

## Worcestershire Acute Hospitals NHS Trust

### Annual Equality and Diversity Report

Financial Year 2018-2019



Autumn 2019

## Contents

Section	Item	Page
1	Putting Patients First: Welcome	4
2	Report Introduction	5
3	Equalities Duty Compliance	6
A Review of the last 12 months		
4	<b>Workforce – our staff experience</b> <ul style="list-style-type: none"> <li>Supporting Staff, Supporting patients: Highlights of the last 12 months</li> <li>Working together – support from the local community</li> <li>Led by Our Staff: Some of our stories: <ul style="list-style-type: none"> <li>Freedom to Speak Up</li> <li>Trust LGBT+ Champions</li> </ul> </li> <li>Learning and Development</li> <li>Chaplaincy Update</li> </ul>	8 9 10 12 12
5	<b>Our Trust: Facts and Figures</b> Data is broken down based on the 9 protected characteristics, where this data is available and appropriate to share: <ul style="list-style-type: none"> <li>Staff data</li> <li>Staff Survey information</li> <li>Starter and Leavers</li> <li>Promotions</li> <li>Recruitment Data</li> <li>Access to CPD</li> <li>Employee Relations</li> </ul>	14 16 20 21 23 25 26
6	Putting Patients First: Patients, Service Users, Volunteers and Visitors	27

	<ul style="list-style-type: none"> <li>Supporting Patients with Learning Disabilities/Oliver's story</li> <li>Supporting for Patients Living with Frailty and Dementia</li> <li>Deaf Awareness/Translation Services</li> <li>Work in Progress and Underway</li> <li>Some Key Activities for awareness and engagement</li> <li>Complaints Data</li> </ul>	27  28  30 33 34  35
Our plan for the coming 12 months		
7	<ul style="list-style-type: none"> <li>Our Strategy</li> <li>Our 4Ward <i>We Do This By</i></li> <li>Our strategic objectives</li> </ul>	38 39 40
8	Moving 4ward on our journey of improvement	42
9	Links and Further Information	43

## **1: Putting Patients First: Welcome**

Welcome to this year's Equality, Diversity and Inclusion Review.

There is no greater job satisfaction than knowing we have done the very best we can do for our patients, service users and their families and friends, and we strive to make their experience the best it can be. In doing this, we also recognise that our staff must feel supported and included, so that they are enabled to be the very best they can be.



In this report we look back at some of our key development and successes for staff and for patients. We look forward, sharing our new strategy which keeps our focus on Putting Patients First. This will influence the work we do on equality, diversity and inclusion for both our patients, our visitors and for our staff. As part of this, we are working more closely with the people who access our services. We are widening the opportunity for all members of the public to participate, and to help us understand what good healthcare and healthcare services need to be like. Equality and inclusion are essential to the heart of this.

Finally, we share some of our data that we are using to help us understand what it is like to be in our Trust, as either a patient, a visitor or a colleague.

I look forward to sharing our continued journey with you in 12 months' time and am delighted to be supporting our staff in helping make sure we Put Patients First in all that we do.

**Sir David Nicholson KCB, CBE.**

**Trust Chairman**

## **2 - Report Introduction:**

The culture of our workplace matters.

It matters to our patients, our visitors and our staff.

A workplace that enables you to be who you are, without fear of prejudice, matters.

This report shares our journey of creating an improved culture, with a focus on equality, diversity and inclusion. We will continue on this journey, using the feedback from staff, patients and visitors to help us be the best we can be.

Within the report we share some of our key achievements and lessons learned. We are proud of what we have achieved and of how we have worked with patients and partners to make a difference. We have some active diversity groups within and across the Trust who are helping us to understand how we can continually improve.

The report notes some key data from workforce. Our Trust does not necessarily represent the local area in which we provide services, for example the majority of our staff are female, but in our locality this is not the case.

Our data is the starting point for some challenging conversations, and will influence the journey we continue to undertake over the coming 12 months. We are reviewing our recruitment processes, and will be changing the model used from September 2019, moving to centralised recruitment. We will continue to find ways to engage more widely with not only our staff but also our patients and the public, and will continue to build on the forums we already have.

We will be using the action plans from the various nationally required reports, and from our own in-house work, to improve what we do, continuously.

### **3 - Equalities Duty Compliance**

Worcestershire Acute Hospitals NHS Trust strives to always be fully compliant with all duties under the Equality Act.

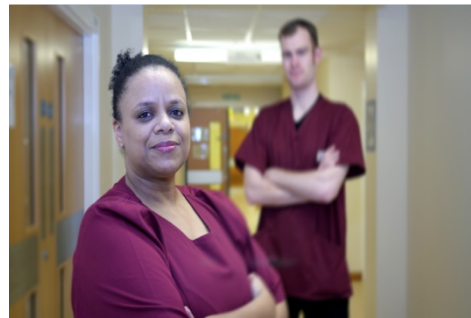
- Our Workforce Race Equality Standard (WRES) was published in line with requirements and will be refreshed as required
- Our Equality Delivery System (EDS2) self-assessment was completed in July 2015, refreshed in 2017, and is currently being updated (Summer/Autumn 2019). It will be and published in line with requirements
- Our Gender Pay report was published in March 2019 in line with requirements
- We have submitted our initial data for the new Workforce Disability Equality Standard (WDES).
- The Trust has all appropriate policies and procedures to support equality and inclusion.

Action Plans from each of the above reports are brought to our Equality and Diversity Committee for review and progress reporting on a bi-annual basis.



## The Last 12 months: Our key achievements

### *Work Together, Celebrate Together* Staff Experience



## 4 - Workforce: Our Staff Experience

### Supporting Staff, Supporting Patients: Highlights of the last 12 months

<b>Sign Language Courses</b> 4 X 10 week Level 1 British Sign Language courses have been offered to staff across the Trust, aimed at giving staff confidence in supporting hearing-impaired and deaf patients and visitors. We have also been teaching staff to sign Christmas Carols. Over 140 staff have been involved.	<b>Menopause café</b> Launched following conversations with staff about where they could go for advice or just a chat about how challenging menopause symptoms can be! This social space is growing, with more ideas being developed about how we can support staff at this time.	<b>Equality Week</b> For the 3 <sup>rd</sup> year running we celebrated equality and diversity week in May. Working with partner organisations and local charities we had a great week chatting with staff and visitors, and raising awareness of E&D issues.
<b>Dementia Training and Education</b> Our staff continue to develop their knowledge and skill around dementia-friendly care, by working with specialists, attending training and supporting dementia charities through their own amazing fundraising efforts!	<b>Learning Disability (LD) Awareness Training</b> Supported by the LD team, training has been offered to staff to help them give patients with LD a better experience of hospital care.	<b>E&amp;D Committee: Staff members</b> 8 members of staff answered our call for volunteers to join the Equality and Diversity Committee. Their involvement in committee decisions, events and policy review has been fantastic, and we're grateful for their support and insight.
<b>LGBT+ champions</b> A staff-led initiative, we're delighted to have a 30+ strong group of Allies who champion LGBT+ rights. They offer a listening service and act as allies and advocates. This year we are supporting Worcestershire Pride, thanks to their dedication and work.	<b>F2SU Champions and Guardian</b> A group of volunteer Champions lead by our Guardian offer a listening service to staff. Find out more further on in this report	<b>Coaching and Mentoring</b> The Trust is developing it's coaching and mentoring service, and already we are seeing value from this supportive development method in helping staff understand themselves and others
<b>Appraisal and Mandatory Training</b> We're seeing our figures improve all the time, and we continue to support managers and staff to meet 95% compliance.	<b>Leadership Courses</b> 2019 saw the launch of our Leadership and Management Development strategy, with a number of offers supporting managers at all levels. Within these we seek to raise self-awareness, and understanding of what it means to be a great people-manager. We expect this to have a positive impact on equality and diversity.	<b>Wellbeing and OH support</b> Our Occupational Health Service continues to be an integral part of how we look after our staff: looking after those who look after our patients. Wellness is also clearly linked to great equality experiences.



We want our Trust to be not only a great place to work, but also a place where our staff would want their relatives to be cared for too. Equality and Diversity is an important part of developing and transforming our culture, and links to other work within our Trust, notably our culture change programme and Health and Wellbeing initiatives, which all seek to make our Trust a great place to work.

We are proud to showcase some of what we have achieved over the past 12 months, whilst also acknowledging we are on a continuous journey of improvement. We are open to learning, and will take the time needed to ensure all our staff feel that they can truly be themselves at work, without fear and without judgement.

This report highlights some of the key achievements. Details of how to find out more can be found on 'Links and Further information', on the final page.

### **Working Together: Support from the local community**

During 2018-19, we are proud to have worked a number of organisations as part of our Equality and Diversity work. This has happened through their support during events we have run (such as Equality and Diversity week in May 2019), and by being a part of groups such as the Worcestershire Equalities Group.

**Deaf Direct, Health and Care Trust**  
**Out2gether, Mermaids, Speak Easy Now,**  
**Trade Union Partners, West Mercia Police,**  
**Worcestershire Association of Carers**  
**Worcestershire County Council**  
**Worcestershire Pride**

We are incredibly grateful to the time and energy these organisations give us. THANK YOU.

## Led by Our Staff: Some of our stories

Finding ways to engage with staff, both formally and informally, has been an important part of the Trust's work and has continued over the last 12 months. Formally, we have several routes which we encourage staff to use. This is particularly important for when we are not getting it right, and staff need our assurance that there are people who will listen and guide.



A great example is our Freedom to Speak Up Champions and Guardian. This message is from our Guardian, Bryan McGinty.

