Western Sussex Hospitals
NHS Foundation Trust

EQUALITY AND DIVERSITY POLICY	
Summary statement: How does the document support patient care?	By ensuring staff of the Trust are delivering the very highest standards of access and care to patients, visitors and staff from a diverse range of backgrounds and with differing abilities and needs.
Staff/stakeholders involved in development: *Job titles only*	Human Resources Policy Discussion Group Diversity Matters Group
Division:	Organisational Development and Workforce
Department:	Human Resources
Responsible Person:	Human Resources Director
Author:	Organisational Development Manager
For use by:	All staff, patients and visitors to the Trust
Purpose:	To ensure the Trust proactively develops a culture which is diverse; where individual differences are valued and respected; and to develop our services and workforce to reflect the communities we serve.
This document supports: *Standards and legislation*	• Equality Act 2010 • Human Rights Act 1998
Key related documents:	Recruitment and Selection Policy, Dignity at Work (Bullying and Harassment) Policy, Privacy and Dignity Policy, Management of Violence and Aggression Against Staff Policy, Red and Yellow Card System, Staff Discipline Policy, Grievance and Fair Treatment Policy, Investigation Policy, Raising Concerns/Freedom to Speak Up Policy, Annual Equality Report 2017, Equality Delivery System and the Trusts Equality Objectives.
Approved by: *Divisional Governance/Management Group*	Employee Partnership Forum Diversity Matters Group

Approval date:	November 2018
Ratified by Board of Directors/ Committee of the Board of Directors	Trust Executive Committee
Ratification Date:	November 2018
Expiry Date:	November 2021
Review date:	May 2021
If you require this document in another format such as Braille, large print, audio or another language please contact the Trust's Communications Team	
Reference Number:	P106

Version	Date	Author	Status	Comment
1.0	April 2010	HR	Archived	Regular Review
2.0	October 2012	HR	Archived	Regular Review
3.0	November 2015	HR	Archived	Regular Review
4.0	November 2018	HR		

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1.0   Purpose

1.1   Western Sussex Hospitals NHS Foundation Trust (WSHFT) strives to create a culture where everyone is passionate about delivering exceptional quality every time and "where better never stops". The Trust's vision "We Care" is translated into the everyday experience of patients, visitors and colleagues from the beginning to the end of their contact with us.

1.2   Our Patient First programme is our long term approach for transforming services for the better. It places the patient at the heart of everything we do. It recognises that in order to ensure the patient receives equal access to treatment and services, regardless of background; the Trust needs to first understand the diversity of its patients, their ability to access services, as well as satisfaction levels.

1.3   'Our People' is one of the key strategic themes that underpin the Patient First approach. This recognises the quality of care provided is dependent on our workforce and ensures the Trust seeks to continually improve staff experience alongside patient experience.

1.4   The policy also details the Trust's expected behaviours which are consistent with the Trust's values:

- Kind
- Friendly
- Respectful
- Compassionate
- Professional
- and working as a Team

We would expect these behaviours to be demonstrated between staff and patients, managers and their staff and all staff and their colleagues. Through ensuring all staff exhibit these behaviours in their day to day interactions we can create a positive and healthy working environment where staff feel supported by their colleagues and managers. Further information can be found under section 3.1.2 of the Trust's Dignity at Work (Bullying and Harassment) policy.

1.5   This policy seeks to provide the overarching principles for all staff in improving equality, diversity and inclusion within WSHFT.

1.6   This policy and supporting guidance are designed to ensure there is no unlawful or unfair discrimination and the Trust is committed to the principles of the NHS Constitution and legislation embodied by the Equality Act 2010 and the Human Rights Act 1998.

2.0   Scope

2.1   <u>Who is covered by the policy</u>

2.1.1 This policy applies to all staff (including medical and dental), volunteers and agency staff, patients, visitors and other users of the Trust's services.

2.2 **When this policy should be used**

2.2.1 The Trust will use this policy and other relevant policies to ensure fair and reasonable treatment of its patients, staff and members of the public.

3.0 **Principles**

3.1 The Trust's principles in relation to equality, diversity, inclusion and human rights are:

- The Trust will act as an agent for change within local communities by positioning equity, diversity and human rights at the heart of local delivery plans.

- While this will be achieved in part by being championed at a senior level, it can only be fully achieved through all those working within the Trust recognising and adhering to their own personal responsibilities. The Trust will therefore take steps to ensure everyone in the organisation understand their rights and responsibilities under the policy.

- Create an organisation that actively promotes equality of opportunity for all, and a culture that is free from discrimination, harassment or victimisation.

- Promote diversity in employment and employ a workforce that reflects the communities it serves.

- Recognise and welcome the fact that people bring a range of different work experiences and personal styles, and a variety of different values beliefs and attitudes.

  - Ensure that no-one receives less favourable treatment on the grounds of their age, disability, sex, gender identity, marital (including same sex marriage) or civil partnership status, maternity or pregnancy status, race (including nationality or culture), religion or belief, sexual orientation, caring responsibilities, or any other relevant criteria in any aspect of their employment.

