

ITEM: 09/110
Doc: 7

Meeting: Trust Board
Date: 15 July 2009

Title: **Single Equality Scheme 2008-2011: Progress report on action plans**

Executive

Summary: The Trust Board agreed The Whittington's Single Equality Scheme 2008-2011 in May 2008. It provides a framework for the Trust to ensure that equality issues are placed high on its agenda and an integrated approach is taken to address issues of race, gender, disability, age, religion/belief and sexual orientation. The full scheme can be read on the intranet or website, or is available from the Director of Human Resources. One year on since its development, this paper sets out the progress on the Single Equality Scheme action plans which includes:

Patient care services

- Patient complaints are categorised by privacy and dignity to facilitate monitoring
- Mixed sex breaches are recorded by site managers and included in the Trust Board's monthly dashboard report with a zero target
- Visible Leadership Team carry out privacy and dignity audits using the NHS Institute tool
- Older People's Inpatient Service Improvement Plan has been developed and good progress made
- Some communication leaflets are available in different languages eg, endoscopy patient information leaflets
- Some areas are fitted with hearing loops.
- Some Antenatal Clinic Classes are language specific, eg, Polish

Patient and public involvement and consultation

- Focus groups established from the Whittington membership with a good mix of our local population.
- Since September 2008 paper based patient surveys which include equality issues, have been conducted in a number of clinical areas. This is being replaced by touch screen surveys.
- New Maternity Service Liaison Committee leaflets have been published in conjunction with Islington PCT

- Increased user representation on above the committee and Labour Ward Forum
- Action plan has been developed for a multi-faith room and chapel as well as provision of a quiet space

Employment

- All staff to receive equal opportunities updates annually from September 2009
- Recruitment Open Days held in May/June 2009 to coincide with newly qualified students seeking nursing/midwifery posts
- Monitoring of current staff in terms of their religion/belief and sexual orientation to be undertaken autumn 2009. Participation will be encouraged but voluntary.
- Number of equality impact assessments published
- Equality bill awareness training provided to Board members May 2009

A further progress report on the Single Equality Scheme will be presented to the Trust Board in June 2010.

Action: For discussion

Report from: Neil Edgar, assistant director of human resources

Sponsor: Margaret Boltwood, director of human resources

Compliance with statute, directions, policy, guidance

Lead: All directors

Relevant equalities legislation

The Whittington Hospital's Single Equality Scheme

The Whittington's Single Equality Scheme 2008-2011 was agreed by the Trust Board in May 2008. It provides a framework for the Trust to ensure that equality issues are placed high on its agenda and an integrated approach is taken to address issues of race, gender, disability, age, religion/belief and sexual orientation. One year on, this paper sets out the progress on action plans and identifies new actions. The Trust's Equality and Diversity Group reviews progress on achievement of the Single equality scheme too.

The scheme has been publicised through staff emails and placed on the trust intranet and internet.

The main aims of our Single equality scheme are to:

- ensure that consideration of equalities issues are at the mainstream of thinking and day-to-day practice across the trust
- reduce health inequalities and improve health outcomes for patients
- meet the current legal requirements concerning race, disability, age and gender
- ensure that trust policies and practices do not discriminate
- challenge discrimination against people who work here or use our services
- ensure equal access to services and work to enhance and improve service user choice and control
- provide a coordinated approach to meeting the requirements of new legislation on: religion/belief and sexual orientation
- raise staff awareness and understanding of these issues.

To ensure work is undertaken to underpin equality in the hospital and to ensure the scheme does not simply gather dust on some shelf, action plans have been developed and incorporated into the scheme.

The action plans fall into three areas:

- Patient care services *(lead: Director of Operations)*
- Patient and public involvement and consultation
*(lead: Director Primary Care/
Director of Nursing & Clinical Development)*
- Employment *(lead: Director of Human Resources)*

Progress on these agreed action plans is attached.