### Freedom to Speak Up Guardian

The Freedom to Speak up movement exists because between 2005 and 2009 many hundreds of patients died needlessly in great discomfort as a result of substandard care and staff failings at the two Mid Staffs Hospitals. Staff who raised concerns were either ignored or unsupported

by their management. The subsequent inquiry led by Sir Robert Francis determined that each and every Trust in England should have a **Freedom to Speak Up Guardian** who staff could speak too in confidence and without risk of detriment. This Guardian would not be a part of the formal organisation of each Trust but should be part of the National Freedom to speak up network.

In 2017 I was appointed by our Trust as Freedom to Speak up Guardian. My role is supported by some 30 Freedom to Speak Up champions spread across our three sites, and all the Divisions, and we promote the Freedom to Speak Up programme and to listen attentively to any member of staff who has any concern about any form of inappropriate behaviour within our Trust. The largest number of concerns raised cover all the various forms of bullying and harassment and the second major group are where managers or staff do not follow the designated Trust procedures, policies or processes.

The key benefits for staff are principally two fold. The first is the therapeutic support service of the Guardian or Champion, who as an independent person, is pro-actively listening and supporting the staff member's concern. Staff can find the raising of the concern a great trauma and to have someone who is obviously sharing and understanding their concern is a major help. The second benefit is that Guardian will agree with the member of staff a process to support resolution of the concern. This may entail obtaining support and assistance from relevant senior managers. The obvious result here is to seek to resolve the issue and enable the staff member to return to a more stable and enjoyable work environment.

We have had over 150 cases raised in the last two years and we endeavour to continually update each member of staff raising the concern on the progress on the resolution of their concern. Some cases can be resolved quite quickly, others, particularly if there is a link into an existing investigation, can take time."

This piece was written for the report by Mr McGinty in at the end of July 2019. We are sad to note that Mr McGinty passed away in October 2019. His compassion and dedication as our Freedom to Speak Up Guardian will be missed

This year, we have added some new ways for staff to work with us, as well as continued to support existing forums. We held our 3<sup>rd</sup> Annual Equality and Diversity Week, holding events at Kidderminster Treatment Centre, The Alexandra Hospital in Redditch and at Worcester Royal.

In February 2019 we celebrated LGBT+ History Month. With our partner organisations, we were able to talk with staff, patients and visitors, and find out how we can ensure a better experience for staff and for patients. This coincided with the launch of our LGBT+ Champion Network.



### Our Story: Trust LGBT+ Champions

We are staff members who have volunteered as LGBT+ Champions

We act as a peer-to-peer support network for staff. The group hold informal, open meetings for anyone who is interested to come along. Anyone can be as involved as they like, from just coming along to listen and learn, to acting as an advocate for LGBT+ issues and supporting staff and managers across the Trust.

All LGBT+ Champions play a key role in the Trust's Equality and Diversity work, helping provide input on Trust policy and other important issues. Champions will help us all to learn from the experiences of staff to allow us to lead the way in inclusivity for all.

Together , we aim to:

- Listen to the feedback our staff have given us, learn the issues that need to be addressed and lead the way 4ward in inclusion across the Trust.
- Work together across the wider healthcare services in Worcestershire to ensure equity of service and to celebrate all our differences
- Do what we say we will do and provide an open, safe space for anyone to ask questions and expand their learning without reproach, and to support our staff when support is needed

**Since February 2019**, we have supported and showcased LGBT+ History week, with stalls run across all three sites. These were supported by our own Champions and local charities and organisations who support LGBT+ work. We have interacted with staff and patients to highlight LGBT+ issues across the Trust and Worcestershire too. We have had many positive and informative chats across all 3 of our sites.

A discussion session was held with HR and the Equality & Diversity Committee with local non-profit organisations Out2Gether, Mermaids and Worcestershire Pride sharing some of their stories and insights to help improve our understanding of the LGBT+ issues affecting staff and patients. This was extremely impactful on the staff who attended.

We have also held LGBT+ Champion Cafes during the year and plan to have more open sessions over the coming year. These sessions are open to all to attend and are an opportunity for staff members to tell us what they would like for the LGBT+ Champions, and what they think should be our next steps.

New for the Trust in 2019 has been our **Equality and Diversity Open forum Cafés**. These regular events are held across all 3 sites and offer staff a chance to 'drop in' and chat about Equality & Diversity issues. Some of our cafés have had focused topics: we welcomed Worcestershire Association of Carers to our Café event to help us understand issues 'in-work carers' face and had focused sessions on ethnicity and gender. Other cafés have been open to all conversations around Equality and Diversity.

## **Learning and Development**

Our Trust requires **all staff** to complete Statutory and Mandatory training, and this year we are making the focus of getting 90% compliance one of our top priorities (this figure allows for staff who may be away from work for a number of different reasons).

Alongside this requirement for all our staff to undertake and complete Statutory and Mandatory Training, we also support our staff to continue their professional development (CPD). Details about participation in all CPD can be found later in the report.

Education which supports equality and diversity in particular, we offer staff training session about topics such as learning difficulties, dementia, and unconscious bias: supporting better experiences for our patients and visitors. Through our leadership development strategy, our plan for the coming 12 months is to create specific workshops for leaders and managers to help them understand and manage their role in equality, diversity and inclusion.

Our Trust actively seeks to open up careers and opportunities to younger people, and in the last 12 months have offered 40 apprenticeships to people aged 21 and under, in areas such as Finance, Library Services, Workforce and Quality Governance. This work takes place alongside an active Work Experience programme, showcasing the range of careers young people can access within Healthcare. In the last year we were able to offer 206 placements.

## **Chaplaincy Update**

Our Chaplaincy team has a presence at all three main sites, and provides support not only to patients and visitors, but also our staff. Highlights from the last 12 months within the chaplaincy team are this year provided by Trust Chaplain David Ryan, who is based at our Alexandra Hospital site.

### **Our Service provision – all sites**

- Multi-faith prayer rooms in each hospital for peace and quiet, always open.
- During the week there are services of Christian worship and Muslim prayers.
- Chaplaincy provides a 24 hour on-call service for urgent situations.
- Chaplains and volunteers visit patients across wards daily.
- Training sessions for staff and volunteers on spiritual care in palliative care and at the end of life.

- Singing groups, music and reading resources provided for patients, especially those suffering from dementia

#### Events we have supported or organised

- Support of Equality and Diversity week – Chaplaincy stands and also Worcestershire Inter Faith Forum stand.
- Organising BSL sign language courses for staff at all 3 sites.
- Sharing in Mitzvah Day with local Jewish community at the Alexandra Hospital. Mitzvah means good deed, and is a multi-faith event organised by the national Jewish community.

#### A focus on... "Art in a hurting place"

Artwork produced by students from St Augustine's RC High School in Redditch is now on display in the Alex thanks to a partnership between Chaplaincy and the School.

The art is now being displayed on 3 display boards on the main corridors (downstairs and upstairs) for patients, visitors and staff to enjoy. The thinking behind it is that the innocence of a child's drawing can be uplifting and put a smile on the face of someone, patients, visitors or staff. The initiative can also help teach students about the emotions of art, connecting with people where sometimes words cannot reach.

Mark Herauville, one of the Chaplaincy team said "The art in a hurting place initiative is intended to help people be encouraged and inspired, often at the most difficult times. We are extremely grateful to the students of St Augustine's for giving these beautiful pictures for display."

The Chaplaincy team at the Alex look forward to working further with St Augustine's and with other schools, so that more artwork can be displayed in other areas, for the benefit of the whole hospital community.





## 5 - Our Trust: Facts and Figures

As at 31 March 2019, the Trust employed **6,207** people [total staff headcount].

The profile of our staff, across the protected characteristics, is shown in the charts below, noting that we have no data on Gender Reassignment.

Our data is mainly representative of our local area, according to data from National Online Manpower Information System (NOMIS) provided through the Office for National Statistics website.

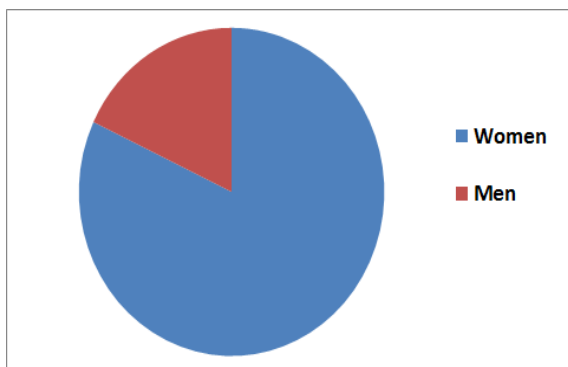
Significant difference is found within the gender profile, with the local population being almost equal between men and women, and the ethnic profile of the County being 95% white whereas the Trust has a greater diversity of ethnicity.

Our staff have the right to leave equality and diversity data categories on their electronic staff record unspecified if they wish to.

This data will support conversations within, amongst others, the Equality and Diversity Committee and People and Culture Committee, and help us to further investigate and address any areas of concern as well as celebrate areas of success for inclusion and diversity.

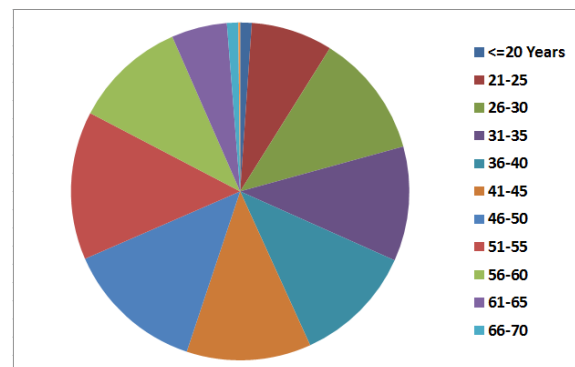
### Gender Profile

Our workforce is predominately female, and 45% of the workforce work part time.