- All staff can expect to be treated fairly during the course of their employment. No member of staff will be treated less favourably or unlawfully discriminated against in applying for internal jobs, training opportunities, appraisals, nor in disciplinary and grievance procedures and all other aspects of day-to-day management.

- Ensure that anyone who comes into contact with the Trust is treated with dignity and respect, and do not suffer any level of discrimination, harassment or victimisation from the Trust.

4.0 Explanation of legislation / definitions

4.1 Equality Act 2010

4.1.1 The Equality Act 2010 includes the basic framework of protection against direct and indirect discrimination, harassment and victimisation in the workplace and in wider society including services and public functions, premises, education, associations and transport.

4.1.2 The Act provides protection for people discriminated against because they are perceived to have, or are associated with someone who has, a protected characteristic.

4.1.3 The Act defines it is against the law to discriminate against someone because they are perceived to have, or are associated with someone who has, a protected characteristic. The nine protected characteristics are:

- Age
- Race, colour, nationality or ethnic origin
- Disability (includes physical and mental health conditions)
- Gender reassignment
- Sex
- Sexual orientation
- Marriage or civil partnership
- Pregnancy, maternity or paternity
- Religion or belief

4.1.4 No one protected characteristic is more important than any other. All are equally relevant and valid.

4.2 Discrimination, Harassment and Victimisation

4.2.1 Discrimination is less favourable treatment based on a protected characteristic.

4.2.1 Direct discrimination - occurs where a person is treated less favourably than other people because of a protected characteristic. Examples include refusing to treat someone or excluding them from services because of their gender identity; denying someone training opportunities because they are pregnant.

4.2.2 Indirect discrimination - occurs when a blanket criterion or practice puts a person with a protected characteristic at a disadvantage, and it cannot be justified as a proportionate means of meeting a legitimate aim. For example of this could be to change a clinic time that

only ran between 12.00 noon - 2 p.m. on Fridays, this could adversely affect people who attend religious prayer during those times. Organisations should take reasonable steps to meet the needs of those with the protected characteristic without adversely affecting other people. What is lawful and appropriate will depend on the circumstances of each case.

4.2.3   Discrimination by association - occurs when someone is discriminated against because they associate with a person who possesses the protected characteristic. For example, refusing someone entry because they are with someone who uses a wheelchair.

4.2.4   Discrimination by perception - occurs when someone is discriminated against because they are perceived to have the protected characteristic, even if they do not. For example, refusing to include someone in a team because they are thought to be gay.

4.2.5   Harassment - is unwanted conduct in relation to a protected characteristic and the conduct has the purpose or effect of violating an individual's dignity or creating an intimidating, hostile, degrading, humiliating or offensive environment for that individual. Unwanted conduct of a sexual nature which has a similar purpose or effect also constitutes harassment. This can include isolating and excluding a member of a team because they have a disability or because they are from a different ethnic group. It can also include regular micro-aggressive behaviour such as ignoring them when they speak.

4.2.6   Victimisation - takes place when one person treats another less favourably because that person has asserted their legal rights in line with the Act or helped someone else to do so. An example of this would be excluding someone from your services or denying them the opportunity to upskill because they have acted as a witness to support the claim of harassment or discrimination by a person with the protected characteristic.

4.3   Public Sector Equality Duty

4.3.1   The Public Sector Equality Duty consists of a general equality duty, which is set out in Section 149 of the Equality Act 2010 and Specific Duties which are imposed by secondary legislation. The General Equality Duty requires organisations to consider how they could positively contribute to the advancement of equality and good relations. It requires equality considerations to be reflected into the design of policies and the delivery of services, including internal policies, and for these issues to be kept under review.

4.3.2   The three aims of the General Equality Duty are to have due regard of the need to:
1. Eliminate discrimination, harassment, and victimisation and any other conduct that is prohibited under the Act.
2. Advance equality of opportunity between persons who share a protected characteristic and persons who do not.
3. Foster good relations between persons who share a relevant protected characteristic and persons who do not share it.

4.3.3   Specific duties are underpinned by the concept of transparency. Transparency requires public bodies to be open about the information on which they base their decisions, about what they are seeking to achieve and about their results. Under the specific duties, public bodies are required to publish a range of equality data relating to both their workforce and to the services they provide, including:

- annual figures on the gender pay gap, the proportion of staff from ethnic minority communities and the distribution of disabled employees throughout an organisation's structure.
- detail of how the organisation has engaged with people in fulfilling the aims of the duty.
- equality outcome objectives (as part of the normal business planning process) which are specific, relevant, measurable and which will allow members of the public to make meaningful judgements about the extent to which the organisation is achieving what it sets out to achieve. These objectives must be reviewed at least every four years by undertaking the Equality Delivery System 2 (EDS2) toolkit.