Agreed Objectives	Planned Action	Timescale	Current Progress as at June 2009	Responsibility	Race	Gender	Disability	Age	Religion/ Belief	Sexual Orienta- tion
1. To introduce a mentoring scheme to encourage upward movement in the organisation	<ul style="list-style-type: none"> Linked in to next local BEL programme 	By March 2009	Mentoring run as part of next local BEL programme to commence early 2010	Director of HR	√	√	√	√	√	√
2. To evaluate current black & ethnic leadership (BEL) programme	<ul style="list-style-type: none"> Review participants comments Review current position in organisation compared to before undertook BEL Run further course subject to evaluation - completed 	By end of current course (Dec 2008)	Evaluation complete BEL to run for third year	Director of HR	√					
3. To improve on current links with local schools and colleges/community to encourage applicants from all sections of the community	<ul style="list-style-type: none"> Identify local community groups where e.g. talks on working in the NHS can be given 	Work to commence June 2008	<p>Continue to offer work experience placements</p> <p>Talks at local schools/colleges given</p> <p>Whittington involved in filming information film for local schools on the new Middlesex healthcare diploma - completed</p> <p>Whittington community event in December 2008 with HR recruitment stand completed</p> <p>Recruitment Open Days run June 2009 to coincide with students seeking nursing/midwifery posts</p>	Director of HR	√	√	√	√	√	√

Agreed Objectives	Planned Action	Timescale	Current Progress as at June 2009	Respon- sibility	Race	Gender	Disability	Age	Religion/ Belief	Sexual Orienta- tion
4. To monitor current staff in terms of religion/belief and sexual orientation	<ul style="list-style-type: none"> Publicity/information campaign to inform staff of why need to collect data Data collection exercise Benchmark data collected and then monitored through the equality and diversity group Examine monitoring data of recruits in terms of sexuality/ religion to see if there are any areas which may require action 	Revised timescale Sept 2009	Action postponed due to issue of missing discs and concerns that staff may have around security of information. Approach agreed with JCC April 2009 and EC May 2009. Preparatory work currently taking place to complete by Autumn 2009	Director of HR					√	√
5. To provide staff with information on different world religions and outline issues for these religions in terms of care received e.g. blood transfusion; death	<ul style="list-style-type: none"> Identification – through department of spiritual and pastoral care – of different religions/beliefs and the drawing up of awareness sessions for staff – open to all but with particular emphasis on those staff delivering direct patient care – with involvement of local community groups in the design/delivery of the awareness raising Revise information manual 	Work to commence Sept 2008	Training has been in place and is currently being updated and rolled out	Director of Nursing and Clinical Development					√	

Agreed Objectives	Planned Action	Timescale	Current Progress as at June 2009	Respon-sibility	Race	Gender	Disability	Age	Religion/ Belief	Sexual Orienta- tion
6. Continue to provide equal opportunities training for all – to ensure 6 strands are covered – to ensure issue of bullying and harassment are also included		Sept 2009	<p>Training currently provided for managers. Equal opportunities updates to be part of mandatory training programme for all staff from Sept 2009</p> <p>Hold staff focus groups linked to Staff Attitude Survey July 2009 and then review appropriate actions</p>	Director of HR	√	√	√	√	√	√
7. Revisit all employment policies to ensure all are fair and equitable in terms of religion/belief and sexuality (as was done for other strands at time)	<ul style="list-style-type: none"> Review all employment polices on timetabled basis to ensure fair and equitable 	<p>June 2008 and continuing</p> <p>In place</p>	<p>Policies are reviewed on an on-going process and have been amended as necessary.</p> <p>Many HR policies have recently been updated – equality issues taken into account when drafting/renewing, eg, Bullying & Harassment policy, Dress Code</p> <p>Equality Impact Assessments undertaken on all new and revised HR policies and then published</p>	Director of HR					√	√
8. To involve staff - through the JCC – in suggesting policy development in equality and diversity field	<ul style="list-style-type: none"> More partnership discussion on proposed new policies, involving trade unions at an earlier stage of development 	Ongoing	<p>New policies are taken through this forum already.</p> <p>Partnership working with staff representatives has been strengthened</p>	Director of HR	√	√	√	√	√	√

