### Executive Summary

The paper provides a status for Equality and Diversity. This includes WRES and EDS2, whilst progress is needed there is a clear understanding of actions required.

### Strategic Priorities

1. **Quality and Safety**
   - Reduce harm, deliver best clinical outcomes and improve patient experience.
   - Address the existing capacity shortfall and process issues to consistently deliver national healthcare standards.
   - Develop a clinical strategy that ensures the safety and short term sustainability of our clinical services pending the outcome of the Future Fit Programme.
   - To undertake a review of all current services at specialty level to inform future service and business decisions.
   - Develop a sustainable long term clinical services strategy for the Trust to deliver our vision of future healthcare services through our Future Fit Programme.

2. **People**
   - Through our People Strategy develop, support and engage with our workforce to make our organisation a great place to work.

3. **Innovation**
   - Support service transformation and increased productivity through technology and continuous improvement strategies.

4. **Community and Partnership**
   - Develop the principle of ‘agency’ in our community to support a prevention agenda and improve the health and well-being of the population.
   - Embed a customer focussed approach and improve relationships through our stakeholder engagement strategies.

5. **Financial Strength: Sustainable Future**
   - Develop a transition plan that ensures financial sustainability and addresses liquidity issues pending the outcome of the Future Fit Programme.

### Board Assurance Framework (BAF) Risks

- If we do not deliver safe care then patients may suffer avoidable harm and poor clinical outcomes and experience.
- If we do not work with our partners to reduce the number of patients on the Delayed Transfer of Care (DTOC) lists, and streamline our internal processes we will not improve our ‘simple’ discharges.
- Risk to sustainability of clinical services due to potential shortages of key clinical staff.
- If we do not achieve safe and efficient patient flow and improve our processes and capacity and demand planning then we will fail the national quality and performance standards.
- If we do not get good levels of staff engagement to get a culture of continuous improvement then staff morale and patient outcomes may not improve.
- If we do not have a clear clinical service vision then we may not deliver the best services to patients.
- If we are unable to resolve our (historic) shortfall in liquidity and the structural imbalance in the Trust's Income & Expenditure position then we will not be able to fulfil our financial duties and address the modernisation of our ageing estate and equipment.
<table>
<thead>
<tr>
<th>Care Quality Commission (CQC) Domains</th>
<th>Safe</th>
<th>Effective</th>
<th>Caring</th>
<th>Responsive</th>
<th>Well led</th>
</tr>
</thead>
</table>

**Recommendation -** the Trust Board are asked to RECEIVE and APPROVE the Equality and Diversity Update.
Equality and Diversity: STATUS REPORT 2015/16

1.0 Introduction

1.1 Equality and Diversity are fundamental to the Trust’s strategy, operations and performance and is intrinsic to the Trust’s values.

1.2 This report is intended to inform the Trust Board of progress in relation to Equality and Diversity. The report will also report current performance against the Workforce Race Equality System (WRES) and the Equality Delivery System 2 (EDS2).

An assessment of the Equality and Diversity agenda has concluded that the Trust is not in the position it should be. To support the development of this agenda the Head of Education will now lead the agenda with the support of the Associate Director for Patient Experience with regard to patients and their care.

It is critical that our Equality Objectives are developed to be aligned with, and integrated in, the Trust’s day-to-day practice and service delivery. Plans are now in place to ensure that the Trust’s position in this area continues to progress.

2.0 Review of 2015-16

2.1 Strategic Objectives

2.1.1 The provision of a service which meets the diverse needs of our population is implicit in the Trust’s strategic objectives, particularly in ensuring equality of access to services and in the Trust’s vision of providing the Safest and Kindest Care in the NHS.

2.1.2 It has become clear, however, that more explicit Equality Objectives are required and that robust monitoring and governance is required at a strategic level in the Trust and these will be key priorities for 2016/17. This will include a nominated Non-Executive Director with oversight of Equality and Diversity as well as robust reporting arrangements into appropriate Board level Committees: namely Quality and Safety and Workforce Committee.