4.4   Hate Crime

4.4.1   In 2007, the Police Service, Crown Prosecution Service (CPS), Prison Service (now the National Offender Management Service) and other agencies that make up the criminal justice system agreed a common definition of 'hate crime' and five 'strands' that would be monitored centrally. Hate crime is defined as 'any criminal offence which is perceived, by the victim or any other person, to be motivated by hostility or prejudice towards someone based on a personal characteristic.' The five monitored strands are:

- race
- religion / faith
- sexual orientation (e.g. homophobia, biphobia or heterophobia)
- disability and
- gender-identity (e.g. transphobia)

4.4.2   Homophobia - The irrational fear, dislike or prejudice against homosexuality or homosexuals

4.4.3   Biphobia - The irrational fear, dislike or prejudice against bisexuality or bisexuals, which may include negative stereotyping or denial of the existence of bisexuals.

4.4.4   Heterophobia - The irrational fear, dislike or prejudice against heterosexuality or heterosexuals.

4.4.5   Transphobia - The irrational fear, dislike or prejudice against transgender (trans) people. Further information and guidance on providing hospital care to trans patients and staff is available on StaffNet.

4.4.6   Crimes based on hostility to age, gender, or appearance, for example, can also be hate crimes, although they are not part of the five centrally monitored strands.

4.4.7   Anyone can be a victim of a hate crime. The Trust has a zero tolerance approach to hate crimes. All staff and patients should be assured of a safe environment when they are in the Trust. Staff and patients are encouraged to report incidents so that measures can be put in place so it does not happen again. For further information on how to report an incident / concern please refer to section 5.6 (page 15).

4.5   The NHS Workforce Race Equality Standard (WRES)

4.5.1   Since 1st April 2015 all NHS organisations are required to demonstrate through nine indicators how they address race equality issues in a range of staffing areas. The Workforce Race Equality Standard (WRES) help organisations to achieve this. The standard covers BME recruitment relative likelihoods, workforce diversity, career development, disciplinaries, responses to the national staff survey on equal opportunities in career development, experiences of harassment, bullying and discrimination, and Board diversity. The Equality Delivery System (EDS) and WRES were made a mandatory requirement in the 2015/16 NHS Standard Contract.

4.6   The NHS Workforce Disability Equality Standard (WDES)

4.6.1   Following WRES being introduced the NHS Equality and Diversity Council (EDC) has taken another pivotal step to advance equality within the NHS. The Council recommended that a Workforce Disability Equality Standard (WDES) should be mandated via the NHS Standard Contract in England and this came into effect in 2018.

4.6.2   The WDES is a set of specific measures which enables the Trust to better understand the experiences of their disabled and non-disabled staff. It will support positive change for existing employees, and enable a more inclusive environment for disabled people working in the NHS. Like WRES which the WDES is in part modelled, it will also allow the Trust to identify good practice, develop a local action plan, compare performance regionally and by type of trust. It will also enable the Trust to demonstrate its progress against the indicators of disability equality.

4.6.3   The WDES is important, because research shows that a motivated, included and valued workforce helps to deliver high quality patient care, increased patient satisfaction and improved patient safety.

4.7   Gender Pay Gap Reporting

4.7.1   Gender Pay Gap reporting was introduced in 2017 and legislation requires all employers of 250 or more employees to publish their gender pay gap. The report aims to provide context to demonstrate the Trust's commitment to equality and make recommendations to improve.

4.7.3 It is important to recognise that the gender pay gap differs to equal pay. Equal pay is being paid equally for the same / similar work and the Gender Pay Gap is the difference in the average pay between two groups.

4.8   Accessible Information Standard (AIS)

4.8.1   The AIS was introduced by the government in 2016 to make sure people with a disability, impairment or sensory loss are given information in a way they can understand. This includes making sure people get information in accessible formats. By law all organisations that provide NHS care must follow the Standard in full.

4.8.2   The AIS states that anyone with a disability, impairment or sensory loss should:

- be able to contact, and be contacted by, services in accessible ways, for example via email or text message.
- receive information and correspondence in formats they can read and understand, for example in audio, braille, easy read or large print.
- be supported by a communication professional at appointments if this is needed to support conversation, for example a British Sign Language interpreter.
- be given support in order to communicate, for example to lip-read or use a hearing aid.

4.8.3   As part of the AIS the Trust must;

- ask people if they have any information or communication needs, and find out how to meet their needs.
- record those needs clearly and in a set way.
- highlight or flag the person's file or notes so it is clear they have information or communication needs and how to meet those needs.
- share information about people's information and communication needs with other providers of NHS and adult social care, when they have consent or permission to do so.
- take steps to ensure people receive information which they can access and understand, and receive communication support if they need it.

5.0   WSHFT Commitment during the Employment Relationship

5.1   Responsibilities

5.1.1   The Trust Board is ultimately responsible for ensuring the Trust is compliant with its equality and diversity responsibilities for everyone it comes into contact with.