Agreed Objectives	Planned Action	Timescale	Current Progress as at June 2009	Respon-sibility	Race	Gender	Disability	Age	Religion/ Belief	Sexual Orienta- tion
9. To examine results from each annual staff attitude survey and identify areas of work to do to ensure all staff feel valued and respected	<ul style="list-style-type: none"> Ensure managers discuss results of survey at relevant departmental meetings and have local action plans in place to identify issues within their area 	At time of each survey	<p>Staff attitude survey 2008 results publicised throughout the organisation</p> <p>Action plan 2008 agreed by Trust Board April 2009. Progress reviewed by Trust Board July 2009. Staff focus groups to look at issues coming from survey but also linked to NHS constitution and current Whittington promises – focus groups to run summer 2009</p>	Director of HR and all managers	√	√	√	√	√	√
10. To ensure equality impact assessments take place in relation to revised and new policies	<ul style="list-style-type: none"> Continue to monitor through the Equality Impact Assessment Group Provide training on EIAs for more managers 	Ongoing	Number of impact assessments already published – need to ensure more are done. EIA group reviews work every 3 months	Director of HR	√	√	√	√	√	√
11. To introduce additional monitoring of training once ESR implemented	<ul style="list-style-type: none"> Ensure monitoring of training to identify if any groups may be suffering disadvantage 	Review Sept 2009	Partially in place – training monitoring information published on web. Continuing to put in place monitoring of all training	Director of HR	√	√	√	√	√	√
12. Identify processes by which equality updates/updated training can be implemented to ensure all – especially managers are up-to-date with equality issues	<ul style="list-style-type: none"> Identify best practice with other trusts Review videos etc around on market to see if appropriate Propose roll out 	September 2009	Equality and Diversity training introduced to Mandatory Training for all staff, commencing Sept 2009. Training programme for managers updated.	Director of HR	√	√	√	√	√	√

Agreed Objectives	Planned Action	Timescale	Current Progress as at June 2009	Responsibility	Race	Gender	Disability	Age	Religion/ Belief	Sexual Orienta- tion
13. To look at proposals outlined in the new Equality Bill and to take steps to ensure the hospital is prepared	<ul style="list-style-type: none"> • Identify areas of gaps the trust will need to fill to comply with future legislation • Draw up action plan/timetable 	December 2009	<p>Equality bill going through parliament. Awareness training provided to Board May 2009</p> <p>Actions to be planned once detail of Act confirmed</p>	Director of HR	√	√	√	√	√	√

Patient and Public Involvement and Consultation 2008-2011

Agreed Objectives	Planned Action	Timescale	Current Progress as at June 2009	Responsibility	Race	Gender	Disability	Age	Religion/ Belief	Sexual Orientation
1. Develop a strategy to ensure a more coordinated and systematic approach to regularly involving local groups in the SES	<ul style="list-style-type: none"> Use the public/staff group governors and the Foundation Trust membership. Set up Focus Groups with a programme of topics that will enable us to use their feedback to monitor satisfaction. Identify changes needed. 	Work to begin Sept 2008	Focus groups established from Whittington membership with good mix of population. Five meetings held so far	Director of Primary Care	√	√	√	√	√	√
2. Patient surveys to include questions which address equality issues.	<ul style="list-style-type: none"> Action plan to be written to cover national inpatient survey for 2007. (Full results awaited) Annual inpatient survey to be carried out in autumn 2008 will provide information on patient satisfaction about services. 	Sept 2008	<p>Action plan developed following 2007 survey results.</p> <p>2008 survey carried out in autumn – new plan being developed</p> <p>Since September 2008 paper based patient surveys have been conducted in ED, OPD, DTC and cohort one Productive Wards</p>	Director of Primary Care	√	√	√	√	√	√
3. Ensure spiritual care facilities meets the needs of patients and staff	<ul style="list-style-type: none"> Survey of staff, patients & visitors about facilities. Action plan to be in place in response to survey for agreement at spiritual and pastoral care committee May 09. Update to September equality and diversity group. 	May 2008	<p>Survey undertaken – Summer 2008</p> <p>Report produced</p> <p>Action plan developed including plans for a multi-faith room and chapel and provision of quiet space</p>	Director of Nursing & Clinical Development					√	