### Age Profile

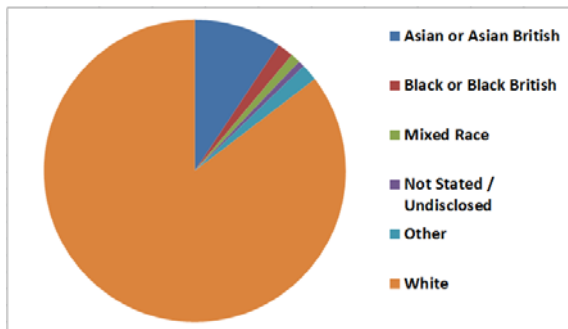
Our workforce ranges from late teens to over 70





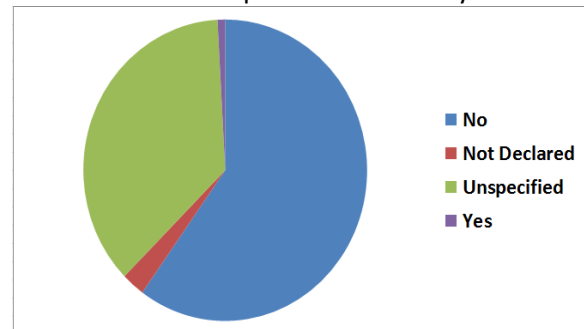
### Ethnicity Profile

The majority of our workforce are white, with white British making up the highest percentage of staff.



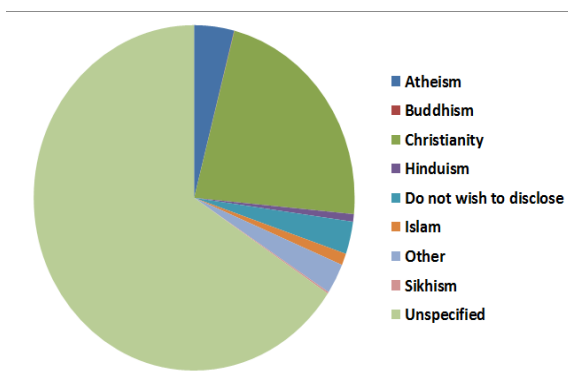
### Disability Profile

Whilst the majority of our staff have declared they do not have a disability, a significant number of our staff have not specified either way.



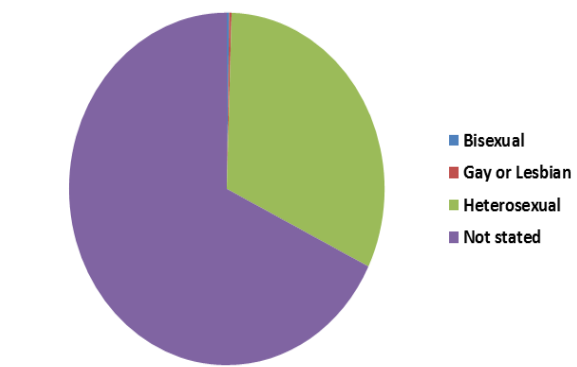
### Religious/Belief Profile

The majority of our staff have not specified their religion/belief, however the highest stated religion is Christianity. The Trust provides prayer facilities which are suitable for all religions.

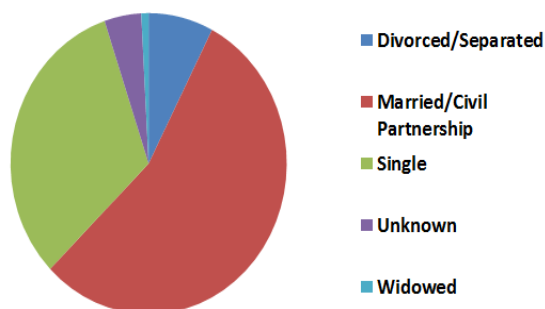


### Sexual Orientation

The majority of our staff have chosen not to state their sexual orientation



### Marital Status



### Staff on Adoption/Maternity Leave



## Staff Survey Information:

Data from our most recent Annual Staff Survey (2018) is able to help us understand the experience our staff have in working here. Below are key areas of focus for the Trust, and through our Equality and Diversity Committee we will engage with colleagues across the organisation to explore how we can improve all staff experiences.

### **Discrimination**

Discrimination: "in the last 12 months, have you personally experienced discrimination at work..."		
	By Patients, Service users, relatives	By Manager, line manager or colleagues
<b>Total responses</b>	<b>126 (6%)</b>	<b>155 (8%)</b>
Black (all)	37%	39%
Asian (all)	34%	17%
White (all)	23%	16%
Other	13%	20%

Discrimination: "in the last 12 months, have you personally experienced discrimination at work..."		
	By Patients, Service users, relatives	By Manager, line manager or colleagues
<b>Total responses</b>	<b>126 (6%)</b>	<b>155 (8%)</b>
Female	6%	8%
Male	9%	9%

Discrimination: "in the last 12 months, have you personally experienced discrimination at work..."		
	By Patients, Service users, relatives	By Manager, line manager or colleagues
<b>Total responses</b>	<b>126 (6%)</b>	<b>155 (8%)</b>
No Physical/Mental Health	6%	7%

Disability		
Physical/Mental Health Disability	6%	12%

### Recommending Our Trust: Place to Work

Staff Recommending our Trust as a place to work		
	Strongly agree or agree	Strongly disagree or disagree
<b>Total responses</b>	<b>51% of total responses</b>	<b>19% of total responses</b>
Black (all)	58%	16%
Asian (all)	71%	10%
White (all)	47%	24%
Other	71%	21%

Staff Recommending our Trust as a place to work		
	Strongly agree or agree	Strongly disagree or disagree
<b>Total responses</b>	<b>51% of total responses</b>	<b>19% of total responses</b>
Female	52%	18%
Male	48%	24%

Staff Recommending our Trust as a place to work		
	Strongly agree or agree	Strongly disagree or disagree
<b>Total responses</b>	<b>51% of total responses</b>	<b>19% of total responses</b>
No Physical/Mental Health Disability	53%	18%
Physical/Mental Health Disability	40%	26%

### Recommending Our Trust: Place to Receive Treatment

Staff Recommending our Trust as a place to receive treatment		
	Strongly agree or agree	Strongly disagree or disagree
<b>Total responses</b>	<b>58% of total responses</b>	<b>15% of total responses</b>
Black (all)	74%	11%
Asian (all)	83%	10%
White (all)	53%	18%
Other	79%	7%

Staff Recommending our Trust as a place to receive treatment		
	Strongly agree or agree	Strongly disagree or disagree
<b>Total responses</b>	<b>58% of total responses</b>	<b>15% of total responses</b>
Female	59%	14%
Male	53%	21%

Staff Recommending our Trust as a place to receive treatment		
	Strongly agree or agree	Strongly disagree or disagree
<b>Total responses</b>	<b>58% of total responses</b>	<b>15% of total responses</b>
No Physical/Mental Health Disability	59%	15%
Physical/Mental Health Disability	50%	18%

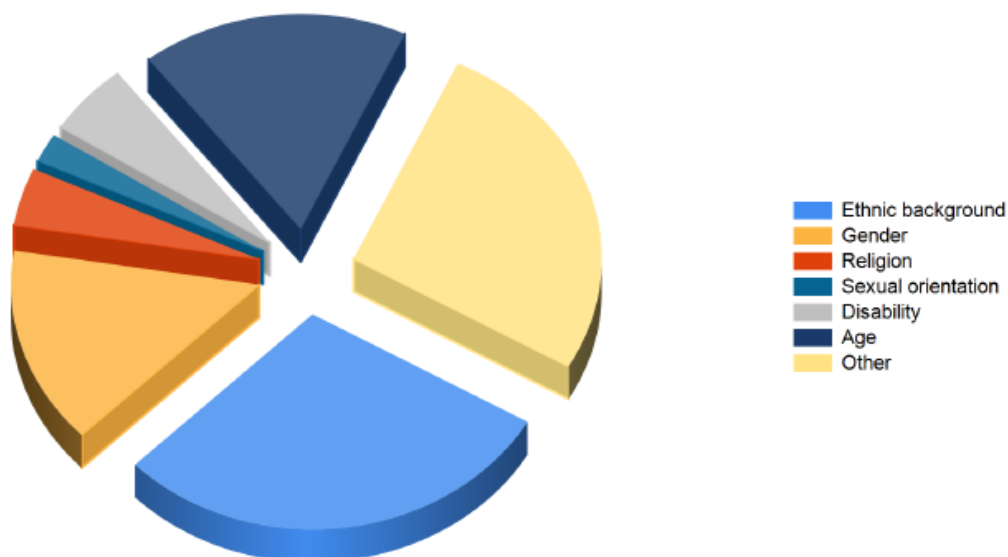
### Progression and Promotion

Staff who believe the Trust act fairly as regards career progression/promotion etc.		
	Yes	No
<b>Total responses</b>	<b>87% of total responses</b>	<b>13% of total responses</b>
Black (all)	40%	60%
Asian (all)	79%	21%
White (all)	86%	14%
Other	100%	0%

Staff who believe the Trust act fairly as regards career progression/promotion etc.		
	Yes	No
<b>Total responses</b>	<b>87% of total responses</b>	<b>13% of total responses</b>
Female	87%	13%
Male	86%	14%

Staff who believe the Trust act fairly as regards career progression/promotion etc.		
	Yes	No
<b>Total responses</b>	<b>87% of total responses</b>	<b>13% of total responses</b>
No Physical/Mental Health Disability	88%	80%
Physical/Mental Health Disability	12%	20%

On which grounds have you experienced discrimination?