5.1.2   **Patients or Service Users (including their partners), Carers and Visitors**

5.1.3   The Trust requires any person who comes into contact with the organisation, whether as a patient, service user (and their partners), carers or visitor, to abide by this policy. The Trust

will not tolerate any discrimination towards its staff or other patients or service users (including their partners), carers or visitors and will take appropriate action.

5.1.4 **Members of Staff**

5.1.5 Staff are expected to observe this policy, regardless of their role or employment status and to manage their behaviour towards other staff members and members of the public. Staff are expected to adhere to the Trust's Dignity at Work (Bullying and Harassment) policy, which details what staff can do to help prevent inappropriate and poor behaviours occurring in the work place.

5.1.6 Staff are expected to adhere to the Trust's Privacy and Dignity policy, which provides information on best practice and creating staff awareness with regards to protecting and preserving patients privacy, dignity and modesty.

5.1.7 Staff are also expected to abide by seven principles of the Nolan Committees Standards in Public Life: selflessness, integrity, objectivity, accountability, openness, honesty and leadership. More details can be found at https://www.gov.uk/government/publications/the-7-principles-of-public-life.

5.1.8 The Trust's Management of Violence and Aggression Against Staff policy specifies that it's the responsibility of all staff, including volunteers, to report all incidents of violence and aggression at work in accordance with the Trust's incident reporting procedures. For further information on how to report an incident / concern please refer to section 5.6 (page 15).

5.1.9 In addition all employees must:

- support patients and service users by ensuring any reasonable need or adjustment is met.
- support colleagues, patients or service users (including their partners) or carers who make a complaint of discrimination and / or harassment.
- not harass, abuse or intimidate any employee, patient or visitor to the Trust on any grounds, but with particular reference to the protected characteristics.
- not make remarks or commit acts that are likely to cause offence.
- not induce or coax others to discriminate against any colleague, patient or visitor to the Trust.
- challenge or draw to the attention of management any concerns regarding incidents, or suspected incidents of discrimination at all times.
- not victimise or attempt to victimise people on the grounds that they have made a complaint or provided information about a concern in relation to discrimination and / or harassment.
- attend the Trust's Equality and Diversity training as part of induction and statutory and mandatory training (health and safety days / updates). On-line training packages are also available.

- ensure equality and diversity training is completed every three years.
- ensure any equipment issued by the Trust (e.g. laptop computers, personal computers, mobile phones etc.) are used for work purposes only, and not in any way used in activities or communications that are discriminatory, harassing or contributing to victimisation. This also includes the use of social media e.g. Twitter, Instagram, Facebook, etc. for more information please refer to the Trust's Social Media Guidance.

5.1.10 **Managers**

5.1.11 Every manager has the responsibility for ensuring the effective implementation of this policy and associated procedures at an operational level. They should familiarise themselves with the policy and procedures and ensure staff are aware of how to access them. Managers should ensure that:

- they understand legislation involved and the implication of not carrying out this policy and they attend mandatory training on equality and diversity and refresh this training every three years.
- they demonstrate commitment to diversity and inclusion by positively promoting the Trust's Equality and Diversity policy and leading by example at all times.
- all employees are clear about their responsibilities and importance of observing the principles under this policy.
- any allegations of discriminatory behaviour or practices are properly investigated in accordance with the Trust's Grievance and Fair Treatment policy and Investigation policy.
- they apply all organisational policies and procedures in a fair and consistent manner.
- they eliminate any unfair practices of which they are aware, whether or not a complaint has been made.
- they are committed to the elimination of discrimination and bias in recruitment, promotion, training opportunities or any other employment matter.
- they attend relevant training events to ensure individuals possess the necessary skills and knowledge to implement good equitable practice.
- where required, mechanisms are in place to support reasonable adjustments for staff, patients, service users and carers.
- they undertake Equality Impact Assessments (EIA) whenever they are writing a policy, business case, consultation paper or considering change including introducing or ceasing a patient service.

5.1.12 **Human Resources**

5.1.13 Human Resources staff are responsible for providing advice and guidance to staff and managers on the application and effective implementation of the policy. They also have

responsibility for ensuring the duty to promote is observed and actioned where necessary and general duties of the equality legislation are observed.

5.1.14 **Legal Liability**

5.1.15 Individual members of staff can be held personally liable for acts of unlawful discrimination.

5.1.16 The Trust, as an employer, may be liable for any act of unlawful discrimination committed by staff during the course of their employment, unless it can be proved that all reasonable and practicable steps had been taken to prevent such an act from occurring. This also extends to a social setting, where staff are together because of their connection to work, for example, a leaving function.

5.1.17 The Trust has a primary legal and moral responsibility for ensuring that discrimination does not occur.

5.2   Recruitment and Selection

5.2.1 The Trust is required to recruit and retain the right people, with the right skills to deliver high quality care. This can best be achieved through a workforce that reflects the community it serves. In accordance with the Trust's Recruitment and Selection policy, selection for employment and promotion is based solely on the minimum requirements for the role applied for including skills, qualifications and experience.

