

Foundation Trust Programme Update

Agenda Item:	14	Reference:	WCT14/15-164
Meeting Name:	Trust Board	Meeting Date:	8 October 2014
Lead Director:	Alison Hughes		
Job Title:	Trust Board Secretary		

Link to Business Plan:			
Has an Equality Impact Assessment (EQIA) been undertaken & attached?	Yes <input type="checkbox"/>	No <input checked="" type="checkbox"/>	N/A <input type="checkbox"/>
Have the Public & Stakeholders been consulted?	Yes <input type="checkbox"/>	No <input checked="" type="checkbox"/>	N/A <input type="checkbox"/>
To Approve <input type="checkbox"/>	To Note <input type="checkbox"/>	To Assure <input checked="" type="checkbox"/>	

Financial Implications: <i>E.g. What is the Impact on the Trust? Does it provide Value for Money? All costs should be clearly explained in the section below.</i>			
Dependant on achieving Foundation Trust status.			
Overall Cost / Pressure:	n/a	Overall Income:	n/a
Additional Funding Required:	n/a	Funding Already Ring Fenced:	n/a

Identified Risks:
Ability to deliver the organisational change to meet NHS policy within the financial envelope and timescales set by Department of Health.

Assurance to Board:
Programme management arrangements, overall timetable and risks to achieving FT status determined, as set out in this paper.

Publish on Website: Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>	Private Business: Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>
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Report History		
Submitted to	Date	Brief Summary of Outcome
Regular report submitted each month		

Wirral Community NHS Trust

Foundation Trust Programme Update

Purpose

1. The purpose of this paper is to provide an update with regard to the trust's progress with its application for Foundation Trust status.

General Programme Update

2. The programme plan and associated actions are on track to support continued delivery to the anticipated timetable.
3. The trust submitted its five year Integrated Business Plan, long term financial model and associated strategies to the TDA in line with the national deadline of 20 June 2014.
4. During July, August and early September, the trust engaged with Monitor to undertake a review of the Quality Governance Assurance Framework (QGAF) and with the CQC for the Chief Inspector of Hospitals Inspection during the first week of September 2014.

Review of programme management

5. In October 2011, the trust board approved the establishment of a Foundation Trust Implementation Group (FTIG), an officer based working group under the chairmanship of the Director of Finance, co-ordinating and reporting on the work streams included in this report.
6. The FTIG was established initially with a reporting line to a Foundation Trust Programme Board, chaired by a Non-Executive Director.
7. The Foundation Trust Programme Board has not met regularly and this detailed report has been presented to public board on a monthly basis since January 2012.
8. The weekly Senior Management Team (SMT) meetings and monthly extended SMT meetings have detailed oversight of all aspects of the FT programme.
9. Members of SMT also attend monthly Integrated Delivery Meetings (IDM) with the TDA to review progress with the trust's FT application.
10. It is therefore proposed that the trust board receives and endorses the recommendation to disband the Foundation Trust Implementation Group (FTIG), acknowledging the reporting of all FT programme details to the weekly SMT and monthly extended SMT meetings.
11. The Terms of Reference for SMT will be updated accordingly to formalise this reporting line.

Work stream updates

Business planning work stream

12. The trust submitted its updated five year Integrated Business Plan (IBP) and Long Term Financial Model (LTFM) to the TDA in line with the national deadline of 20 June and will be working to refresh the document by the end of December 2014, in readiness for the next phase of the FT process with the TDA Board to Board expected in Q1 2015.
13. The submitted documents demonstrate the case for foundation trust status and are the seventh version of the trust's documents and set out plans and financial expectation for 2014-2019.
14. The formal submission comprised the following documents

- i) Integrated Business Plan 2014-2019
- ii) Base Case Long Term Financial Model (LTFM)
- iii) Downside LTFM
- iv) Mitigated Downside LTFM
- v) Summary of five year plans
- vi) Activity plans
- vii) Five year Workforce Plans

15. The submissions show the clear alignment of trust plans with the wider health and social care economy and demonstrate the delivery of high quality, safe, effective and responsive services which are financially sustainable.
16. Initial feedback from the TDA suggests there are no identified concerns with the plans submitted.
17. The development support plan associated with the IBP has also been submitted in line with the national deadline of 30 September 2014.