Response	National		My Org.	
Ethnic background	3547	40%	81	35%
Missing	5290		148	
Gender	1534	17%	41	18%
Missing	7303		188	
Religion	301	3%	12	5%
Missing	8536		217	
Sexual orientation	243	3%	6	3%
Missing	8594		223	
Disability	575	7%	15	7%
Missing	8262		214	
Age	1477	17%	48	21%
Missing	7360		181	
Other	2429	27%	73	32%
Missing	6408		156	

### Starters and Leavers

In the last financial year, **1034** staff started with the Trust, and **1029** staff left the Trust (6207, total headcount).

#### Starters

Gender	Women 769 (74%)			Men 265 (26%)			
Age	30 and under 499 (48%)		Age 31-50 449 (43%)		51 and over 86 (9%)		
Disability	No 878 (85%)		Yes 5 (0.5%)	Unspecified 148 (14%)		Not declared 3 (0.5%)	
Ethnicity	White 778 (75%)	Black/Black British 46 (4.5%)		Asian/Asian British 151 (14.5%)	Other 55 (5%)	Unspecified 4 (1%)	
Religion/Belief	Christianity 121 (12%)		Other Religions 79 (7.5%)		Atheism 66 (6.5%)		Unspecified 768 (74%)
Sexual Orientation	Heterosexual 277 (27%)			LGBT+ 8 (1%)		Unspecified 749 (72%)	

#### Leavers

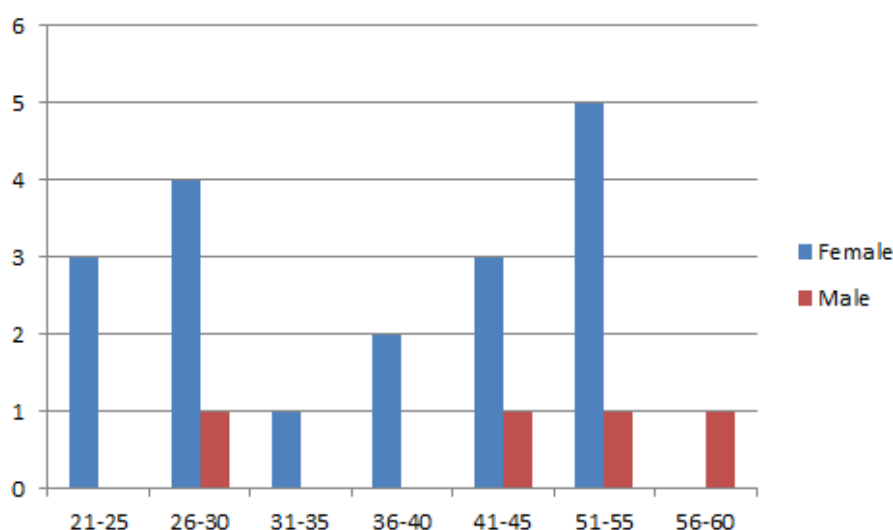
Gender	Women 770 (75%)			Men 259 (25%)	
Age	30 and under 374 (36.3%)		Age 31-50 379 (36.8%)		51 and over 276 (26.9%)
Disability	No 783 (76%)	Yes 11 (1%)		Unspecified 206 (20%)	Not declared 29 (3%)
Ethnicity	White 800 (78%)	Black/Black British 39 (4%)	Asian/Asian British 137 (13%)		Other 45 (4%) Unspecified 8 (1%)
Religion/Belief	Christianity 175 (17%)		Other Religions 70 (7%)		Atheism 41 (4%) Unspecified 743 (72%)
Sexual Orientation	Heterosexual 302 (29%)		LGBT+ 4 (1%)		Unspecified 723 (70%)



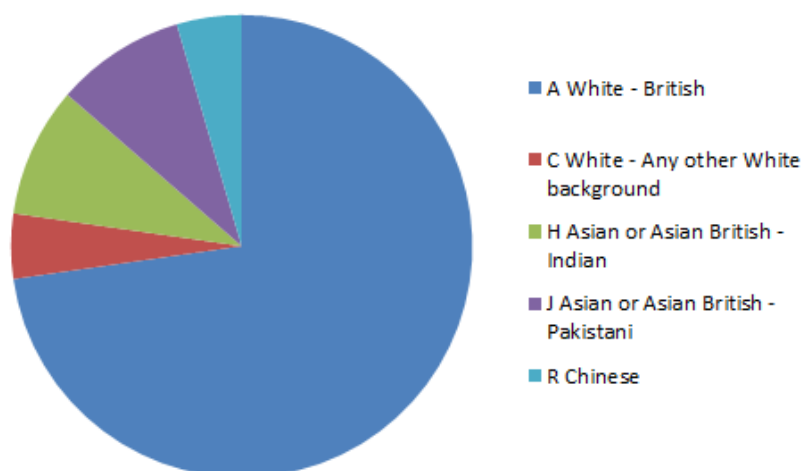
## **Promotions - 2018-19 Financial year:**

22 promotions have been identified, represented as shown below, for age, gender and disability. Data is available for Religion/Belief and Sexual Orientation, however there is a possibility that people could be individually identified due to the numbers involved. For this reason, we are choosing not to share this data publically.

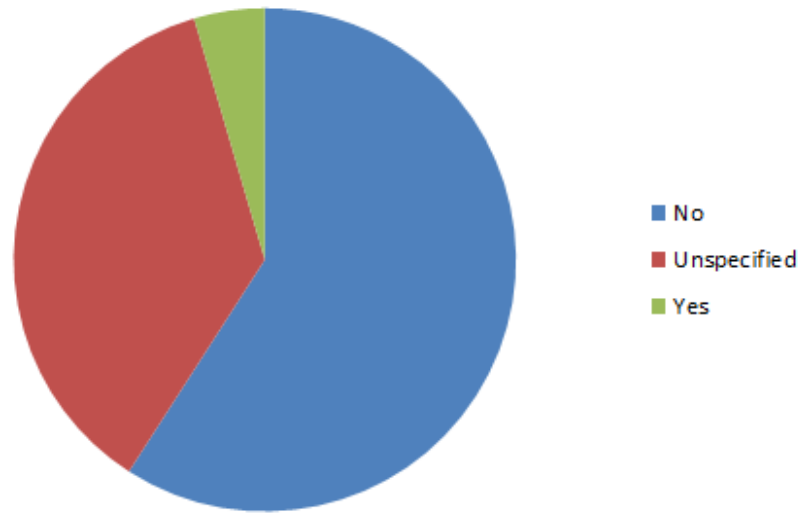
### **Promotions, by Age and Gender**



### **Promotions, by Ethnicity/Race**



### Promotions, by Disability



### Recruitment Data

Attracting a wider diversity of staff to our Trust is critical. The below table highlights the relevant diversity of our applicants, and the progress within each characteristic towards employment.

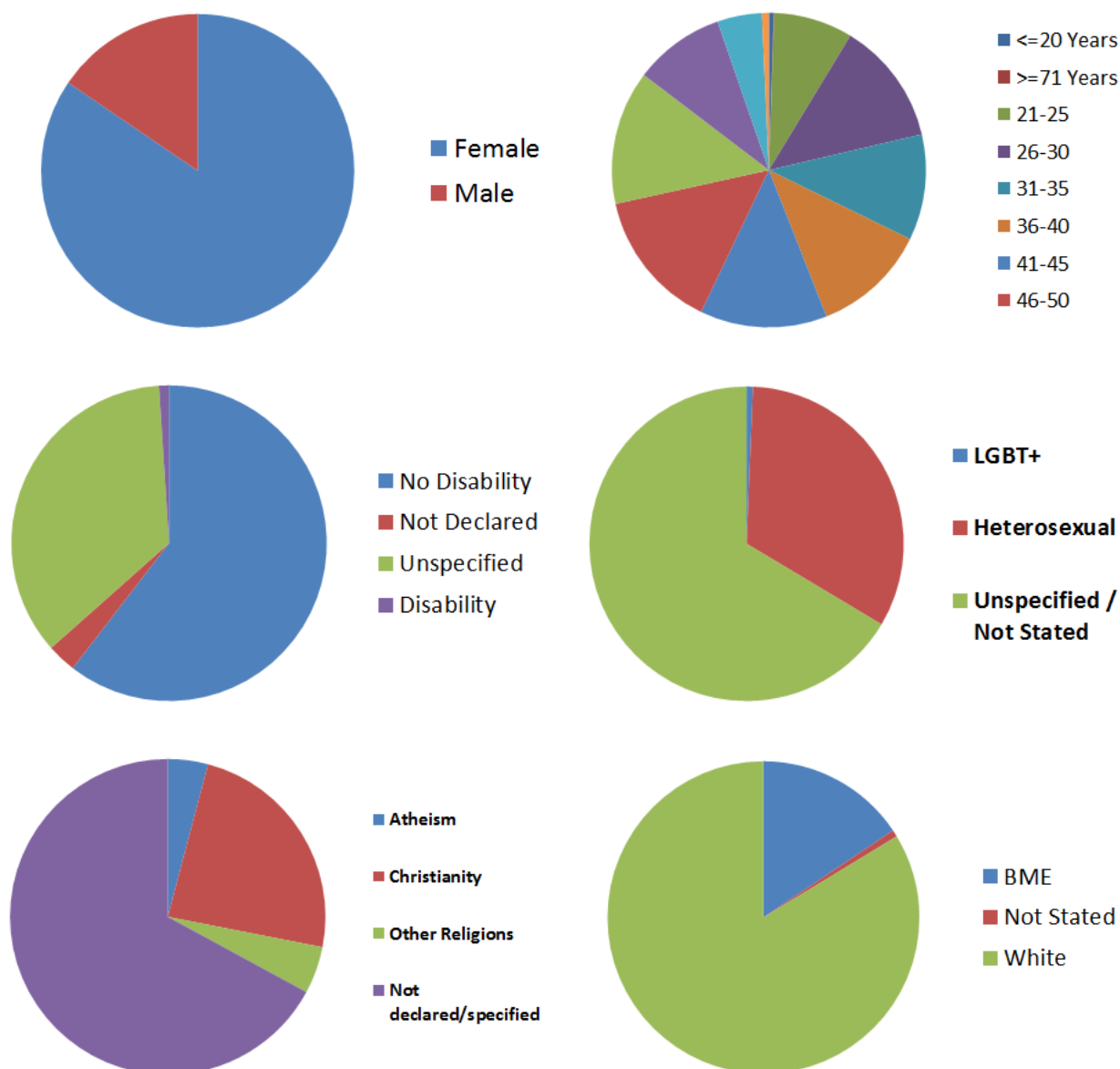
	Number of Applications	As percentage of total applications	Number shortlisted	As percentage of total shortlisted	Number appointed	As percentage of total appointments
<b>Ethnicity (White)</b>	8706	60.83%	4221	74.63%	778	75.24%
<b>Ethnicity (All Other)</b>	5322	37.19%	1338	23.66%	252	24.37%
<b>Ethnicity (Undisclosed)</b>	284	1.98%	97	1.71%	4	0.39%
<b>Gender (Female)</b>	9668	67.55%	4363	77.14%	769	74.37%
<b>Gender (Male)</b>	4602	32.15%	1280	22.63%	265	25.63%
<b>Gender (Undisclosed)</b>	42	0.29%	13	0.23%	0	0.00%
<b>Age profile (Under 30)</b>	5292	36.98%	1898	33.56%	445	43.04%
<b>Age Profile (30-49)</b>	7093	49.56%	2796	49.43%	489	47.29%
<b>Age Profile (50 and Over)</b>	1920	13.42%	960	16.97%	100	9.67%
<b>Age Profile (undisclosed)</b>	7	0.05%	2	0.04%	0	0.00%