Agreed Objectives	Planned Action	Timescale	Current Progress as at June 2009	Responsibility	Race	Gender	Disability	Age	Religion/ Belief	Sexual Orientation
4. More information on the Trust's website about how to get involved, and more opportunities to do this via email.	<ul style="list-style-type: none"> Publish the Trust's email and website addresses more widely i.e. on appointment letters, in leaflets. Ensure website feedback is collected, collated and given to appropriate groups. Explore feasibility of patient & public feedback on website 	Sept 2008	<p>Patient Information Steering Group established</p> <p>Plans in place for patient information to be available electronically on intranet, extranet and website</p> <p>Nov 2008 – patients surveyed to find out how they like to provide feedback to – majority preferred electronic touch screen method – to be introduced 2009</p> <p>Published new Maternity Service Liaison Committee leaflets in conjunction with Islington PCT</p> <p>Increased user representation on above committee and Labour Ward Forum</p>	Director of Primary Care	√	√	√	√	√	√
5. Feed back to local people and patients the progress that has been made and issues to be tackled.	<ul style="list-style-type: none"> Feed back via the website, newsletters etc. Patient feedback re these issues to be built into future surveys. 	On-going	<p>Page on intranet set up to feedback to staff – to be further developed in 2009</p> <p>Plans in place to provide feedback via laminated posters displays for patients and public</p>	Director of Primary Care	√	√	√	√	√	√
6. Draft action plan based on issues coming from the consultations above		Once consultation is underway	Actions subsumed in overall patient focussed marketing strategy	Director of Primary Care	√	√	√	√	√	√

Agreed Objectives	Planned Action	Timescale	Current Progress as at June 2009	Responsibility	Race	Gender	Disability	Age	Religion/ Belief	Sexual Orientation
7. Continue with patient and public involvement work identified in other equality schemes – ensuring actions are carried out and those not completed are reviewed/ensure future actions are dealt with	<ul style="list-style-type: none"> Review actions outlined in gender; disability and race equality schemes – and carry forward those actions not yet completed 	On-going and linked to timescales in other schemes	Work continues	Director of Primary Care	√	√	√			

Patient Care Services

Agreed Objectives	Planned Action	Timescale	Current Progress as at June 2009	Responsibility	Race	Gender	Disability	Age	Religion/ Belief	Sexual Orientation
1. Identify complaints pertaining to discrimination in sexual orientation, race, religion and disability and address any trends	<p>Patient Relations to establish database</p> <p>Issues to be discussed at senior nurses and GM meetings quarterly</p> <p>Identify any staff education needs relating to discrimination</p> <p>Include breakdown in HMB and TB reports</p>	By Sept 2009 for database establishment and then ongoing	Trends unable to be captured at present. Implementation of DATIX during 2009 will enable this to happen	Director of Nursing and Clinical Development	√	√	√	√	√	√
2. Ensure that no patient is discriminated against in terms of respect of their privacy and dignity	<p>Monitor complaints via Patient Relations data base</p> <p>Regular monitoring of adherence to privacy and dignity policy by visible leadership</p> <p>Use data from patients survey to address any issues relating to privacy and dignity</p> <p>Monitor comments from NHS Choices</p>	Sept 2009	<p>Complaints have privacy and dignity category to enable monitoring – will further improve with introduction of Datix system</p> <p>Mixed sex breaches now recorded by site managers</p> <p>Trust Board’s monthly dashboard report includes mixed sex breaches with a zero target</p> <p>Visible Leadership Team carried out privacy and dignity audit using NHS Institute tool</p>	All Directors	√	√	√	√	√	√