Quality work stream

18. There has been significant progress in the quality work stream with developments in two key areas.
19. The trust's inspection under the CQC Chief Inspector of Hospitals inspection regime took place during the first week in September 2014.
20. This is a significant milestone in the foundation trust application process as both the TDA and Monitor will not approve FT applications at either of their final approval stages without satisfactory sign off as good or outstanding by the CQC under the new regime.
21. The CQC report following the inspection is due to be shared with the trust during the last two weeks in October 2014. This will be followed by a Quality Summit on 11 November to include the CQC lead inspector and inspection chair, members of the trust board and key representatives from the local health and social care economy and NHS England.
22. In addition to the Chief Inspector of Hospitals inspection the trust engaged with Monitor, during July and August, on a review of our Quality Governance Assurance Framework (QGAF). This work included a thorough review of information, a series of interviews with teams across the trust, staff focus groups and board and committee observations.
23. The Chief Executive, Chairman, Director of Quality and Nursing and Medical Director attended a 'confirm and challenge' session with Monitor on 8 September, to review their findings. This has been followed by a letter received from Monitor providing a revised QGAF score of 4.0 with some recommendations identified.

Finance and performance work stream

24. As described above the trust's five year financial plans have been submitted to the TDA. These consist of base case financial plans, the testing of the sensitivity of those plans and associated assumptions to risks, and the plans to mitigate risks.
25. These plans show, subject to the delivery of challenging CIP savings each year of 4-5%, the Trust maintains a financial surplus of more than 1%, a healthy case position and a continuity of services risk rating of four for each of the five years of the planning period.
26. The plans are sensitive to assumptions on the delivery of CIP, the annual NHS tariff deflator and pay inflation, however the assumption made in the plans are robust and prudent.
27. Under a so called "downside" scenario the trust would be able to maintain its surplus, cash balance and risk rating through the delivery of identified mitigating actions.

28. The TDA has confirmed that the trust will be required to complete a refresh HDD2 assessment and will be confirming timelines for completion.

TDA reporting

29. The trust has submitted its fifth set of monthly TDA monitoring returns for 2014/15. These were agreed at the September Finance and Performance Committee and relate to the month of August.

30. The Finance and Performance Committee reviewed the relevant elements of the self-certification statements and recorded assurance on the submitted position of compliance with all indicators.

31. The trust has undertaken to recover its slower than planned in-year delivery of CIP savings and to be back on profile by the end of December.

Board action

32. The trust board is asked to note and to be assured on the progress made by the trust in its FT application process and assure itself that the actions identified are consistent with existing timeframes.

Alison Hughes
Trust Board Secretary

30 September 2014

Equality, Diversity and Human Rights Strategy Action Plan Update

Agenda Item:	15	Reference:	WCT14/15-165
Meeting Name:	Trust Board	Meeting Date:	8 October 2014
Lead Director:	Jo Harvey		
Job Title:	Director of Human Resources and Organisational Development		

Link to Business Plan:	Yes					
Has an Equality Impact Assessment (EQIA) been undertaken & attached?	Yes	<input type="checkbox"/>	No	<input type="checkbox"/>	N/A	<input checked="" type="checkbox"/>
Has the Public & Stakeholders been consulted?	Yes	<input checked="" type="checkbox"/>	No	<input type="checkbox"/>	N/A	<input type="checkbox"/>
To Approve	<input type="checkbox"/>	To Note	<input checked="" type="checkbox"/>	To Assure	<input checked="" type="checkbox"/>	

Financial Implications:
*E.g. What is the Impact on the Trust? Does it provide Value for Money?
 All costs should be clearly explained in the section below.*

Overall Cost / Pressure:	£	Overall Income:	£
Additional Funding Required:	£	Funding Already Ring Fenced:	£

Identified Risks:

Failure to demonstrate compliance in meeting the General Duty and Public Sector Equality Duty (PSED) Equalities Act 2010

Risk of legal challenge if WCT failed to meet its duties under equalities legislation or if knowingly or unknowingly allowed discrimination to occur.

Assurance to Board:

The trust has an action plan in place to meet its duties under the Equality Act 2010.

Publish on Website: Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>	Private Business: Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>
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Report History		
Submitted to	Date	Brief Summary of Outcome
No history		

Wirral Community NHS Trust

Equality, Diversity and Human Rights Strategy Update July-September 2014

Purpose

1. The purpose of this paper is to inform the board of the progress of the Equality, Diversity and Human Rights (ED&HR) Strategy and to provide assurance to the board in relation to key actions contained within the strategy. It specifically focuses on activity in the quarter July to September 2014.

Executive Summary

2. The trust's Equality, Diversity and Human Rights Strategy was agreed in 2013 to outline the trust's approach to its duties under the Equality Act 2010 (EA10) in relation to both the provision of services and the employment of staff.
3. The Equality and Diversity action plan (Appendix 1) shows that there are 43 actions which have been RAG rated. For this quarter 10 of these are green (increase of 6), 15 are amber (increase of 8) and 19 are still red, the final column shows predicted ratings for the next quarter. As reported previously, progress relies on the identification of actions by services and collection and analysis of data over a period of time, which explains why there are a number of remaining reds.
4. Predicted ratings for the next quarter demonstrate significant progress in terms of areas moving to amber or green. It is predicted that 4 actions will move from amber to green and 19 from red to amber. This will then leave no actions rated as red.
5. There are a number of key actions in the strategy which are being actioned to ensure progress.
 - Continued development of 3 Staff Support Networks, LGBT, BME, Disability
 - Identifying and training Equality Champions from within the workforce
 - Continued development of a Community Equality Panel
 - Improving data collection
 - Development of a new and consistent approach to Equality Analysis
 - Production of Service Level Equality Actions Grid to capture information across the trust to enable gaps to be identified and actions to be developed and monitored. (See appendix 2 for illustration of Service Level Equality Actions Grid)

Progress in implementing the ED&HR Strategy

6. The LGBT and Disability Staff Support Groups continue to meet regularly and new members are attending.
7. A series of equality events have been arranged, reflecting key dates in the calendar that showcase a range of equality and diversity topics, especially those with significance for the staff networks. These equality events will be on-going as part of a campaign of general awareness raising on equality and diversity issues across the trust throughout the year. Events organised to date are listed below.

Date	Theme	Event	Details
10 September 2014	World Suicide Prevention Day	LGBT Staff Network Event:	This was used to raise awareness of the over-representation of LGBT people in suicide statistics especially young LGBT people.
22 September 2014	World Alzheimers Awareness Day	Awareness raising stall	Colleagues from Age UK Wirral had a stall at St Catherine's Health Centre with staff on hand to talk to both staff and patients on the issues and also the help and support that is available
16 October 2014	Hate Crime Awareness	Talk by Merseyside Police Crime Commissioner Jane Kennedy and Andrew Bollard, CEO Stop Hate UK	Jane Kennedy and Andrew Bollard will be visiting the Trust to talk to staff on how NHS staff can often be in a position to support patients who may be experiencing hate crime.
30 October 2014	Black History Month:	Challenges for BME Staff in the NHS – Talk by Michelle Cox, NHS England	To raise awareness both of the existence of the BME Staff support network and the particular issues facing BME staff. Guest speaker will be Michelle Cox NHS England who will talk about the challenges facing BME staff in the NHS

8. The Equality Champions Group is developing well and new champions continue to come forward to join. The group have been using the meeting time to increase their awareness of particular topics to enhance their knowledge of the equalities agenda. They have also requested that their names be listed on StaffZone so colleagues are aware of who they are and how they can provide support if needed.
9. As part of the general campaign of awareness raising, the Champions have also asked to write articles for inclusion in the staff bulletin to offer insight into specific topics where there is often little real knowledge and understanding. An example of this is a Champion who has personal experience of Obsessive Compulsive Disorder (OCD). The article will seek to raise awareness and the Champion has also offered to act as a resource for managers who may need deeper insight into supporting staff who have it.
10. The Community Equality Panel will be having its next meeting in October at this time they will be presented with the EDS2 action plan and through presentation of evidence, they will be asked for their view on current progress and grading ahead of the formal presentation to Health Watch Wirral in December 14.
11. Following presentation to extended Senior Management Team on the need to ensure a robust process to Equality Analysis (along with Equalities & Procurement, Equalities Monitoring), staff requiring training will now be identified. Each of these topics is an important component to moving forward in building evidence and ensuring impact and inclusion are being evaluated. In particular the need to embed Equality Analysis across all functions of the trust will be crucial to ensuring the evidence based approach being taken will be consistent across the organisation in demonstrating Due Regard to the Equality Act 10 and the General Duties.

12. The identification of equality actions by each service is continuing and is almost complete; these actions will be added in to the Service Level Equality Actions Grid that will provide evidence of how the trust is meeting the needs of the 9 Protected Characteristic groups. They will also provide the evidence for progress in 2015 when the EDS review is undertaken by Health watch.
13. The newly refreshed equality section of the trust's web-site now contains the key sections that must be available to the public. The website will continue to be developed particularly in the publication of Equality Analysis primarily as this is perhaps the single most significant challenge in terms of developing and maintaining a clear consistent robust approach to collating that evidence base.
14. To comply with a requirement of Wirral Clinical Commissioning Group (WCCG) a Learning Disabilities (LD) action plan has been developed for the trust based upon CQC self-assessment framework. Part of this requires the need to involve local people with Learning Disabilities; the LD action plan has been shared with Wirral Mencap for their advice and guidance. The LD action plan has been submitted to Wirral Clinical Commissioning Group and accepted by them. Although not an action under the strategy this is still integral to the equalities agenda for the trust and supports the second of the trust's Equality Objectives; '*To improve access to services for people with a learning disability*'.

Conclusion

15. Consistent progress has been made within this last quarter and as such greater awareness amongst staff of how all the key components of the equalities agenda fit together is developing and gaining momentum. The generation of evidence is key to demonstrating legal compliance. The increased confidence of attendees at both staff support networks and equality champions can be viewed as examples of this. The engagement of the Community Equality Panel members has assisted in building constructive and supportive links which has enabled constructive feedback to the equality actions identified within the trust. Examples of this include the LD action plan and the Equality action plan based upon the KPI returns.

Board Action

16. The board is asked to:

- note the status in relation to the Equality Key Actions
- be assured that the action being taken to address the key actions outlined in the strategy is making good progress and will deliver the required level of compliance

Jo Harvey

Director of Human Resources and Organisational Development

Contributors:

Tony Griffin, Equality and Diversity Project Manager

Appendix 1

Wirral Community 

NHS Trust

Equality & Diversity Strategy Action Plan

incorporating

Revised Equality Delivery System (EDS2) Action Plan

Equality Objectives Action Plan

October 2014

Equality & Diversity Strategy (EDS) 2- Action Plan 2014

Outcome	Link to CQC Outcomes Inspection Question/s	Supports Equality Objective	External assessment of Action Required	Specific Action/s To be Taken	Evidence of progress	Target date	Current EDS Rating	Expected EDS2 Rating at next review January 15	Named Contact for Evidence
Goal 1: Better Health Outcomes for all									
EDS2 1.1 Services are commissioned, procured, designed and delivered to meet the health needs of local communities <i>(Previously under EDS1: Services are commissioned, designed and procured to meet the health needs of local communities, promote well-being, and reduce health inequalities)</i>	Are services effective? Are services responsive to people's needs?	Equality Objectives 1,2	The Trust should undertake a self- assessment against each of the goals / outcomes, to grade itself.	<ul style="list-style-type: none"> Self-Assessment Undertaken EDS Grades Known Gaps identified Providers Plan/s requested 	Equality Analysis Equality KPIs Corporate strategies; QIPP business cases; contracts; JSNAs; NHS patient surveys; GP patient surveys; Quality Accounts; Friends & Family Test.	Dec 13			AG
			Providers required to submit a plan to demonstrate how they comply with the obligations under section 149 to commissioners	<ul style="list-style-type: none"> Evidence of Compliance/Non Compliance Actions Required if non-compliant to demonstrate compliance 		June 14			AG
			All subcontractors on an SLA. SLAs should be reviewed to ensure compliant with due regard requirements of the Equality Act 2010	<ul style="list-style-type: none"> Review of Subcontractors SLA Evidence of Due Regard/Lack of Due Regard Actions to demonstrate Due Regard 		June 14			DH & DW

Outcome	Link to CQC Outcomes Inspection Question/s	Supports Equality Objective	External assessment of Action Required	Specific Action/s To be Taken	Evidence of progress	Target date	Current EDS Rating	Expected EDS2 Rating at next review January 15	Named Contact for Evidence
EDS2 1.2 Individual people's health needs are assessed and met in appropriate and effective ways <i>(Previously under EDS1 Individual patient's health needs are assessed, and resulting services provided, in appropriate and effective ways)</i>	Are services effective? Are services responsive to people's needs?	Equality Objectives 1,2,3	Equality monitoring information on service users available. Report states data collected on ethnicity, gender, age, disabilities. Analysis not reported.	<ul style="list-style-type: none"> Analysis Report of existing data Future Equality Monitoring to include 9PC 	Equality Analysis Equality KPIs JSNAs; Quality Accounts; Friends & Family Test	June 14			TO & Service Leads
EDS2 1.3 Transitions from one service to another, for people on care pathways, are made smoothly with everyone well-informed <i>(Previously under ED1S Changes across services for individual patients are discussed with them, and transitions are made smoothly with everyone well-informed)</i>	Are services effective? Are services responsive to people's needs?	Equality Objectives 1,2,3	E&D analysis of members available. Does not cover all 9 protected characteristics.	<ul style="list-style-type: none"> Active participation of equality target groups e.g. LGBT in services 	Equality Analysis Quality Accounts; Friends & Family Test; Serious Incident Reports Community Panel	June 14			DH SL
				<ul style="list-style-type: none"> Measurable increases demonstrating engagement of patients across all 9PC 		Dec 14			Q&G
EDS2 1.4 When people use NHS services their safety is prioritised and they are free from mistakes, mistreatment and abuse	Are services safe? Are services caring? Are	Equality Objectives 2,3	Evidence of Patient engagement activity in the annual report. Patient and Staff Groups noted in the report, no clear analysis/evidence provided. No clear data to demonstrate	<ul style="list-style-type: none"> Engagement with Patient and Staff Groups to provide clear demonstrable evidence of patient safety across 9PC 	Equality Analysis Quality Accounts; Friends & Family Test; Serious Incident reports; CQC Quality & Risk	June 14			EB Q&G

Outcome	Link to CQC Outcomes Inspection Question/s	Supports Equality Objective	External assessment of Action Required	Specific Action/s To be Taken	Evidence of progress	Target date	Current EDS Rating	Expected EDS2 Rating at next review January 15	Named Contact for Evidence
<i>(Previously under EDS1 The safety of patients is prioritised and assured. In particular, patients are free from abuse, harassment, bullying, violence from other patients and staff, with redress being open and fair to all)</i>	services responsive to people's needs?		safety of patients aligned to protected characteristics	<ul style="list-style-type: none"> Data produced and published 	Profiles				EB & Q&G
EDS2 1.5 Screening, vaccination and other health promotion services reach and benefit all local communities <i>(previously under EDS 1 Public health, vaccination and screening programmes reach and benefit all local communities and groups)</i>	Are services effective? Are services responsive to people's needs?	Equality Objectives 1,2	Performance information not available	<ul style="list-style-type: none"> Review Service Spec to ensure reach across 9PC 	Equality Analysis Health & Social Care Information Centre Health Promotion and Health Protection Publications	June 14			SF, HV , PC, LM
				<ul style="list-style-type: none"> Collate data on performance Identify gaps 		June 14			SF, HV , PC, LM
				<ul style="list-style-type: none"> Develop Strategy 		Sep 14			SF, HV , PC, LM