<b>Disability (yes)</b>	459	3.21%	210	3.71%	5	0.48%
<b>Disability (No)</b>	13645	95.34%	5362	94.80%	878	84.91%
<b>Disability (undisclosed)</b>	208	1.45%	84	1.49%	151	14.60%
<b>Sexual Orientation (Heterosexual)</b>	13179	92.08%	5240	92.64%	277	26.79%
<b>Sexual Orientation (LGBT+)</b>	480	3.35%	182	3.22%	8	0.77%
<b>Sexual Orientation (undisclosed)</b>	653	4.56%	234	4.14%	749	72.44%
<b>Religion (Christianity)</b>	7158	50.01%	2932	51.84%	121	11.70%
<b>Religion (All Other)</b>	3981	27.82%	1268	22.42%	79	7.64%
<b>Religion (Atheism)</b>	1746	12.20%	850	15.03%	66	6.38%
<b>Religion (undisclosed)</b>	1427	9.97%	606	10.71%	768	74.27%

## Access to Continuing Professional Development (CPD)

This section highlights to what degree our staff, as defined under the different characteristics, have accessed continuing professional development (not including Mandatory and Statutory Training), within the last financial year.

In total, our records show that some 3,814 staff have accessed CPD, and it is recognised that not all CPD accessed may have been recorded on our system. The data is representative of the makeup of our staff as shown in the section 'Trust Facts and Figures' above. It is suggestive of there being equality of access to CPD.



## Employee Relations.

Data for the financial year 2018-19 is shown below, and by key characteristics that are recorded at the time of the issue being raised.

Topic	Total number of cases	Ethnicity: White (all)	Ethnicity : Non-white	Age: Under 30	Age 31-50	Age 50+	Gender Female	Gender Male
Disciplinary	29	24	5	2	18	9	16	13
Grievance	9	9	0	0	3	6	5	4
Dignity at work (incl harassment)	14	13	1	1	8	5	11	3
Capability	2	1	1	0	1	1	1	1
Raising concerns	71 11 Anon	56	4	6	30	24	50	10
Appeal against dismissal	3	3	0	0	3	0	1	2
Other appeals	1	1	0	0	0	1	0	1
Probationary	0	0	0	0	0	0	0	0
MHPS cases	0	0	0	0	0	0	0	0
Employment Tribunal Claims	3	2	1	0	2	1	2	1

Data is reviewed by the Human Resources Advisory team.

The HR Advisory Team are currently working on reviewing the key Trust Employee Relations policies to ensure that they have clear and fair processes which offer robust informal and formal resolution and support to staff going through these processes.



## **6 – Putting Patients First:**

### **Patients, Service Users, Volunteers and Visitors**

This section provides an overview of our key achievements in meeting the needs of our patients their carers or users of the services ensuring their needs are met around protected characteristics such as age, disability, gender reassignment, race, religion or belief, sex, sexual orientation, marriage and civil partnership; and pregnancy and maternity.

We have been on a journey of Quality Improvement. We have made a significant start through our patient, carer and community engagement plan which supporting our quality improvement strategy 2018-21. We will continue to develop this and other areas. Our key improvements within the last 12 months include:

- **Widening our engagement with patients, their carers and the community**
- **Developing a clear vision and “space” to discuss themes, through the Equality and Diversity committee**
- **Showcasing our key success stories for patients with learning disabilities, those who are deaf and those with dementia and frailty**

### **Supporting Patients who have a Learning Disability**

Though our partnership work with the Learning Disability Liaison team, we have been able to offer training and support to help staff better understand the needs of patients, and their families/carers. It is estimated that 26% of people with Learning Disabilities are admitted to hospital every year, as opposed to 14% of the general population [Mencap, 1998], so as well as training, we are also using the team’s expertise to help inform policy and process, again to ensure the best experience possible for our patients whilst they are in our care.

#### **‘Oliver’s Story’ and the power of storytelling in making change.**

This year, we hosted a national learning programme ‘Ask Listen Do’ and over 100 staff from across our own Trust, and the Health & Care Trust and local CCG attended. The programme is led by Paula McGowan, who lost her son Oliver due to failings in care. Paula explains new ways of learning/providing good quality care, which have been the result of listening to parents, families, carers and people with learning disabilities and autism.

- As a baby, Oliver contracted meningitis twice and developed a mild cerebral palsy, focal epilepsy and a mild form of autism. Growing up, he did not have a diagnosis of mental illness but had previously been given anti-psychotic medication to control his agitation in hospital, caused by his epilepsy and autism. In 2016 Oliver's life was tragically cut short. He had a severe reaction to the anti-psychotic medication causing him to have an increased number of seizures, feeling physically unwell and became extremely agitated. Oliver's health deteriorated and he passed away a few weeks later due to a condition called neuroleptic malignant syndrome. This rare reaction to anti-psychotic medication could have been prevented.

Staff used their learning from this session to make an immediate change to practice, for an 18 year old service user, providing him with an outstanding and safe patient experience.

- The Learning Disability nurse was contacted regarding a young patient who had severe learning disabilities and autism, and who need to attend WRH for CT scan and treatment under General Anaesthetic.
- Reasonable adjustments were put in place for this patient with staff all working collectively to provide this patient, and his family, with an incredible patient experience instead of a day which could have been potentially extremely traumatic to the him.

**Paula's visit has made a lasting impact on the staff who attended her training session, and they continue to share that learning with colleagues.**



## **Support for Patients Living with Frailty and Dementia**

Supporting patients and their families who are frail and/or have and Dementia is a key priority for us.

Ensuring there is seamless, timely and consistent care at each stage in their pathway is pivotal. Our work with partners in Social Services, Primary Care, West Midlands Ambulance Service, Dementia and Alzheimer's Society and others was enhanced this year with the introduction of the Frailty Assessment Unit [FAU] at the Alexandra Hospital. This work has been further developed across wards with the launch of Dementia Champions supported by the Dementia team. The placement of patients who we need to

observe in quiet areas of the wards or to Avon 4, where there is a sensory garden, has provided an environment that minimises/reduces sensory stimulation and provides support.

We have also considered signage, and where refurbishment is required the colour scheme and finish used throughout the Trust is dementia friendly.

Training and raising the awareness of staff to the specific needs of elderly patients has been supported with the use of an age simulation suit to provide a 'real life' experience of what it would be like for patients.

### *Johns Campaign*

We have also been working with family/carers to recognise the importance of them as equal partners in the care and support of their loved ones in hospital, through principles of *Johns Campaign*. This has involved support for carers to stay with loved ones during their time in hospital, and adopting relaxed visiting times across all ward areas of the hospitals based on feedback from patients and their families, and wider consultation across the trust with our staff. We have also introduced the '*we welcome carers of patient*' concept on wards across our hospitals, which as well as offering relaxed visiting hours, also has carer passports and cards, and Carers Champions who can offer information and support.

### **Donna Kruckow, Clinical Operations Lead for Frailty & Dementia Services, share this Patient Story:**

The Geriatric Medicine directorate operates the Frailty Assessment Unit (FAU), a day case unit at the Alexandra Hospital which strives to enhance the care of older people by putting patients first and embraces good practice as part of the Integrated Care of Older People (ICOPE) program.

Following several referrals from GPs to FAU, it was recognised that some older people with heart failure who needed clinical interventions may have a better experience if they were not admitted to hospital as an in-patient for their treatment.