5.3   Recruitment Advertising

5.3.1 The Trust will ensure that no job applicant will receive less favourable treatment than another, due to any of the protected characteristics. With the exception of posts that have been specifically 'ring fenced' for at risk or displaced staff, all job vacancies will be open to competition and publicised externally.

5.3.2 Where there may be a need to apply a Genuine Occupational Requirement, Recruiting Managers will give careful consideration to the specifications of the post against the justification for specifying applicants from a particular protected characteristic in line with advice from Human Resources.

5.3.3 The Trust will not discriminate directly or indirectly when advertising a post by including any requirement or criteria, which is unnecessary to the post and which may, unintentionally, exclude certain groups of potential applicants from applying.

5.3.4 No discriminatory language will be included in advertisements; further advice can be sought from the Trust's Recruitment Team.

5.4   Disability Confident

5.4.1 The Trust is committed to both employing and retaining people with disabilities. To show this commitment, the Trust obtained level two, Disability Confident Employer as part of the Disability Confident journey. The Trust recognises that applicants with disabilities have abilities to perform most roles within Trust and can contribute a great deal to meeting our Trust objectives. Not only do we value the commitment and contributions made by all current employees with disabilities, we also welcome and encourage applications from people with disabilities.

5.4.2 As part of this commitment, the Trust will interview all applicants with a disability who meet the minimum criteria for a job vacancy and consider them on their abilities. Additionally where required, the Trust will make reasonable adjustments to accommodate individuals with specific needs during the selection process and within the workplace itself for candidates appointed to post. Specialist advice will be sought from Occupational Health regarding reasonable adjustments for successful candidates.

5.5   During Employment

5.5.1 It is the Trust's commitment to ensure all staff, at all stages and in all aspects, their employment relationship are free from discrimination, victimisation and harassment. This will be achieved through delivering appropriate training for all staff in equality, diversity and human rights, both during induction and thereafter during the course of their employment.

5.5.2 If staff develop a disability during their time working for the Trust, where possible reasonable adjustments will be made to prevent them from being placed at a substantial disadvantage in all aspects of employment including recruitment and selection, training, career development and retention. In accordance with the Health and Wellbeing policy it should be noted, that sickness defined as disability related will still be monitored and managed by the Trust, however no employee should be treated unfavourably because of something connected to a disability unless it is objectively justified.

5.5.3 Training and development opportunities are made known to all relevant members of staff, with the selection for training (including any criteria used for selection) being free from discrimination.

5.5.4 If a member of staff is undergoing gender reassignment, the Trust will consult with them sensitively about their needs in the workplace and whether there are any reasonable and practical steps that can be taken to help them as they undergo their gender reassignment process.

5.5.5 The Trust's Maternity, Adoption, Maternity Support (Paternity) and Shared Parental Leave policy supports the Trust's principles in relation to equality, diversity, inclusion and human rights.

5.5.6   The Trust will consult with relevant staff to understand the requirements of their religion or belief, such as religious observances, and make appropriate provision to support them in doing so, where reasonably practicable.

5.5.7   For staff that have a learning difficulty, learning disability or health condition that puts them at a disadvantage for training, they should raise this issue with their line manager, course facilitator or Learning and Development department. This will enable any reasonable adjustments / alternatives to be fully explored.

5.5.8   The Trust will ensure that locally developed policies do not discriminate against members of staff either in the way they are designed or how they are implemented in practice. Where changes to policies and procedures are being considered, the Trust will consult with recognised trade unions and other stakeholders as a first step towards understanding the diverse needs of members of staff.

5.6   Dealing with Complaints / Concerns

5.6.1   The Trust is keen to resolve concerns raised by staff at an early stage. If staff believe they have been discriminated against, victimised or harassed, by staff or patients, on the grounds of any protected characteristic listed under section 4.1.3, they should speak to their line manager in the first instance. The Human Resources department or trade union will also be able to provide support and help staff to understand the options available through the Trust's Dignity at Work (Bullying and Harassment) policy.

5.6.2   Support can also be provided by a Freedom to Speak Up (FTSU) Guardian. The FTSU Guardians provide an impartial service for staff to discuss concerns confidentially, support the member of staff to raise their concern and ensure there are no recriminations from doing so. The FTSU Guardians can be contacted via email at Freedomtospeakup@wsht.nhs.uk. There is an executive and a non-executive lead for FTSU at the Trust and the FTSU Guardians have direct access to the Chief Executive if necessary. The Raising Concerns / Freedom to Speak Up Policy and guidance is available on StaffNet.

5.6.3   To help prevent staff from being subjected to repeated acts of violence, aggression and unacceptable behaviour from patients under the care of the Trust as well as visitors. The Trust has developed a 'Red and Yellow Card System' process detailed in the Management of Violence and Aggression Against Staff policy.

5.6.4   Complaints by a patient or service users (including their partners), carer, visitor or member of the public will be dealt by the Patient Experience Team in accordance with the Trust's Complaints and Concerns Policy.

5.6.5   Where complaints are received from users or communities (external complaints) about the implementation of the Trust's Equality and Diversity policy, the Trusts complaints procedure applies.

5.6.6 The complainant is encouraged to raise their concern with the person or the service they are dealing with, so their concern can be resolved quickly. If this is not possible or the complainant remains unsatisfied, they should make a formal complaint. Complaints about the Trust's services should be made to:

The Chief Executive
Western Sussex Hospitals NHS Foundation Trust
Worthing Hospital
Lyndhurst Road
Worthing
BN11 2DH
Or e-mail: CustomerRelationsWorthing@wsht.nhs.uk

5.6.7 Complaints can be made in person or by letter or email. If an individual is unable to pursue the complaint individually, someone else can communicate the complaint on their behalf. Individuals can also obtain advice and support from the PALS teams if they wish to make a complaint:

E-mail Worthing Hospital palsworthing@wsht.nhs.uk or call 01903 285032
Or
E-mail St Richards Hospital PALSChichester@wsht.nhs.uk or call 01243 831822.

5.6.8 Any incidents that constitute as hate crime should be addressed by referring to the Violence and Aggression Policy, in addition a mandated DATIX Incident Reporting form needs to be completed.

6.0 Groups / Forums / Networks

6.1 Diversity Matters Group

6.1.1 The Diversity Matters Group is responsible for overseeing the effective implementation of this policy and reports to the Trust Board. The group, chaired by the Chief Executive, meets quarterly to:

- develop the strategy and policy for equality and diversity.
- present to the Trust Board an Annual Equality Report detailing patient and staff equality and diversity data and actions required to make improvements.
- drive the implementation of the principles of the Equality Act 2010 and associated project streams.
- ensure managers receive practical training and support to help them turn policy into practice.
- involve staff through encouragement of networks, forums, listening events and support groups.
- present to the Trust Board the equality objectives / updates to the Equality objectives on a yearly basis.

- support programmes designed to encourage the development of staff from minority groups.

6.2   The Celebrating Cultures Network

6.2.1   The Celebrating Cultures network is responsible for recruiting and representing its Black and Minority Ethic (BME), religion and belief and varying nationality / culture members at the Diversity Matters Group, as well as other equality and diversity events run by the Trust. The network may work on specific projects or actions identified as necessary by themselves, the Trust or the Diversity Matters Group. This group is open to staff and patient / visitor representatives as well as specialist members if appropriate.

6.3   Disability Forum

6.3.1   The Disability Forum is responsible for recruiting and representing its members at the Diversity Matters Group, as well as other equality and diversity events run by the Trust. The Forum may work on specific projects or actions identified as necessary by themselves, the Trust or the Diversity Matters Group. This group is open to staff and patient / visitor representatives as well as specialist members if appropriate.

6.4   Lesbian, Gay, Bisexual and Transgender (LGBT) Network

6.4.1   The LGBT Network is responsible for recruiting and representing its members at the Diversity Matters Group, as well as other equality and diversity events run by the Trust. The network may work on specific projects or actions identified as necessary by themselves, the Trust or the Diversity Matters Group. This group is open to staff and patient / visitor representatives as well as specialist members if appropriate.

6.5   Personal, Fair and Diverse (PFD) Champions

6.5.1   PFD champions are individuals who have volunteered to promote the Trust's equality and diversity agenda throughout the organisation. They achieve this by attending events and forums, supporting and signposting staff and advertising equality and diversity activities. At present the PFD champions are a network of individuals who meet on an ad-hoc informal basis and communicate via the Network Leads.

6.6   Patient Experience Team

6.6.1   Members of the Trust's Patient Experience Team are responsible for resolving concerns raised by patients. The Patient Experience Team will liaise with relevant parties to facilitate satisfactory solutions.

6.7   Consulting and Engaging staff

6.7.1   The Trust has established various staff involvement groups to support its commitment to being both an employer of choice and healthcare provider of choice. In addition to these parties and groups, the Trust has an active Employee Partnership Forum which meets bi-monthly and discusses matters that have an impact or effect groups of staff. This group is led by Human Resources and membership includes both management and staff side officials, representing the full cross section of staff employed by the Trust.

6.7.2   The Trust promotes and celebrates Equality, Diversity and Human Rights as part of the national Equality, Diversity & Human Rights week in May, at the Trusts annual staff conference and at any staff engagement event.

7.0   Assessing Impact of WSHFT Commitment to Equality and Diversity

7.1   Monitoring Equality Data

7.1.1   The Trust has a legal obligation to publish data regarding employment of staff and accessibility and satisfaction of patient services on an annual basis by the protected characteristics listed previously.

7.1.2   This statistical data is used to build a clear picture of what is actually happening within both the employment structure and access to patient services within the Trust.

7.1.3   Information about individuals is kept strictly confidential and used only for the monitoring of equal opportunities. Results of the monitoring information are reviewed on an annual basis, firstly by the Trusts Diversity Matters Group and then the Trust Board.

