <li>Continue to implement Estates Department's DDA remedial work plan for all sites</li> <li>The Trust Art and Way Finding Strategy developed/implemented</li> <li>Continue to increase provision of high quality Single Sex accommodation</li> <li>Continue to consult the Trust's user advisory groups on improving facilities/access</li> </ul> |      |  |   |     | Director for Estates/Facilities<br>Director for Estates/Facilities<br>Director for Estates/Facilities<br>Director for Estates/Facilities | On going<br>On going<br>On going<br>On going   |

### Appendix 1 – Equality and Diversity Reporting Structure





## Appendix 2 – Consultation and Communication

The successful implementation of the scheme is dependent on our robust internal/external communication process, undertaken to communicate it's content to key stakeholders.

## Appendix 3 – Consultation

| Stages of Development  | Type of Involvement           | Groups Involved  |
|--|-------------------------------|--|
| Accountability and Leadership  | Reports                       | Executive Directors<br>Non-Executive Directors<br>Chairman<br>Chief Executive  |
| Draft Single Equality Scheme   | Publication on Trust Internet | Patients<br>Public<br>Members<br>Staff   |
| Process for consultation and involvement of stakeholders to ensure compliance with Equal Opportunities | Stakeholder events/meetings   | User Advisory Groups<br>Learning Disability Collaborative Working Group<br>Disability Advisory Group<br>Council for Disabled People<br>Staff Side representatives<br>E&D / LD Steering Group<br>HEFT Diversity Staff Network / E&D Champions<br>Cystic Fibrosis Patient Advocate |

## Appendix 4 – Communication

| Group   | Mechanism  |
|---|--|
| The Heart of England NHS Foundation Trust staff   | E&D / LD Steering Group<br>HEFT Diversity Staff Network / E&D Champions<br>Heartbeat staff newsletter<br>E&D webpage |
| The Heart of England NHS Foundation Trust members | Heart and Soul members newsletter<br>E&D Internet webpage<br>Patient Information Centre                              |
| NHS partners and third sector organisations       | Birmingham East and North PCT<br>Solihull Care Trust   |

|  |   |
|--|---|
|  | Ward End Asian Elders Association<br>Heartlands Older People’s Forum<br>Council of Disabled People Warwickshire and<br>Coventry<br>East Birmingham Community Forum<br>Small Heath Community Forum<br>Job Centre Plus/Access |
|--|---|

## Appendix 5 – Key Milestones

| Date          | Details  |
|---------------|--|
| April 2010    | Review and consultation on Scheme commences                          |
| October 2010  | Consultation on Scheme closes  |
| December 2010 | Single Equality Scheme approved, published and implementation begins |



## Appendix 6 - Equality and Diversity - Policy Screening Checklist

|   |   |                 |    |                        |    |                             |    |
|---|---|-----------------|----|------------------------|----|-----------------------------|----|
| Policy/Service Title:   |   | Directorate:    |    |                        |    |                             |    |
| Name of person/s auditing/developing/authoring a policy/service:  |   |                 |    |                        |    |                             |    |
| Aims/Objectives of policy/service:  |   |                 |    |                        |    |                             |    |
| <b>Policy Content:</b> <ul style="list-style-type: none"> <li>For each of the following check the policy/service is sensitive to people of different age, ethnicity, gender, disability, religion or belief, and sexual orientation?</li> <li>The checklists below will help you to see any strengths and/or highlight improvements required to ensure that the policy/service is compliant with equality legislation.</li> </ul> |   |                 |    |                        |    |                             |    |
| <b>1. Check for DIRECT discrimination against any group of SERVICE USERS:</b>   |   |                 |    |                        |    |                             |    |
| <b>Question:</b> Does your policy/service contain any statements/functions which may exclude people from using the services who otherwise meet the criteria under the grounds of:   |   | <i>Response</i> |    | <b>Action required</b> |    | <i>Resource implication</i> |    |
|   |   | Yes             | No | Yes                    | No | Yes                         | No |
| 1.1   | Age?  |                 |    |                        |    |                             |    |
| 1.2   | Gender (Male, Female and Transsexual)?                |                 |    |                        |    |                             |    |
| 1.3   | Disability?   |                 |    |                        |    |                             |    |
| 1.4   | Race or Ethnicity?                                    |                 |    |                        |    |                             |    |
| 1.5   | Religious, Spiritual belief (including other belief)? |                 |    |                        |    |                             |    |
| 1.6   | Sexual Orientation?                                   |                 |    |                        |    |                             |    |
| 1.7   | Human Rights: Freedom of Information/Data Protection  |                 |    |                        |    |                             |    |
| 1.8   | Language?   |                 |    |                        |    |                             |    |
| If yes is answered to any of the above items the policy/service may be considered discriminatory and requires review and further work to ensure compliance with legislation.  |   |                 |    |                        |    |                             |    |
| <b>2. Check for INDIRECT discrimination against any group of SERVICE USERS:</b>   |   |                 |    |                        |    |                             |    |
| <b>Question:</b> Does your policy/service contain any statements/functions which may exclude people from using the services under the grounds of:   |   | <i>Response</i> |    | <b>Action required</b> |    | <i>Resource implication</i> |    |
|   |   | Yes             | No | Yes                    | No | Yes                         | No |
| 2.1   | Age?  |                 |    |                        |    |                             |    |
| 2.2   | Gender (Male, Female and Transsexual)?                |                 |    |                        |    |                             |    |
| 2.3   | Disability?   |                 |    |                        |    |                             |    |
| 2.4   | Race or Ethnicity?                                    |                 |    |                        |    |                             |    |
| 2.5   | Religious, Spiritual belief (including other belief)? |                 |    |                        |    |                             |    |
| 2.6   | Sexual Orientation?                                   |                 |    |                        |    |                             |    |
| 2.7   | Human Rights: Freedom of Information/Data Protection  |                 |    |                        |    |                             |    |
| 2.8   | Language?   |                 |    |                        |    |                             |    |

