

Equality and Diversity Action Plan – 2019 to 2020

Based on Equality and Diversity Strategy (Key Milestones 2019 to 2021)

Milestone 1: To Develop Inclusive and Compassionate Leadership

| Developing Inclusive and Compassionate Leadership | Year 1 Milestone | | |
|---|---|--|-------------|
| Provide innovative and inclusive ways to support leadership development at all levels | The existing range of formal leadership training programmes have been supplemented with additional informal management training that supports the attainment of skills and knowledge, whilst driving behaviours that are cognisant with Trust values. | | |
| | Action | Timescale | Owner |
| | To offer staff skills development in the areas of vital conversations, managing conflict and enhancing emotional intelligence that helps to support management development. | March 2020 | Nikki Hill |
| | To work with MEGA to establish a process of reverse mentoring for the Executive and Non- Executive Directors (WRES data) | December 2019 | Nikki Hill |
| | To identify a range of other mentors that can support staff at all stages of their development. (WRES data) | March 2020 | Nikki Hill |
| | To promote creative and innovative ways to promote and embed flexible ways of working that support staff development and also meet Trust needs (Action from Annual Report) | March 2020 | Nneka Chima |
| | To assess impact of a pilot for BME attendance at interview panels for bands 8A and above (WRES data). | March 2020 | Nneka Chima |
| | To annually monitor trajectory towards the Model Employer goals for Bands 8A – VSM BME recruitment (action taken from NHSI Model Employer leadership strategy, WRES data) | By 2028 53 staff Band 8A (2018 – 29) 15 staff Band 8B (2018 – 15) 6 staff Band 8C (2018 – 7) 5 staff Band 8D (2018 – 0) 5 staff VSM (2018 – 1) Interim reviews to take place every two | Nikki Hill |

| | | | |
|--|--|--|----------------|
| | | years to check Trust is on target. By 2021 12 staff Band 8a 3 staff Band 8b 1 staff Band 8c 1 staff Band 8d 1 staff VSM | |
| | To drive an appointment process to appoint an additional board member from a BME background (action taken from NHSI Model Employer leadership strategy, WRES data) | March 2020 | Kelvin Cheatle |
| Promote and drive compassionate leadership to become the normal way to behave | Self-compassion has been embedded within the Trust and staff undertake regular self-evaluations | | |
| | Action | Timescale | Owner |
| | To undertake analysis to understand why data suggests that the number of grievances from BAME staff is proportionately higher when compared with the overall workforce split by ethnicity and to identify the actions that need to be taken as a result of that. (Action from annual report) | November 2019 | Nneka Chima |
| | To offer staff access to an independent self-compassion programme that helps to support them at work | October 2019 | Nikki Hill |
| | To offer compassionate leadership training to managers (WRES data) | November 2019 | Nikki Hill |
| | To implement mentoring/ reverse mentoring within the Trust for at least 1 BME staff at Band 8D or below (action taken from NHSI Model Employer leadership strategy, WRES data) | March 2020 | Nneka Chima |
| Reduce barriers to education, training and career development | The barriers for progression have been identified within the Trust and consequently an action plan has been produced that addresses these. | | |
| | Action | Timescale | Owner |
| Further analysis is to be undertaken to establish some baseline data in relation to the number of applicants, shortlisted and appointed by the various | November 2019 | Nneka Chima | |

| | | | |
|---|--|--|-------------|
| | protected characteristics. To then identify the barriers and issues related to this. (Action from annual report) | | |
| | To monitor the take up of formal and informal management training to ensure that there is equity in access and training opportunities, identifying any actions that need to be taken to address issues. | Reported to the E&D committee every 6 months | Nneka Chima |
| | Provide Leadership development programs that support women into leadership roles both managerial and clerical (Action from Gender Pay Gap report 2019) | March 2020 | Nikki Hill |
| | To run an annual all-inclusive campaign to encourage more female applications for Clinical Excellence Awards. Drop in sessions to be offered to all applicants to provide advice and guidance on completing a good application (Action from Gender pay gap report 2019) | March 2020 | Frank Ajoku |
| | Draft Actions recommended from WDES data | | |
| To carry out a data validation exercise on ESR to be undertaken by all staff to validate and update their personal records as this may help to improve the recording of staff identifying as disabled (WDES data) | March 2020 | Workforce Information | |
| To utilise the disability confident programme as an audit tool to review all areas within the Trust as part of the disability task and finish group (WDES data) | Ongoing | Nneka Chima | |
| To explore the possibility of providing a Work Place Support Worker (WDES data) | December 2020 | Nneka Chima | |