Outcomes	Link to CQC Outcomes Inspection Question/s	Supports Equality Objective	External Assessors Action Required	Specific Action/s To be taken	Evidence of progress	Target	Current EDS Grade	Expected EDS2 Grade at next review January 15	Named Contact for Evidence
Goal 2: Improved patient access and experience									
EDS2 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 <i>(Previously under EDS1 Patients, carers and communities are readily access services, and should not be denied access on unreasonable grounds)</i>	Are services responsive to people's needs	Equality Objectives 1,2,3	Development of information to produce analysis across all 9 characteristics	<ul style="list-style-type: none"> Information/Data obtained across 9PC 	Equality Analysis NHS patient surveys; GP patient surveys; A&E and other waiting times surveys; Quality Accounts;	June 14			EB
				<ul style="list-style-type: none"> Review existing work undertaken 		June 14			EB
				<ul style="list-style-type: none"> develop strategy to ensure access of services taking into account barriers that historically hinder equality of access 		Sep 14			EB
EDS2 2.2 People are informed and supported to be as involved as they wish to be in decisions about their care. <i>(Previously under S1 Patients are informed and supported to be as involved as they wish to be in their diagnoses and decisions about their</i>	Are services caring	Equality Objectives 1,2,3	E&D Data to be provided in the format of the 9 protected characteristics.	<ul style="list-style-type: none"> Review work of PE Team analysis of existing data 	Equality Analysis JSNAs; NHS patient surveys; GP patient surveys; Quality Accounts	June 14			Q&G
				<ul style="list-style-type: none"> Identify gaps and address across 9PC 		June 14			Q&G
				<ul style="list-style-type: none"> New Patient Survey undertaken 		Aug 14			Q&G
				<ul style="list-style-type: none"> Publish information in Annual Report 		March 15			

<i>care, and to exercise choice about treatments and places of treatments)</i>									Q&G
EDS2 2.3 People report positive experiences of the NHS <i>(Previously under EDS1Patients and carers report positive experiences of their treatment and care outcomes and of being listened to and respected and how their privacy and dignity is prioritised)</i>	Are services safe Are services effective Are services caring Are services responsive to people's needs	Equality Objectives 1,2,3,	E&D Data to be provided in the format of the 9 protected characteristics. Analytical data to be provided.	<ul style="list-style-type: none"> E&D Data to be collected across 9PC 	JSNAs; NHS patient surveys; GP patient surveys; A&E and other waiting times surveys; Quality Accounts; Friends & Family Test	June 14			EB Q&G
				<ul style="list-style-type: none"> Staff briefings as required to support data collection 		June- July 14			Q&G
				<ul style="list-style-type: none"> Local data to be used if available re LGBT experience Focus Groups 		June- Sep 15			AG
EDS2 2.4 People's complaints about services are handled respectfully and efficiently <i>(Previously under EDS1 Patients' and carers' complaints about services, and subsequent claims for redress, should be handled respectfully and efficiently</i>	Are services effective Are services caring Are services responsive to people's needs	Equality Objectives 1,2,3	Complaint information collated in the format of the 9 protected characteristics.	<ul style="list-style-type: none"> Data collected across 9PC 	JSNAs; NHS Patient surveys; GP patient surveys; Quality Accounts;	June 14			SL
				<ul style="list-style-type: none"> Clear procedures on complaint handling 		July 15			
				<ul style="list-style-type: none"> Learning Difficulties to be considered re on-line complaint and feedback form 		July 15			SL

Outcomes	Link to CQC Outcomes Inspection Questions	Supports Equality Objective	External Assessors Action Required	Specific Action/s To be Taken	Evidence of progress	Target	Current EDS Grade	Expected EDS2 Grade at next review January 15	Named Contact for Evidence
Goal 3: A representative and supported workforce									
EDS2 3.1 Fair NHS recruitment and selection processes lead to a more representative workforce at all levels <i>(Previously under EDS1 Recruitment and selection processes are fair, inclusive and transparent so that the workforce becomes as diverse as it can be within all occupations and grades)</i>	Are services well led	Equality Objectives 4	No recruitment / leaver analysis information reported. To be aligned to the 9 protected characteristics	<ul style="list-style-type: none"> Review of policies and procedures across 9PC EIA across 9PC 	Equality Analysis Health & Social Care Information Centre Workforce Statistics; NHS Staff Survey; local NHS workforce data and surveys;	June 14			EA
				<ul style="list-style-type: none"> New recruitment procedure compliant with EA10 and PSED 		Sep 14			HR
EDS2 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 <i>(Previously under EDS1 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)</i>	Are services well led	Equality Objectives	E&D analysis provided in summary format for the Trust, detailing staff bands headcounts and analysis across the six E&D strands. Analysis to be provided across the 9 protected characteristics by division	<ul style="list-style-type: none"> E&D analysis across 9PC Identify gaps 	Equal pay audits; Agenda for Change evidence	June 14			HR
				<ul style="list-style-type: none"> Strategy to address 		Dec 14			HR