2.2 Delivery of Trust Equality Objectives 2015/16

2.2.1 A number of objectives for Equality and Diversity in 2015/16 were identified in the Annual Report of 2014/15 and progress against these is outlined below.
<table>
<thead>
<tr>
<th>Objective</th>
<th>Progress</th>
<th>Status</th>
</tr>
</thead>
<tbody>
<tr>
<td>Work with the Local Health Economy Patient Experience Leads Group to develop Actions to support the LHSE meeting its EDS2 and Public Sector Equality Duty (PSED) goals</td>
<td>Contributions from the Trust; however specific actions for the Trust are yet to be fully implemented.</td>
<td>Action under review to progress SaTH goals.</td>
</tr>
<tr>
<td>SaTH EDS Task and Finish Group to review objectives and goals against revised EDS2 to be completed by April 2016</td>
<td>This group has not not been established and actions not yet developed.</td>
<td>Group to be established to support achievement of EDS2 completion by December 2016.</td>
</tr>
<tr>
<td>Gain feedback though different methods particularly listening events hosted by Healthwatch Shropshire and Telford and Wrekin</td>
<td>Listening events have been held and feedback gained from service users and stakeholders including Magic Wand event.</td>
<td>Feedback achieved, which will now inform future work.</td>
</tr>
<tr>
<td>Facilitate stakeholder events to assist in the development of EDS2 objectives for 2016/17</td>
<td>Not progressed</td>
<td>Action to be progressed by December 2016.</td>
</tr>
<tr>
<td>Membership of the local Carers Partnership Board</td>
<td>Active membership and participation achieved</td>
<td>Objective achieved</td>
</tr>
<tr>
<td>Membership of the LHSE Dementia Implementation Group</td>
<td>Active membership and participation achieved</td>
<td>Objective achieved</td>
</tr>
<tr>
<td>Explore opportunities with FRESH and the Shropshire Equalities Forum to design actions in support of the Trust meeting its ESD2 objectives for 2015/16</td>
<td>Not fully progressed</td>
<td>Action to be progressed by March 2017.</td>
</tr>
<tr>
<td>Implement the EDS2 reporting format in 2015/16</td>
<td>Not progressed</td>
<td>Action to be progressed by January 2017.</td>
</tr>
</tbody>
</table>

2.23 Although they were not explicitly identified in last year’s report, Workforce equality objectives were developed and delivered which included:

- The extension of values based recruitment and selection to the majority of Trust recruitment.
- The implementation of values based appraisal for all staff employed under Agenda for Change terms and conditions of employment, which explicitly considers staff performance around ‘We Value Respect’.
- The delivery of values based conversation training to staff which enables respectful and powerful conversations around performance, including issues around bullying, harassment and protected characteristics.
- Staff completion of Equality and Diversity training has risen from 51% in April 2015 to 74% as at 01/11/2016. Further action will be taken during 2016/17 to ensure the 80% minimum target is reached.
- Improvement in Equality and Diversity staff survey questions.
2.24 Other specific Equality outcomes which impact positively on the experience of people with protected characteristics include:

- Extension of Dementia service including additional nursing and support worker staffing
- Extension of End of Life care service including outreach service and educational conference and improvements to facilities and staff competencies
- Work with Shropshire Community Health Trust particularly with events to gain feedback from harder to reach members of the community and LGBTQ community
- Development of Transgender video featuring service users to help raise awareness of patient experience
- Review of the Learning Disability care pathway with CCG with the aim of preventing unnecessary hospital admissions
- Redesign of Learning Disability competencies
- Participation in the WMQRS peer review process for Learning Disability developing formative quality standards
- Implementation of the recommendations from the MAZAR learning disabilities review
- Trial of the Abbey Pain Score for patients with communication difficulties
- New delirium and dementia care plans
- Distribution of the Faith Handbook to assist staff in meeting service user needs
- Listening events held throughout the county in 2016 with the aim of reaching rural communities
- Support events held for newly diagnosed patients with cancer established support by Macmillan
- Incorporation of Making Every Contact Count training into Induction for all new staff
- Support for 700 Dignity Champions
- Identification of volunteer roles in End of Life Care and Dementia support

3.0 Current Performance against WRES and EDS2

3.1 WRES

3.11 The Trust completed its Workforce Race Equality System analysis and assessment as required and met its targets to submit and publish it. Whilst most areas of analysis revealed results that did not indicate the potential disadvantage to black and minority ethnic (BME) staff, 2 areas were identified as needing further attention.

These were:
- The number of BME staff that had been subject to abuse or discrimination from service users as compared with white colleagues, and
- The number of BME staff that had been subject to the instigation of disciplinary investigations as compared with white colleagues.