Milestone 2: To Promote Staff and Patient Engagement and Partnerships

| Promoting Staff and Patient Engagement and Partnerships | Year 1 Milestone | | |
|--|--|---------------------------|-------------------------|
| Support the engagement of staff through MEGA and other staff inclusion groups | MEGA group is supported to grow and the drives a number of task and finish groups as defined by the committee. Other staff engagement groups are set up as defined as they are needed by staff. | | |
| | Action | Timescale | Owner |
| | To work with a range of staff groups to understand what is needed to support a multi-generational workforce to attract and retain the full age range of experience in the workforce (Action from annual report) | March 2020 | Nneka Chima/ Nikki Hill |
| | To work with external organisations and interested staff members to identify how the Trust can ensure there is an inclusive culture and also how the Trust support those going through gender reassignment | March 2020 | Nneka Chima |
| To identify and implement batch interviews for certain roles across the Trust (action taken from NHSI Model Employer leadership strategy, WRES data) | March 2020 | Nneka Chima / Linda Dyson | |
| Celebrate diversity through a range of different activities that seeks to engage staff | Task and finish groups were formed to carry forward the actions resulting from the action plan as designated by the E&D committee. Staff networks were reviewed and also promoted and available to staff where it was appropriate. | | |
| | Action | Timescale | Owner |
| | To form a task and finish group to develop the Positive about Disability action plan (Action from annual report and WDES data) | August 2020 | Nneka Chima |
| | To provide train the trainer training on autism awareness that can be cascaded across the Trust | December 2020 | Nikki Hill |
| To form a task and finish group that looks at the WRES data to identify specific actions that need to be undertaken to address the issues raised (Action from WRES data) | July 2019 | Nneka Chima | |

| | | | |
|---|---|-------------------------------|-------------------------------|
| | Actions recommended and approved from task and finish group investigating bullying and harassment within the Trust indicated from WRES data. | | |
| | To establish a process of providing a feedback loop to staff on incidents in relation to managing abuse from patients so that staff may feel reassured that action is taken in response to any issues raised. | January 2020 | Nneka Chima |
| | Ensure there are visible posters for patients around the Trust not tolerating abuse and violence to staff | January 2020 | Nneka Chima |
| | To make unconscious bias training mandatory for managers. | March 2020 | Nikki Hill |
| | To recruit additional Dignity at work champions to ensure there is diverse representation and support them with any necessary training. | January 2020 | Nikki Hill |
| | To work with staff side representatives to provide a safe place for staff to go and talk through their concerns. | December 2020 | Nneka Chima/ Linda Dyson |
| | To work with the Practice Development Nurse team about how to support the integration of overseas nurses | December 2020 | Nneka Chima |
| Provide opportunities for feedback and involvement that are inclusive of the range of people using our hospital's services | The Quality Priority to increase patient involvement in quality improvement (19/20) provides practical tools to help staff offer inclusive opportunities for feedback. | | |
| | Action | Timescale | Owner |
| | Ensure that work of the Learning Disability Collaborative and Patient and Public Involvement Collaborative take action to be inclusive and encourage programmes of work that are inclusive of the range of people using our hospitals services. | March 2020 | Jane Suppiah and Sarah Connor |
| As part of our quality priority to involve people in the hospital's quality improvement (QI) | December 2019 | Jane Suppiah and Emma Stinton | |

| | | | |
|--|--|---------------|-------------------------------|
| | work we strive to widen number and range of people involved. | | |
| | As part of our quality priority to involve people in QI we develop practical tools to ensure that feedback and consultation carried out by staff is inclusive and appropriate. | December 2019 | Jane Suppiah and Emma Stinton |

Milestone 3: To Ensure Improvement in Equality Outcomes

| | | | |
|--|---|------------------|--|
| Ensuring improvement in equality outcomes | Year 1 Milestone | | |
| Mainstream equality and diversity actions to support the delivery of our equality outcomes | Equality Impact Assessments are undertaken on a routine basis and are of a high quality, supported by regular training that is offered to staff around how to conduct them, diversity training and unconscious bias. | | |
| | Action | Timescale | Owner |
| | We will have placed an Accessible Information Flag on the patient records of all patients with a known accessible information need and aim to have to have flagged 10% of people with an preferred communication format that also have an Accessible Information need. | March 2020 | Shayimeera Vickneswaran and Jane Suppiah |
| Identify specific actions required for improved patient experience through the patient experience committee (PEC) | Establish a sub-group of PEC to understand and review how patient experience data reflects equality and diversity characteristics and the extent to which this is available. This group will establish how we currently use this data and what more can be done to improve the integrity and completeness of this data. | March 2020 | Nichola Kane and Jane Suppiah |
| Define a set of Key Performance Indicators related to equality and diversity and measure ourselves against these | A specific set of KPIs for both staff and patients is produced which covers all the mandatory elements the Trust needs to fulfil as well as local targets. | March 2020 | Nichola Kane and Jane Suppiah |