<p>EDS2 3.3 Training and development opportunities are taken up and positively evaluated by all staff</p> <p><i>(Previously under ED1S Through support, training, personal development and performance appraisal, staff are confident and competent to do their work, so that services are commissioned or provided appropriately)</i></p>	<p>Are services well led</p>	<p>Equality Objectives 6</p>	<p>Reporting on compliance against refresher training not provided.</p>	<ul style="list-style-type: none"> Report on compliance against refresher training to be produced 	<p>Equality KPI NHS Staff Survey; local NHS workforce data and surveys; information on the take-up and evaluation of local training and development opportunities; current % for E&D training</p>	<p>June 14</p>			<p>CF</p>
			<p>NHS staff survey for 2012 reported 55% of staff had received E&D training, which compared unfavourably against the national average.</p>	<ul style="list-style-type: none"> Increase Staff undertaking E&D training 		<p>Sep 14</p>			<p>CF</p>
			<p>No E&D analysis information provided.</p>	<ul style="list-style-type: none"> E&D analysis undertaken Specialist E&D training as needed 		<p>Nov 14</p>			<p>CF</p>
<p>EDS2 3.4 When at work, staff are free from abuse, harassment, bullying and violence from any source</p> <p><i>(Previously under EDS1 Staff are free from abuse, harassment, bullying and violence from both patients and their relatives and colleagues with redress being open and fair to all)</i></p>	<p>Are services well led</p>	<p>Equality Objectives 4</p>	<p>Developments of reporting to link to the 9 protected characteristics.</p>	<ul style="list-style-type: none"> Reporting to link to 9PC Staff Survey to be undertaken E&D information obtained Issues identified and actions to address developed 	<p>NHS Staff Survey; local NHS workforce data and surveys; the monitoring of grievance and disciplinary procedures: staff survey analysis including focus on abuse, harassment etc</p>	<p>June 14</p>			<p>EA</p>
<p>EDS2 3.5 Flexible working options are available to all staff consistent with the needs of the service and the way people lead their lives</p>	<p>Are services well led</p>	<p>Equality Objectives 4</p>	<p>Equality monitoring form does not reference all 9 protected characteristics.</p>	<ul style="list-style-type: none"> Equalities Monitoring Form across 9PC to be developed 	<p>Equality KPI NHS Staff Survey; Trust workforce data and surveys</p>	<p>June 14</p>			<p>HR</p>
			<p>No reporting, analysis has been completed against equality monitoring</p>	<ul style="list-style-type: none"> Data collected Identification of barriers 		<p>June 14</p>			<p>HR</p>

<i>(Previously under EDS1 Flexible working options are made available to staff, consistent with the needs of the service and the way that people lead their lives. (Flexible working may be a reasonable adjustment for disabled members of staff or carers)</i>				<ul style="list-style-type: none"> • Strategy to address 		Sept14			HR
				<ul style="list-style-type: none"> • Review of Flexible Working practices 		Nov 14			HR
EDS2 3.6 Staff report positive experiences of their membership of the workforce <i>(Previously under EDS1 The workforce is supported to remain healthy with a focus on addressing major health and lifestyle issues that affect individual staff and the wider population)</i>	Are services well led	Equality Objectives 5	Summary produced of managing attendance. Not reported against the 9 protected characteristics	<ul style="list-style-type: none"> • Data collected across 9PC 		June 14			HR
				<ul style="list-style-type: none"> • Education & Workforce Committee to report on issues affecting staff well-being 		July 14			HR
				<ul style="list-style-type: none"> • Revisit Wellbeing Strategy and identify actions required 		Sep 14			HR