Specialist advice has been taken from the Equality and Diversity Team at NHS Employers and actions on these indicators will be incorporated into the Trust’s EDS2 action plans for 2016/17 and 2017/18.
3.2 **EDS2**

3.21 The Trust has not achieved its target to implement EDS2 and complete the initial proforma assessment by April 2016, this will now be rectified through an action plan which will be monitored through the Workforce Committee. The EDS2 is, as the original EDS, based on four objectives, supported by 18 outcomes. The main changes being: the removal of the leadership framework, and the inclusion of Equality Impact Assessment evidence. Based on the grading of each Outcome, the Trust is given an overall rating for each Objective and phases will be established.

3.3 **Methodology for EDS2**

3.31 The identified Director leads will ensure the completion and review of the EDS2 grading for each Objective. This includes reviewing the detailed criteria that sit behind each of the 18 outcomes against Trust evidence, including data, feedback, surveys (patient and staff), policies etc. The Trust will also use feedback from, and consultation with, groups including patients and stakeholders to inform the grading exercise.

<table>
<thead>
<tr>
<th>EDS 2 Objective</th>
<th>Lead Director</th>
</tr>
</thead>
<tbody>
<tr>
<td>1 Better health outcomes for all</td>
<td>Director of Quality and Safety and Medical Director</td>
</tr>
<tr>
<td>2 Improved patient access and experience</td>
<td>Director of Quality and Safety</td>
</tr>
<tr>
<td>3 Empowered, engaged and well-supported staff</td>
<td>Workforce Director</td>
</tr>
<tr>
<td>4 Inclusive leadership at all levels</td>
<td>Workforce Director</td>
</tr>
</tbody>
</table>

3.32 A report, confirming the scoring of individual criteria and supporting evidence will be submitted to the Workforce Committee.

3.33 In grading the above Objectives, we will seek to identify positive practice, supported by evidence, as well as areas for improvement.

4.0 **Trust Equality Objectives/Actions for 2016/17**

4.1 Whilst a full action plan will be developed as a result of the completion of the EDS2, the following objectives have been identified to date.

<table>
<thead>
<tr>
<th>Objective</th>
<th>Lead Director</th>
<th>By When</th>
</tr>
</thead>
<tbody>
<tr>
<td>Secure appointment of Executive Director (NED) Equality and Diversity lead</td>
<td>Workforce Director</td>
<td>End Dec 2016</td>
</tr>
<tr>
<td>Complete EDS2 assessment</td>
<td>Workforce Director</td>
<td>End December 2017, with potential developments through until April 2017.</td>
</tr>
<tr>
<td>Objective</td>
<td>Lead Director</td>
<td>By When</td>
</tr>
<tr>
<td>---------------------------------------------------------------------------</td>
<td>------------------------------------</td>
<td>-----------------------</td>
</tr>
<tr>
<td>Identify and agree Trust Equality Objectives arising from completed EDS2 in the 4 Objective areas</td>
<td>Workforce Director</td>
<td>Final draft by April 2017</td>
</tr>
<tr>
<td>Continue to seek and respond to service user and stakeholder feedback</td>
<td>Director of Quality and Safety</td>
<td>Ongoing</td>
</tr>
<tr>
<td>Facilitate stakeholder events to assist in the development of EDS2 objectives for 2016/17 and 2017/18</td>
<td>Director of Quality and Safety</td>
<td>End January 2017</td>
</tr>
<tr>
<td>Membership of the local Carers Partnership Board</td>
<td>Director of Quality and Safety</td>
<td>Ongoing</td>
</tr>
<tr>
<td>Membership of the LHSE Dementia Implementation Group</td>
<td>Director of Quality and Safety</td>
<td>Ongoing</td>
</tr>
<tr>
<td>Review opportunities with FRESH and the Shropshire Equalities Forum to design actions in support of the Trust meeting its ESD2 objectives for 2016/17 and 2017/18</td>
<td>Director of Quality and Safety</td>
<td>End April 2017</td>
</tr>
<tr>
<td>Achieve 80% minimum Equality and Diversity training target</td>
<td>Workforce Director</td>
<td>End March 2017</td>
</tr>
<tr>
<td>Implement the EDS2 reporting format in 2016/17 Annual Report</td>
<td>Workforce Director</td>
<td>End Sept 2017</td>
</tr>
</tbody>
</table>

5. **Conclusion**

The Board are asked to note the position and approve the required actions to ensure progress.