A subsequent opportunistic conversation between a Frailty Advanced Clinical Practitioner (ACP) and a Heart Failure Specialist Nurse, lead to a discussion about the outpatient IV diuretic service being developed.

The FAU ACP suggested that FAU support these patients by using the 6 chaired unit, which provided a quiet space for older patients to be assessed and receive treatment from a multi-disciplinary team 7 days a week. This meant that patients would not need to be admitted to a bed and the Heart Failure Specialist Nurses could see their patients on FAU, while the FAU team would administer IV diuretic therapy and provide the patient care.

Within a week the first patient was referred by her GP for bloods and review of her heart failure as he felt that she may need admission for fluid management. When the patient arrived on FAU she was reviewed by the Heart Failure Specialist Nurse, prescribed intravenous diuretics and was involved in making a joint plan with the Heart Failure Specialist Nurse and FAU ACP, to attend FAU daily as an alternative to being

admitted. This was important to the patient as she did not want to be admitted to hospital for the 7 days of treatment she needed.

During her treatment she was able to invite her family to be with as much as she wished and was able to go home every evening following her treatment. She also benefitted by receiving a pro-active review by the Specialist Frailty Team including a Consultant Geriatrician to ensure all her needs and wishes were addressed to optimise her health and avoid deterioration.

The patient told the FAU team how her experience was improved by not being admitted to hospital. She expressed her thanks to the team and willingly completed Friends and Family feedback cards on several of her daily visits; commenting ““Everyone so kind, staff very kind and considerate, nothing was too much trouble”.

As a result of this positive experience for the patient and staff alike, both the Acute Heart Failure Team and Frailty Team are keen to continue offering this service in FAU to other patients.

This has been written with permission from the patient.

### ***Cake and Shake rounds: Frailty wards at the Alex***



When they were asked what they would like to have happen to help improve their nutritional calorie intake, patients requested cake and milkshakes. The staff took action and ***Cake and Shake*** rounds now occur every afternoon on Frailty wards at the Alex.

### **Deaf Awareness/Translation Services**

For translation services we work with AA Global. Following key feedback and a review of the services over the last 6 months we are delighted to have agreed how we can ensure continued quality improvement. As an example we have new monthly reporting and monitoring in place and are developing new feedback mechanisms.

With our colleagues at Deaf Direct, who we use for sign language, we have been able to share issues for deaf patients and visitors at Board level. With Deaf Direct, we are exploring new ways to engage to foster an inclusive partnership and one of trust. We have a meeting with Deaf Direct, and key Trust staff to explore options such as *mystery shopping* experiences to help us learn, raise awareness empower patients and staff.

**Chaplain David Southall tells us about why it matters to listen, and hear people's concerns:**

I recently supported my Deaf friend William as he spoke about patient experience to our Trust board.

The board, comprised of hospital leaders, chief executive, chief nurse etc listened intently as far as I could see, as William explained certain cases where we could have done better for our Deaf patients. He was accompanied by Angie, an interpreter who used her skills, to voice for us what William was saying and sign to him what the Board were saying.

And it was a brilliantly clear presentation. William told us of the barriers to Deaf access to hospitals; from the technical language used in appointment letters to accessing help in an emergency situation.

He said how some Deaf people would go to Deaf Direct to have the letters translated for them or to make telephone calls on their behalf. He told us of the isolation a Deaf person can face as an inpatient on the



wards when none of the staff can sign. He mentioned new technology that can provide an interpreter instantly via a laptop or tablet.

But most importantly he told us about Deaf culture; which needs to be understood if we are to meet the patient's needs. It is not just a case of being able to sign some words;

but, as always, to inhabit the world of the other person and make them at home on their own terms. I also had the privilege of addressing the board, mentioning the 150 staff we have already trained in basic BSL, but also recognising that, whilst a good start, there is way more that we can do.

At the end, William, with his hearing dog Archie received a massive round of applause – expressed by the waving of our hands in the air. I was hugely encouraged. You will know that I am making it my aim to make Worcestershire Acute Trust the most Deaf Aware and Deaf Friendly Trust in the UK. And in the summing up by the chairman, Sir David had captured the essence of the presentation and suggested some meaningful actions. That's what happens when we listen to people and hear how we can do better meet their needs.

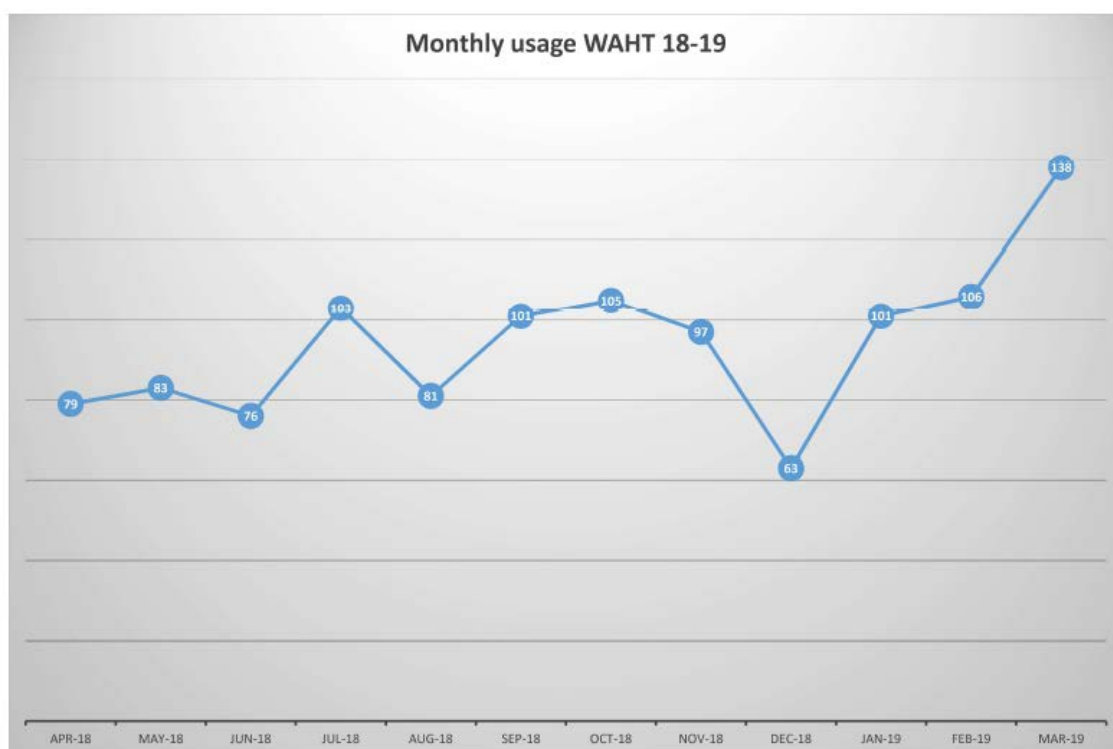


Over the period of 2018/19, our Trust worked with AA Global and Deaf Direct to support the provision of and access to interpreting and translation services across our hospitals. Interpreting and translation services provided support in communicating in a language appropriate for understanding care and treatments for over 900 patients.

There have been improvements in quality of the provision of face to face, telephone interpreting and community language for patients who are deaf or hard of hearing, patients from black and ethnic communities and those new immigrant communities who do not speak English sufficiently to discuss their care and treatment.

To ensure that we are able to provide a quality and supportive service for our patients, we are continuously working with patients, through their feedback, and the service providers. We have key measures in place for our providers, covering accessibility, attitude and effectiveness, and review these with them on a monthly basis.

Below shows our service usage from AA Global for the last financial year.





## **Work in Progress and Underway:**

### **Accessible Information Standards:**

We have a statement on our website ([Click Here](#)) about our commitment to Accessible Information. We are clear about how people can ensure that information is understandable to them and we have focused on key quality improvements to meet these needs.



Moving forward, work we will undertake includes exploration with the organisation *Speak Easy* to see how we can capture feedback and generally communicate effectively with people who have a learning difficulty.

### **Seldom Heard Voices:**

In July this year we launched our first Youth Forum. This is our first real mechanism to consult or work with children and young people and our youth forum will support our work with *seldom heard voices*. Over 5 days, Our Head of Patient, Carer and Public Engagement met with 43 children aged 7+, young people and parents across sites and locations to gain feedback on their experience of using our services. Reports were shared with Pediatrics and IT, and key findings and recommendations made, which will be part of our ongoing development work in this arena.

### Key Activities for Awareness and Engagement from the last 12 months:

<p><b>Signing</b></p> <p>David Southall, Trust Lead Chaplain, has supported one of our Porters, who is deaf, to roll out sign language courses for staff. He also arranged for Good Vibrations choir to come and sign/sign carols at Christmas</p>	<p><b>Oliver's Story</b></p> <p>A staff event, with Oliver's mum (Paula McGowan) sharing her son's story to change practice and experience. This event changed how we do things around here.</p>	<p><b>Families</b></p> <p>Developing connections with families of autistic children to begin to explore how our Trust can be more accessible and to explore key issues</p>
<p>Work on an <b>Always Event</b> over the past 12 months, with the co-production of a learning disability visitor's card: working with local community groups, Health and Care Trust, carers, stakeholders and our Patient Experience team in response to issues experienced by carers on wards not knowing that a member of the Learning Disability Team has visited, and not knowing how to contact them for advice or support</p>		
<p><b>AccessAble</b></p> <p>Addressing key issues shared by patients and carers and to enable us to meet the Accessible Information Standards as gold standard</p>	<p><b>Youth Forum</b></p> <p>Launch and recruitment, which has included targeted recruitment for young people sitting within the 9 protected characteristics to ensure they have a voice.</p>	<p><b>Patient Public Forum</b></p> <p>Recruitment had focused on widening diversity: a member who is blind, younger members and a member who has additional needs. The group is growing in a considered manner to ensure that all members are supported to thrive</p>
<p>Annual <b>PLACE audits</b> will include a greater diversity from September 2019 and will include members of the public who are blind/VI, to better enable us to understand different experiences of Hospital Access. This year we have invited a member of the public who shared a formal complaint with the Trust about information not being accessible and concerns with the "environment" to join our inspections.</p>		
<p><b>Learning Disability</b></p> <p>Smaller areas of work have included engaging with NHS Learning Disability Improvements Standards Project 2018</p>	<p><b>Community Engagement</b></p> <p>Included a developing partnership with New College Worcester which is the national school for blind and visually impaired children, and Generation CAN to develop our network with children and young people, carers and their families with SEN and disabilities</p>	<p><b>Patient Public Forum</b></p> <p>Our Patient Public Forum have started to join committees and governance meetings across the Trust and across Divisions.</p>

## Complaints Data

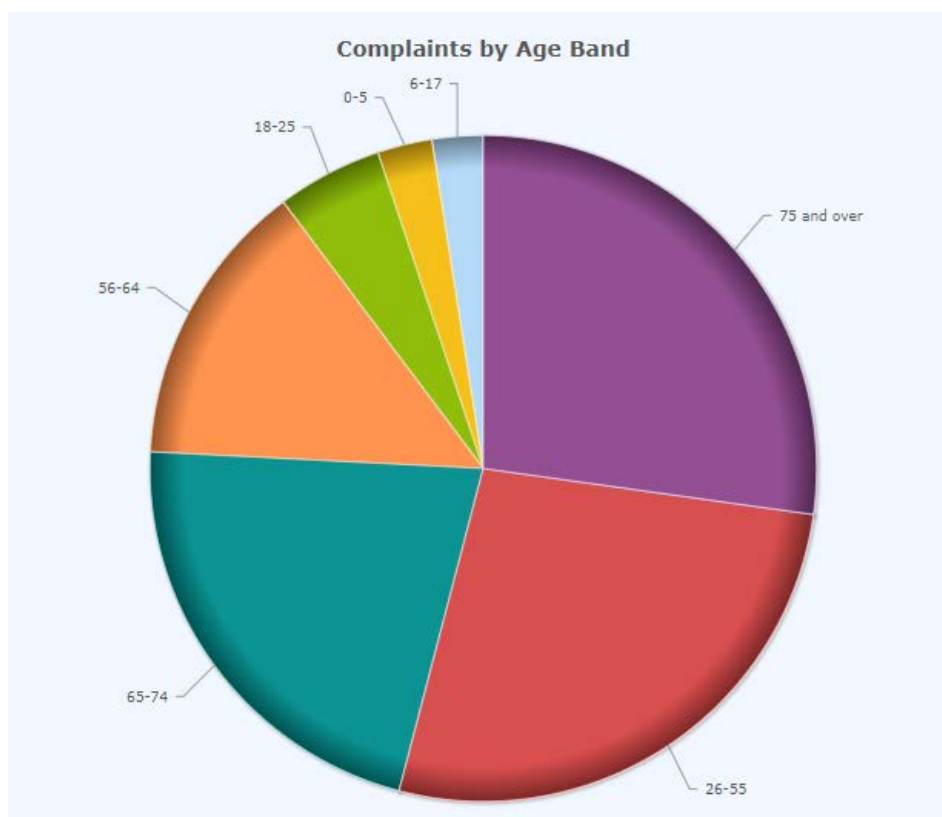
The Trust received 579 formal complaints in 2018-19, 19 fewer than the 598 received in 2017-18.

### Ethnicity of Complainants

Ethnicity	Number	Percentage
White - British	491	94%
Not stated	14	2.5%
White - other white	8	1.5%
Other Ethnic Category	3	0.5%
Pakistani	1	<0.5%
Black Caribbean	1	<0.5%
Black African	1	<0.5%
White Irish	1	<0.5%
Mixed White & Asian	1	<0.5%

The majority of people who were the subject of complaints from the last financial year were White - British (94%), Not Stated, White Irish and White – Other, reflecting the county's demographic profile. All other ethnic categories each represented 0.5% or less of the total complaints.

### Age Band of the person who is making a complaint 2018-19

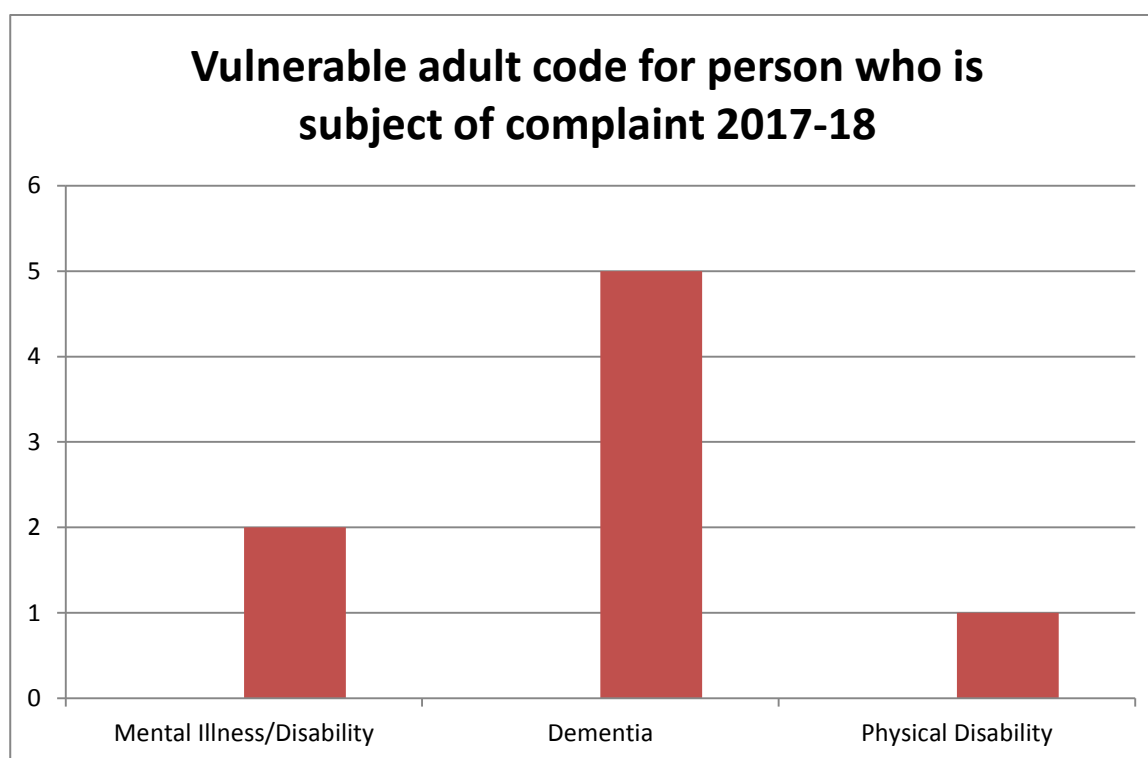


Age Band	Number
75 and over	154
65-74	123
56-64	79
26-55	152
18-25	29
6-17	14
0-5	15

The complaints service is available to all patients, carers and their families covering all age ranges.

### Vulnerable Adults

Complaint information is captured regarding vulnerable adults using nationally defined subject codes and reported directly to the Safeguarding Committee.



The Trust has been working to equip staff with the skills to resolve concerns locally and this has seen a reduction in the number of complaints across the year. Divisions have focused on strategic action planning and shared learning. The Trust has focused on accessibility of information to ensure that patients understand what to do if they have a concern. The Trust will continue to improve accessibility of information for patients, which is a key strand of the Quality Improvement Strategy.

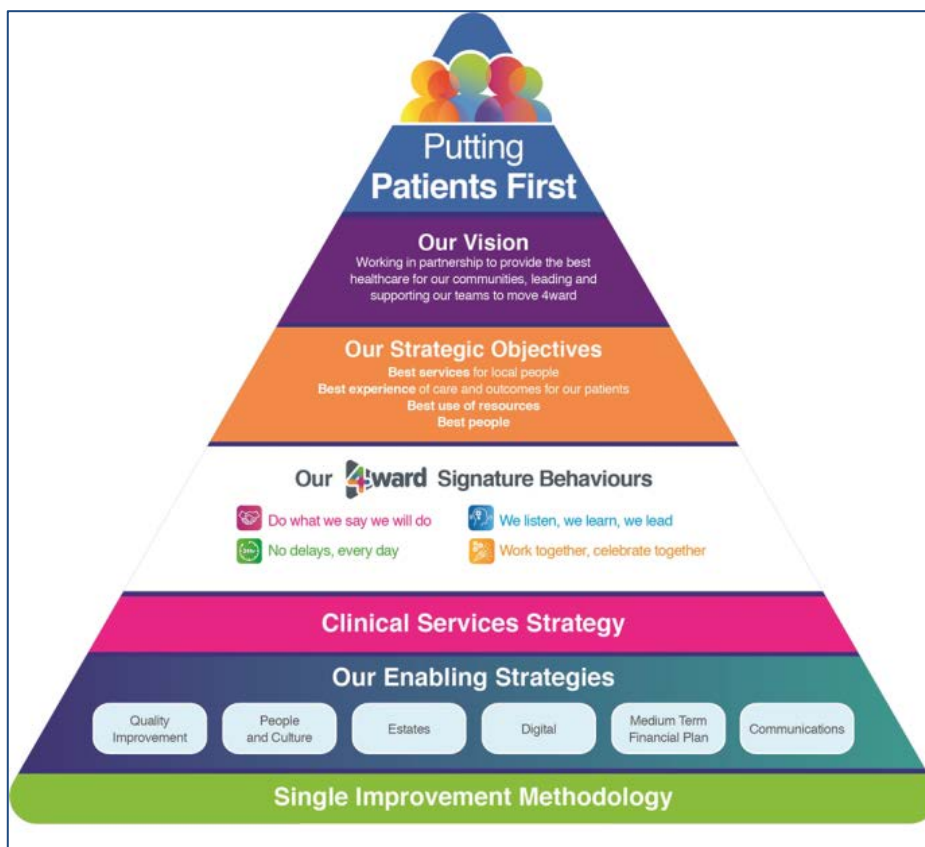
## Our Plans for the coming 12 months

**We Listen, We Learn, We Lead**



## 7 Our Strategy

### Our Plans for the coming 12 months (and beyond)



Using our Strategy Triangle, we are focusing on the following areas for the coming 12 months:

#### **Putting Patients First - Our vision:**

For us, this means creating an environment where everyone can be, and has the confidence to be, themselves.

#### **Our 4Ward Signature Behaviours:**

Our 4ward behaviours are now well recognised amongst our staff, and out patients and visitors are getting to know them too. We want to ensure they continue to help us embed cultural changes within the Trust, and this is particularly relevant in the work we will do around equality, diversity and inclusion. Our initial guide will be:



### We Do This By:

<p><b>We do what we say we will do</b></p> <ul style="list-style-type: none"> <li>• We will work from a place of understanding, recognising that our 'world view' is not everyone else's.</li> <li>• We do what is right and fair by our staff</li> <li>• We work with our staff to understand what it means to feel like you can, or cannot, be yourself at work.</li> </ul>	<p><b>No delays, Every day</b></p> <ul style="list-style-type: none"> <li>• Support our staff to make positive things happen around equality and diversity, such as setting up champion groups</li> <li>• Cases of discrimination are seen as a priority for investigation</li> <li>• We will meet our statutory requirements for reports AND take action on the information we gains from them</li> <li>• We will use tools and support mechanisms to engage with and support E&amp;D in the workplace</li> </ul>
<p><b>We listen, we learn, we lead</b></p> <ul style="list-style-type: none"> <li>• Use existing and new forums to give <i>all</i> our staff a voice (examples: staff survey, 4ward checkpoint, SFFT, E&amp;D Café Forums, E&amp;D Committee, F2SU Champions, LGBT+ Champions)</li> <li>• Support the Divisions and Corporate teams to take ownership of E&amp;D within their areas and work with their teams to create a great place to work, and a great environment to work in</li> <li>• Continue to work with local organisations and charities, to help us be better [eg, part of Worcestershire Equalities Group, developing policies and guidance in partnership]</li> </ul>	<p><b>Work together, celebrate together</b></p> <ul style="list-style-type: none"> <li>• Build on our Annual E&amp;D week to showcase our Trust and our people, and work with other organisations and charities to build a great place to work</li> <li>• Celebrate events on the annual Diversity Calendar (nationally produced) to show support for our staff</li> <li>• Showcasing the diversity of our staff, and celebrate the diversity of staff we have through new and existing routes: for example showcases, recognition awards, Thank you Thursdays.</li> </ul>



**Our Strategic Objectives:**

Objective	Details	Key People
<b>Best Services:</b>  Focusing our staff on quality customer service, by supporting them to feel confident to be who they are without fear of discrimination  Example: Oliver's Story [see earlier in the report]	We will use the Equality & Diversity Committee, groups and supporters to consider issues of equality, inclusion and diversity in their daily work for the assurance of the best services  Timeline: ongoing	E&D Committee Champion groups Trust and Divisional Senior Leaders Learning & Development
	We will also explore how our 4ward behaviours can support a truly inclusive patient experience  Timeline: various over the coming 12 months	4Ward Lead Advocate and Trust Advocates Trust and Divisional Senior Leaders Patient Experience Teams and groups
<b>Best Experience:</b>  Sharing great staff and patient stories far and wide, to encourage other people to adopt the same ways of working to support an environment of inclusion and diversity.	We will share either a patient or staff story at Board and Sub-Committee meetings, that focus on E&D  Timeline: in place by September 2019	All Committee chairs Kimara Sharpe
	We will adopt the Access Able App, which allows people to explore the site before their visit, focusing on parking, walking times, what departments look like etc.  Timeline: Spring 2020	Anna Sterckx IT Teams Wider support, as identified within the project
	Continued training and support for all areas of equality and diversity  Timeline: embedded into programmes by March 2020.	Learning & Development Leadership Lead HR & Chaplaincy colleagues E&D Committee
<b>Best Use of Resources:</b>  Making sure we are supporting work, changes and challenges by reflecting on the impact this has on different staff groups, as per the protected characteristics, and beyond.	We will ensure our Equality Impact Assessments (EIA) is embedded cross the organisation and used alongside the QIA process, giving it equal value and attention  Timeline: by end Sept 2019	Governance team HR team E&D Committee
	We will also ensure this model is used within the development of our Clinical Services Strategy, and	Governance team Clinical Strategy leads

	supporting plans, to ensure a focus on EIA for Patient Care and outcomes  Timeline: by end Sept 2019.	
<b>Best People:</b>  In order to attract and retain the best people, we want to focus on candidate experience at the pre-employment stage, as well as what it's like to work here once people have started.	The Recruitment Team will be supported in working with internal and external stakeholders to explore ways of improving candidate experience and candidate attraction.  Timeline: by end March 2020	Recruitment Team E&D Committee Stakeholders
	We will use E&D recruitment data to facilitate part of how we train people in recruitment and selection processes  Timeline: by end March 2020	Recruitment Team, and associated specialists/trainers
	<b>Timewise Trust Accreditation</b> , promoting and supporting flexible ways of working in order to recognise the commitments our staff have outside of work.  Timeline: by end March 2020	OD Manager and Project team
	Working with <b>Worcestershire Association of Carers</b> to help us embed better ways of working with and supporting In-Work Carers.  Timeline: by end March 2020	OH Wellbeing lead and Project team

Our Trust is continuing to develop the strategy and what it means in practice. As this work continues over the coming 12 months and beyond (for example with the Clinical Services Strategy outcomes) we will review and amend our Equality and Diversity objectives to ensure they meet the needs of our staff and our patients.

## **8 - Moving 4ward on our journey of improvement overview: Ensuring that we continue to learn from and work with others *Together We Are Patient Experience***

Over the coming 12 months we will continue our journey of improvement. Specifically we will be focusing on:

### **Seldom Heard Voices:**

- Continuing the work with our Hospital Youth Forum, which will operate within the co-production ethos and which will be embedded across and supported by the trust.

### **Continue to grow our Patient Public Forum:**

- We will consciously increase the diversity of this group.
- We will continue to ensure active representation is maintained at all levels and build on 2018/19 operational and cultural developments.

### **Developing new ways of engaging with the public**

- Both within and across our quality improvement core areas of work, and building on contacts established in 2018/19.

### **Co-production, working with Service Users for Improved experiences**

Currently, we plan to focus on:

- Always Event services redesigns and process embedded to increase on the number of events implemented 2019-2020
- Pilot for patients cared for in Medical Assessment Units.
- Carers & Patient Forum Representatives
- Health and Care Trust and Community group engagement throughout process.

### **Increasing opportunities to widen our reach**

- To be successful as one of 10 trusts selected nationally to receive dedicated volunteers in 2019 as part of the Helpforce Daily Mail Volunteer campaign

To get involved in the above pieces of work, please contact Rachel Sproston at  
[rachel.sproston@nhs.net](mailto:rachel.sproston@nhs.net)

## **9 - Links and Further Information:**

Please use the links below to follow up on items mentioned in this report.

Item	Link
EDS2 Action Plan	A refresh will be shared during Autumn 2019.
WRES Action Plan	<a href="#">Click Here</a>
WDES Action Plan (new for 2019)	<a href="#">Click Here</a>
Gender Pay Gap reporting	<a href="#">Click Here</a>
<b>Staff Intranet site</b>	
Main Equality and Diversity Page	<a href="#">Click Here</a>
Good Practice Toolkit	<a href="#">Click Here</a>
LGBT+ Champion Page	<a href="#">Click Here</a>
Freedom to Speak Up Page	<a href="#">Click Here</a>

### **Who We Are:**

Our Equality and Diversity Committee is the central committee for sharing E&D work, reviewing action plans and agreeing new E&D projects and work.

Membership of the committee is drawn from across the Trust and includes the Patient and Staff Equality Leads, Divisional Managers, Union representatives and Staff reps. We aim to include representatives to cover the nine protected characteristics as well as wider social inclusion and representation, to challenge the work we are doing, in a positive and constructive way. The workforce elements of the Equality and Diversity Committee are reported to People and Culture Committee on behalf of the Trust Board. Patient elements are reported through the Quality Governance Group.

To join the committee (Trust employees only) please contact any of the names below. To ask us to focus on a particular topic under E&D, please send your request to anyone named below.

**Reverend David Southall:** Chaplaincy Team Leader and Equalities Engagement Lead - [d.southall@nhs.net](mailto:d.southall@nhs.net)

**Karen Hatton:** Organisational Development Manager – [karen.hatton4@nhs.net](mailto:karen.hatton4@nhs.net)

**Rachel Sproston:** Patient Experience Lead Nurse - [rachel.sproston@nhs.net](mailto:rachel.sproston@nhs.net)

**Shaunee Irvine,** Trust Staff Side Chair: [shauneeirvine@nhs.net](mailto:shauneeirvine@nhs.net)