Outcomes	Link to CQC Outcomes Inspection Questions	Supports Equality Objective	External Assessors Action Required	Specific Action/s To be Taken	Evidence of progress	Target	Current EDS Grade	Expected EDS2 Grade at next review January 15	Named Contact for Evidence
Goal 4: Inclusive leadership at all levels									
<p>EDS2 4.1 Boards and senior leaders routinely demonstrate their commitment to promoting equality within and beyond their organisations</p> <p>EDS Boards and senior leaders conduct and plan their business so that equality is advanced, and good relations fostered, within their organisations and beyond</p>	Are services well led	Equality Objectives 4	<p>Evidence of completion, and confirmation of general equality duty consideration.</p> <p>Confirmation that Boards and Senior Managers adequately trained on their duties under the Equality Act 2010.</p>	<ul style="list-style-type: none"> EIA Process across 9PC 	<p>Speeches given by Board members and senior leaders to various audiences; reports presented by Board members and senior leaders to various audiences; participation in Board Leadership Programmes for equality; and active promotion of equality-based initiatives for services and the workforce including local mentoring schemes</p>	June 14			JH & SG
				<ul style="list-style-type: none"> Identify training needs for Board and SMT 		May 14			JH & SG
				<ul style="list-style-type: none"> Board & SMT demonstrate compliance with General Duties in Business Planning 		May 14			JH & SG
4.2 Middle managers and other line managers support their staff to work in culturally competent ways within a work environment free from discrimination	Are services well led	Equality Objectives 6	Evidence of training update to managers	<ul style="list-style-type: none"> Training updated 	NHS Staff Survey; Trust workforce data and surveys	June 14			KWS & AG
4.3 Papers that come before the Board and other major Committees identify equality-related impacts including risks, and say how these risks are to be managed	Are services well led	Equality Objectives	New to EDS2	New to EDS2	Substantive papers discussed at the Board or other major committees	June 14			JH & SG

Appendix 2

Service Level Equality Actions Grid											Total Equality Actions
Equality Actions by Protected Characteristics	Age	Race	Disability	Sex	Gender Reassignment	Sexual Orientation	Religion/Belief	Marriage & Civil Partnership	Pregnancy & Maternity	Equality Actions relating to more than one PC	
Operations & Performance	✓		✓		✓	✓	✓			✓	97 identified
Human Resources & Organisational Development		✓	✓		✓	✓				✓	26 identified
Finance										✓	7 identified

Examples of Equality Actions identified for 2014/15

Estates: All subcontractors on an SLA reviewed to ensure compliance with Equality Act

Sexual Health: Analysis of data around Sexual Orientation of patients attending the service to determine if hard to reach groups need targeting

Primary Care: Increase membership of PPG from patients across all PC (ADHC)

Speech & Language: Ensure service users with communication and or learning disabilities have accessible information

Community Nursing: Work to be undertaken to move away from task orientation of patient care to ensure patients are assessed holistically

Unplanned Care: Review of current IT systems to ask more pertinent questions, use frontline staff i.e. Call Handlers at Riverside and the receptionists at the Walk in Centre and ADHC to capture that information when patient calls for any current service that comes through CBS/OOH

Health Visiting & IFT: Gay & Lesbian parents to be acknowledged and training provided to the HV service to help staff have an understanding of these parents

Physiotherapy & Rehabilitation: Improve awareness of needs for adults with more acute mental health needs- no specialist physiotherapy provision

Podiatry: Patient Experience Questionnaires currently only provided in English, to be reviewed

Human Resources: Audit new starters over last 12months against protected characteristics; undertake targeted action to address any under representation (e.g. tailored section of recruitment and selection training on Sexual Orientation)

Communications & Marketing: Review information for translation and interpreting needs

Equality & Diversity: Develop key equality training topics and identify additional equalities training gaps

Business Intelligence: Evidence gathering from other NHS providers on their current approach to collecting the protected characteristics, baseline current ability with core clinical facing IT systems to capture the protected characteristics

Contract & Procurement: Develop Procurement Policy to reflect Equality Act requirements