Agreed Objectives	Planned Action	Timescale	Current Progress as at June 2009	Responsibility	Race	Gender	Disability	Age	Religion/ Belief	Sexual Orientation
3. Ensure that no patient is discriminated against in respect of their age.	<p>Increase availability of single sex wards.</p> <p>Relaunch steering group for care of older people.</p> <p>Action plan in place for 2008/09</p> <p>Review of plan to clinical governance committee</p>	<p>June 08 (achieved)</p> <p>Nov 09</p> <p>July 09</p>	<p>Single sex wards increased</p> <p>Work undertaken to ensure single sex accommodation provided in bays – updating programme for wards</p> <p>Older People's Inpatient Service Improvement Plan developed and good progress made</p>	DW					√	
4. Easily accessible information for staff pertaining to cultural differences, religion and disability	<p>Intranet guidance for staff to identify and manage the variance between different cultural groups. These groups should be identified from the national patient and staff surveys</p> <p>Local resource files to be available for staff, bank and substantive, relating to SES issues</p> <p>Local orientation to address discrimination issues</p> <p>SES information to be included in induction packs</p>	<p>Sept 2008 in place</p> <p>December 2008</p> <p>December 2008</p>	Limited information currently available	<p>Director of Nursing and Clinical Development</p> <p>All Directors</p> <p>Director of HR</p>	√		√		√	

Agreed Objectives	Planned Action	Timescale	Current Progress as at June 2009	Responsibility	Race	Gender	Disability	Age	Religion/ Belief	Sexual Orientation
5. Accessible information for patients	<p>Ensure there are core leaflets available in patient areas in common local languages, as determined from patient data</p> <p>Ensure hearing loops are available in clinical key areas (OPD)</p> <p>Make visible the interpreter services the Trust offer on a daily basis</p>	Sept 2008	<p>Some communication leaflets are available different languages, eg, new different language endoscopy patient information leaflets</p> <p>There are some areas with hearing loops.</p> <p>Partially compliant in main reception areas.</p> <p>Some Antenatal Clinic Classes are language specific, eg, Polish</p>	Director of Operations	√		√			
6. Proactive approach to patients feedback relating to SES	Ensure the issues discussed at patient focus groups relating to the SES subsections are fed back to the head of nursing and that appropriate actions are taken	August 08	Information relating to leads for focus groups needs to be made available	Director of Operations	√	√	√	√	√	√
7. Increase knowledge and understanding about the health and inequalities experienced by local people from all groups. Priorities to be influenced by the health needs of all groups. Evidence based strategies and plans to be used to reduce inequalities	To undertake research on health inequality issues coming from national and regional studies and to take steps to address these inequalities (e.g. <i>Born Equal</i> - The London Health Observatory Report) Link to national work undertaken by e.g. Men's Health Forum/Age Concern	On-going	<p>Issues of health inequalities for some different groups in place (e.g. thalassaemia)</p> <p>Social marketing and research projects in Maternity re early booking and obesity</p> <p>Social marketing to review retinal screening uptake</p>	Director of Operations	√	√	√	√	√	√

Agreed Objectives	Planned Action	Timescale	Current Progress as at June 2009	Responsibility	Race	Gender	Disability	Age	Religion/ Belief	Sexual Orientation
8. Review information received from consultation and draft further actions		Ongoing		All directors						
9. Continue with patient services work identified in other equality schemes ensuring action plans have been carried out and those not completed are reviewed/ ensure future actions are dealt with	<ul style="list-style-type: none"> Review actions outlined in gender; disability and race equality schemes – and carry forward those actions not yet completed 	Ongoing and linked to other scheme actions	Action plans in race; disability and gender schemes	As appropriate	√	√	√			
10. Ensure no patient is discriminated against in respect of their weight	<ul style="list-style-type: none"> Access to large size equipment – hoist, chairs, beds. Specialist nurse for bariatric services 		Work taking pace in obesity in maternity by Islington & Haringey PCT	Director of Operations			√			