7.1.4   The Annual Equality Report also informs the Trust's Equality objectives and the general equality and diversity agenda for the Trust. The objectives are published internally and externally on-line by 31st January each year for the previous year.

7.1.5   The Trust is required to submit annual WRES data to NHS England via the Strategic Data Collection Service (SDCS). NHS England publishes a comprehensive report annually that focuses on all of the nine WRES indicators. Additionally the Trust publishes its own WRES data report annually on the Trust's website.

7.1.6   The Trust will be required to submit WDES data to NHS England. NHS England aim to publish the first WDES reports in August 2019, based on data from 2018/2019 financial year and the first National WDES annual report should be published by April/May 2020.

7.2   Equality Objectives

7.2.1   The Trust has a legal obligation to publish at least one equality objective on an annual basis that has been developed through meaningful consultation with its stakeholders.

7.2.2   An internal decision was taken to use the NHS developed Equality Delivery System (EDS) to facilitate the development of the Trusts objectives. It was designed specifically to support NHS commissioners and providers to deliver better outcomes for patients and communities and better working environments for staff, which are personal, fair and diverse.

7.2.3   At the heart of EDS is a set of 18 outcomes grouped into four goals. These outcomes focus on issues of most concern to patients, carers, communities, NHS staff and Boards. It is against these outcomes that performance is analysed, graded and action determined for each of the protected characteristics. The four EDS goals are:

- Better health outcomes for all;
- Improved patient access and experience;
- Empowered, engaged and included staff;
- Inclusive leadership at all levels.

7.2.4   The Trust published its first set of Equality objectives in April 2012 and these have replaced the need for a Single Equality Scheme.

7.2.5   The Equality objectives are reviewed on a regular basis and a formal Trust Board report presented by April each year. A final review is reviewed at least every four years in line with the with Equality Act 2010.

7.3   Equality Impact Assessments (EIA)

7.3.1   While organisations are no longer required to complete the paperwork, the process of undertaking EIA or a due regard assessment against the nine protected characteristics is a legal requirement for all policies, procedures, service delivery and service provision. The Trust is committed to assessing whether the policies and procedures that guide day-to-day practices are likely to have a positive or negative impact on different groups within our diverse community.

7.3.2   Action plans should be developed to address any gaps identified within the EIA i.e. where the Trust / service / department is now, where they want to be and how they will get there. Managers and service leads are expected to undertake their own EIA or due regard assessments.

7.4   Staff Survey

The national NHS Staff Survey assesses the quality of staff experience through a number of questions linked to the NHS Constitution. Data gathered helps to demonstrate how the Trust addresses equality issues in a range of staffing areas. The data is reviewed by the Diversity Matters Group and the Trust Board and informs the development of a focused action plan and appropriate intervention to address areas of inequity.

7.5   Health and Safety Reporting (including DATIX)

7.5.1 The Health and Safety Risk Team provides detailed breakdowns of staff and visitor incidents captured in DATIX reports at the Health Safety and Risk committee, this information is also shared with the Quality and Risk Committee.

7.6   Consulting and Engaging the Community

7.6.1   As part of the Trust's ongoing commitment to consult and engage with the diversity of groups within the communities it serves, the Trust has developed an Action Plan to help identify and reach communities which it is less likely to engage with. These may be communities which have traditionally been isolated from accessing healthcare e.g. traveler communities or those who have had negative experiences and poorer health outcomes e.g. LGBT community.

7.6.2   The Trust is keen to seek regular feedback from its community groups with regard to its equality objectives in particular, as well as any other relevant consultations or plans (including proposed changes to patient services). This is normally recorded using an EIA or due regard assessment form.

7.6.3   Groups to be involved include:

- Disability Forums
- Access Groups
- Staff side
- Volunteers
- Celebrating Cultures Network
- Representatives from local Black and Minority Ethnic (BME) communities
- Gender specific groups (i.e. new or expectant parents, single parents)
- Representatives from other established minority groups and communities
- Representatives from areas of social deprivation which may currently be underrepresented at Trust forums
- West Sussex Equalities Forum
- Lesbian, Gay, Bisexual and Transgender (LGBT) Network

7.6.4   The Trust also has a Council of Governors, and work is ongoing to ensure it is representative of the community it serves.

8.0   Monitoring and Review

8.1   The Human Resources Department obtains and maintains statistics and equality data as previously described, as well as publishing equality objectives these are reported on an annual basis.

8.2   The Diversity Matters Group monitors the implementation of this policy as part of its formal arrangements.

8.3   The Trust Board and Diversity Matters Group review the level of uptake of Equality and Diversity training on a regular basis.

8.4   The FTSU Guardians keep an anonymised database of all concerns raised and these are monitored through the Health and Wellbeing Group and reported to the Quality and Risk Committee. The FTSU Guardians are members of the Trust's Triangulation Group and the Diversity Matters Group. The data collected by the FTSU Guardians helps drive the equality agenda and ensures lessons are learned from staff raising concerns through the FTSU process.

9.0   Equality Impact Assessment

EQUALITY IMPACT ASSESSMENT (EIA)

PURPOSE OF EQUALITY IMPACT ASSESSMENT
The EIA should: • Inform the Trust if any groups are, or could be, disadvantaged by a policy, service change or reconfiguration and if so clarify/propose action to mitigate that impact • Enable the Trust to identify where policy changes may be needed to actively promote equality and eliminate inequality • Remind all involved in delivering services of the Trusts determination to promote equality

Section 1 – About the Policy, Service, Function, Proposal, Strategy or Consultation

1.1 Name of Policy, Service, Function, Proposal, Strategy or Consultation	Equality and Diversity Policy
1.2 Name of person completing this assessment (and role/department)	Nikki Kriel - Organisational Development Manager
1.3 Brief description of the aims of the policy, service, function, proposal, strategy or consultation? **(include details of who is affected by, involved in and/or benefits from it)**	To ensure the Trust proactively develops a culture which is diverse; where individual differences are valued and respected; and to develop our services and workforce to reflect the communities we serve.
1.4 Which department owns the policy, service, function, proposal, strategy or consultation?	Human Resources
1.5 Is responsibility for implementation of this policy, service, function, proposal, strategy or consultation shared with another agency/department?	No **(If yes describe their involvement in this process, if a partner has conducted an EIA, please attach this information)**

1.6 Does the policy, service, function, proposal, strategy or consultation have direct consequences or implications for service users and/or staff?	Yes
	(If no then it is not relevant to Equality Duties. Please complete the statement in section 3 and send the completed form for checking to the E&D Lead as shown. If yes, please also complete section 2)

Section 2 – Equality Impacts

2.1 Have you made sure that the views of stakeholders, including key people likely to face exclusion have been influential in the development of the policy, service, function, proposal, strategy? (please indicate which)

External	Partners	Internal
~~Service user interviews~~	~~Care Quality Commission~~	~~Staff event~~
		~~Staff interviews~~
~~Focus Groups~~	~~Multi Agency event~~	
		Staff workshop/focus groups
~~Public events~~	~~Joint Working group~~	
		Management Board
~~Patient experience surveys~~	~~Regional Minority network~~	
		Trust Executive Committee
~~Voluntary organizations~~	~~Regional equality forum~~	
		Diversity Matters Group
~~Minority group events/forums~~	~~GP Practice groups~~	
	~~Local/County Council~~	Staff side reps
~~Carer Forum~~		Staff minority forums (e.g disability, BME, sexual orientation, religion/beliefs) (please state)
~~LINks~~	~~Equality and Human Rights Commission (EHRC)~~	
~~HOSC~~		
~~On line forums~~	~~Other NHS Trust (please identify below)~~	Trust Board
~~Local media~~		Staff survey results
~~Published research into minority needs~~		~~Annual General Meeting~~

Comments:

Section 3 – Equality Analysis Template

To be used to analyse the effect of your policy or service on the protected groups in equality law, resulting in either:
1. *removing or minimizing disadvantages suffered by people due to their protected group characteristics (i.e. sex, race, age, disability, sexual orientation, gender reassignment, pregnancy or maternity, religion or belief, civil partnership or marriage)*
2. *taking steps to meet the needs of people from protected groups where these are different from the needs of other people*
3. *no further action required*

Equality law protects people on the following grounds:	Is your policy or service relevant to this area of equality or human rights?		If relevant, is the effect positive or negative		Evidence of the effect (e.g. statistics, research, surveys, results of engagement, etc.)	Is further action required?	
	Yes	**No**	**Positive effect**	**Negative effect**		***Yes**	**No**
Disability	√		√				√
Sex	√		√				√
Gender Reassignment	√		√				√
Race & Ethnicity	√		√				√
Religion & Belief	√		√				√
Sexual Orientation	√		√				√
Marriage and civil partnership	√		√				√
Pregnancy & Maternity	√		√				√

Age	√		√					√
Human Rights	√		√					√

* Complete the following Equality Analysis Action Plan only for the equality grounds marked: *Yes further action required.

Equality Analysis Action Plan								
Equality grounds ticked *yes requiring further action:	**Does your policy or service:**			**Any action taken to date**	**Action to be taken**	**Target date**	**Responsible Person(s)**	**Expected Outcome (including monitoring arrangements)**
	Discriminate?	**Eliminate discrimination or promote equality?**	**Promote good relations between groups?**					
Disability	No	No	No					
Sex	No	No	No					
Gender Reassignment	No	No	No					
Race / Ethnicity	No	No	No					
Religion /Belief	No	No	No					
Sexual orientation	No	No	No					
Age	No	No	No					
Marriage and CP	No	No	No					
Pregnancy & Maternity	No	No	No					
Human Rights	No	No	No					

Equality Analysis: Equality and Diversity Lead sign off			
Signed	Nikki Kriel – Organisational Development Manager	**Date**	29/11/18