If yes is answered to any of the above items the policy/service may be considered discriminatory and requires review and further work to ensure compliance with legislation.

**TOTAL NUMBER OF ITEMS ANSWERED ‘YES’ INDICATING DIRECT DISCRIMINATION =**

**3. Check for DIRECT discrimination against any group relating to EMPLOYEES:**

| Question: Does your policy/service contain any statements which may exclude employees from implementing the service/policy under the grounds of: |   | Response |    | Action required |    | Resource implication |    |
|--|---|----------|----|-----------------|----|----------------------|----|
|  |   | Yes      | No | Yes             | No | Yes                  | No |
| 3.1  | Age?  |          |    |                 |    |                      |    |
| 3.2  | Gender (Male, Female and Transsexual)?                |          |    |                 |    |                      |    |
| 3.3  | Disability?   |          |    |                 |    |                      |    |
| 3.4  | Race or Ethnicity?                                    |          |    |                 |    |                      |    |
| 3.5  | Religious, Spiritual belief (including other belief)? |          |    |                 |    |                      |    |
| 3.6  | Sexual Orientation?                                   |          |    |                 |    |                      |    |
| 3.7  | Human Rights: Freedom of Information/Data Protection  |          |    |                 |    |                      |    |
| 3.8  | Language?   |          |    |                 |    |                      |    |

If yes is answered to any of the above items the policy/service may be considered discriminatory and requires review and further work to ensure compliance with legislation.

**4. Check for INDIRECT discrimination against any group relating to EMPLOYEES:**

| Question: Does your policy/service contain any conditions or requirements which are applied equally to everyone, but disadvantage particular persons’ because they cannot comply due to: |   | Response |    | Action required |    | Resource implication |    |
|--|---|----------|----|-----------------|----|----------------------|----|
|  |   | Yes      | No | Yes             | No | Yes                  | No |
| 4.1  | Age?  |          |    |                 |    |                      |    |
| 4.2  | Gender (Male, Female and Transsexual)?                |          |    |                 |    |                      |    |
| 4.3  | Disability?   |          |    |                 |    |                      |    |
| 4.4  | Race or Ethnicity?                                    |          |    |                 |    |                      |    |
| 4.5  | Religious, Spiritual belief (including other belief)? |          |    |                 |    |                      |    |
| 4.6  | Sexual Orientation?                                   |          |    |                 |    |                      |    |
| 4.7  | Human Rights: Freedom of Information/Data Protection  |          |    |                 |    |                      |    |
| 4.8  | Language?   |          |    |                 |    |                      |    |

If yes is answered to any of the above items the policy/service may be considered discriminatory and requires review and further work to ensure compliance with legislation.

**TOTAL NUMBER OF ITEMS ANSWERED ‘YES’ INDICATING INDIRECT DISCRIMINATION =**

Signatures of authors / auditors:

Date of signing:

## Equality Action Plan/Report

**Directorate:**

**Service/Policy:**

**Responsible Manager:**

**Name of Person Developing the Action Plan:**

**Consultation Group(s):**

**Review Date:**

The above service/policy has been reviewed and the following actions identified and prioritised. All identified actions must be completed by the date: \_\_\_\_\_

| <b>Action:</b>   | <b>Lead:</b> | <b>Timescale:</b> |
|--|--------------|-------------------|
| Rewriting policies or procedures   |              |                   |
| Stopping or introducing a new policy or service  |              |                   |
| Improve /increased consultation  |              |                   |
| A different approach to how that service is managed or delivered   |              |                   |
| Increase in partnership working  |              |                   |
| Monitoring   |              |                   |
| Training/Awareness Raising/Learning  |              |                   |
| Positive action  |              |                   |
| Reviewing supplier profiles/procurement Arrangements   |              |                   |
| A rethink as to how things are publicised  |              |                   |
| Review date of policy/service and EIA: this information will form part of the Governance Performance Reviews |              |                   |
| If risk identified, add to risk register. Complete an Incident Form where appropriate.                       |              |                   |

When completed please return this action plan to the Trust Equality and Diversity Lead; Pamela Chandler or Jane Turvey. The plan will form part of the quarterly Governance Performance Reviews.

Signed by Responsible Manager:

Date: