

Tees, Esk and Wear Valleys



NHS Foundation Trust

**EDS2
2018**

making a

difference

together

List of contacts for consultation with EDS2

Following consultation with the Healthwatch leads a questionnaire was developed for use by organisations and individuals who had knowledge of our services, asking them for feedback on the service focused sections of EDS2(1 and 2). These were sent to the following organisations.

Local Authority E&D contacts

Kirsty.McNally@sunderland.gov.uk

Erik.Scollay@middlesbrough.gov.uk

Satnam.singh@stockton.gov.uk

Claire.holt@durham.gov.uk

Mary.gallagher@durham.gov.uk

Helen.whiting@darlington.gov.uk

Catherine.Grimwood@hartlepool.gov.uk

Healthwatch

Natasha Judge M/bro +Redcar

Julia Catherall – County Durham

Sian Balsam – York

Nigel Ayre – North Yorkshire

Diane Lax – Darlington

Stephen Thomas – Hartlepool

Toni McHale – Stockton

Lesley Pratt – York

RACE

Shazia Noor NUR Fitness

LGBT

Jake Furby – YorkLGBTForum@gmail.com

TRANSAWARE

clevelandtransaware@gmail.com

York Consultation for EDS2

Joseph Rowntree Foundation

Healthwatch (York)

CONSULTATION PROCESS

- 1 The consultation process is also provided as part of the evidence submitted for EDS2 document. Evidence was gained from a cross locality World Mental Health day where the general public were asked to complete a survey. Voices for Choices (local charitable organisation) disseminated to the groups they facilitate. Local Healthwatch groups were accessed in their

monthly TEWV meeting and agreed to circulate it within their E-Bulletins. Local authorities were sent the survey monkey link to fill in and send back. There was a paper survey and a Survey monkey available for people to dispatch to the groups that they consult around local mental health and learning disability services with.

2. The EDS2 document itself has presented particular difficulties with gathering feedback on the proposed grading. The EDS2 guidance suggests that a consultation on the proposed grading takes place with users of the trust's services. This has posed particular difficulties for a mental health and learning disability trust when compared to an acute or ambulance trust, as a much smaller proportion of the general public have used our services.
3. Healthwatch representatives felt they could not complete the survey from a service perspective and preferred to send it for public consultation via a questionnaire on survey monkey. However, this has only yielded 3 completed surveys.
4. Local authority representatives have not completed the survey, with no feedback from them it is difficult to ascertain why.
5. In addition a number of organisations with whom the trust has done work to access particular protected groups were approached for feedback.

EQUALITY DELIVERY SYSTEM FOR THE NHS ED2S SUMMARY REPORT

Implementation of the Equality Delivery System – EDS2 is a requirement on both NHS commissioners and NHS providers. Organisations are encouraged to follow the implementation of EDS2 in accordance with the 9 steps for EDS2 Implementation as outlined in the 2013 EDS2 guidance document. The document can be found at: <http://www.england.nhs.uk/wp-content/uploads/2013/11eds-nov131.pdf>.

The EDS2 Summary Report is designed to give an overview of the organisation’s most recent EDS2 implementation. It is recommended that once completed, this Summary Report is published on the organisation’s website.

NHS Organisation name:	Tees, Esk and Wear NHS Foundation Trust
Organisation’s Board lead for EDS2:	David Levy, Director of Human Resources and Organisational Development
Organisation’s EDS2 lead (name/email):	Sarah Jay, Equality and Diversity Lead. Email: sarahjay@nhs.net
Level of stakeholder involvement in EDS2 grading and subsequent actions:	The Trust has consulted on its grading with local Health Watch, members of the public, representatives of protected groups, local authorities around the region and the trust’s JCC
Organisation’s Equality Objectives (including duration period):	<p>The objectives described below form part of a four year Equality, Diversity and Human Rights (EDHR) Strategy. Each objective is accompanied by a set of actions that can be found in the EDHR annual work plan.</p> <p>The Durham and Darlington overall objective is: To raise staff awareness of autism and to improve service provision and encourage effective multi agency holistic provision for people with autism of all ages and abilities in Co. Durham and Darlington 2016 – 2020. This objective was subsumed by the trust wide autism project and has been replaced by a new objective. Equality Objective 2017 - 2020 To continue to ensure that the principles of Green Light are embedded in services. Links to EDS outcomes 1.1, 1.2, 2.1 and 2.3 Focus on: Disability and age</p>

The York and Selby overall objective is:

Working with partners to improve access and experience of mental health services for students and young people (16 – 25) in York and Selby.

Progress: The locality has made good progress with this equality objective, evidence of which was provided to the EDHR steering group, and is to continue work on the objective for the period 2017 – 2020.

Links to EDS outcomes 1.1, 1.2, 2.1 and 2.3 Focus on age and mental health

The Forensic services objectives are:

Forensic services objective 1: Continue the work with LGB and T patients that was commenced after the CQC visit in July 2014.

Objective 2: Review the support for women who are on maternity leave.

Progress: Both these objectives were completed in 2016/17, detailed evidence of which was provided to the EDHR steering group.

Equality Objectives 2017/2020

Objective 1 To improve the support for staff who are on extended forms of planned maternity / paternity / adoption leave.

Objective 2 Consider in line with Service user requests on how to celebrate diversity within the service.

Objective 3 To provide clarity on the role and function of the E & D Champions within the service.

Link to EDS outcomes 1.1, 1.2, 2.1 and 2.3

The Teesside objectives are:

Objective 1

To continue implementation of the Green light audit in adult services, building on the work carried out last year and completing the self-assessment. The actions will be to undertake the Green light self-assessment audit tool and move from red to amber categories in all areas that relate to TEWV. Focus on Learning Disability, Mental Health. Link to EDS outcomes 1.1, 1.2, 1.4, 1.5, 2.2 and 2.3

Objective 2

To ensure access to mental health services for refugees and asylum seekers on Teesside particularly in adult services and in children's teams. Progress: Objective 2 was completed in 2016/17, detailed evidence of which was provided to the EDHR steering group. It has been replaced by Under/ Over - Represented Communities. Based upon the information identified from analysis of our data, we will attempt to explore the reasons for the under/over representation of particular BAME communities within our services. This may involve utilising a Community development approach to review experience of our services for those communities, and identify remedial actions that we may need to take to support access and retention for people to achieve successful outcomes. This will include a review of how well our workforce reflects the ethnic make-up of the communities that we serve. Levels of access to health provision for BAME communities is identified as an area of focus in forthcoming CQC work programmes. Further discussion is required with colleagues in Tees to identify whether this will be addressed Locality-wide.

EDS outcomes 1.1, 1.2, 1.4, 1.5, 2.2 and 2.3.

The North Yorkshire objective is:

To better understand the mental health needs of the farming communities in North Yorkshire and where appropriate take action to improve and increase access to services. EDS outcomes 1.1, 1.2, 2.1 and 2.3.

Focus on: gender (sex) and rural communities

The Trust Wide Workforce objective is:

To undertake research to better understand the causes of any differences where staff who share similar characteristics report lower levels of satisfaction in either the staff friends and family test or the staff survey and to take steps to reduce or eliminate any lower levels of satisfaction EDS outcomes 3.4, 3.6, 4.1, 4.2 and 4.3. Focus on: Race, disability, religion or belief and sexual orientation

Headline good practice examples of EDS2 outcomes (for patients/community/workforce):

The Equality, Diversity and Human Rights Steering Group

The group meets every quarter to progress the Trusts Equality and Human Rights work. Members of the group include senior clinical representatives from the services, corporate service leads, service users' representatives and a designated Governor. The steering group is chaired by the Director of Human Resources and Organisational Development (HROD). The deputy chairs are the Deputy Director of HROD and the Equality, Diversity and Human Rights Lead.

The Trust has a designated Equality, Diversity and Human Rights Team. The team focuses on delivering on the legislative requirements of the equality act 2010 by taking these principles and putting them into practice across TEWV services and in employment. The team also works with policy and service leads to conduct equality analyses on all new and reviewed policies - this is to ensure that the Trusts impact on equality is well considered before decisions are made.

Green Lights Initiative

The Trust has invested a considerable amount of resource into the Green Lights initiative over the past 4 years. The initiative which comes from The Foundation for People with Learning Disabilities aims to improve mental health care for people with learning disabilities, ensuring that each person has access to appropriate care.

BAME Dementia Awareness

Work has been taking place with South Asian communities across Stockton and Middlesbrough to raise awareness on dementia and dementia services. TEWV Mental Health Services for Older People have appeared on local community radio and have been engaging with community groups to discuss how the Trust can support in a positive, non-intrusive way that respects cultural diversity.

Forensic Services - Support for LGB&T service users

Work began three years ago and looked at how Forensic Services could better engage with service users who identify as LGB&T. This work is

set to continue over the next three years and includes engaging with and meeting the needs of service users who identify as trans (transgender) and looking at how the Trust can best meet the needs of LGB&T people in times of distress and/or mental ill health.

British Institute of Human Rights - Project Partner

Delivering Compassionate Care: Connecting Human Rights to the Front-line is an exciting new initiative that was launched in 2014 by the British Institute of Human Rights, supported by the Department of Health. This project was developed in the wake of recent failures of care and seeks to place human rights at the heart of mental health services, helping to ensure front-line staff are empowered to fulfil the vital role they can play in respecting and protecting the dignity and human rights of patients.

The Trust has now completed the three year project and being a part of this has led to some exciting new developments such as the inclusion of Human Rights in mandatory E and D training and an increased awareness across the Trust of Human Rights Principles and Practices and how these impact on the delivery of mental health and learning disability care.

Compassionate Management Project

Compassion, sensitivity to the suffering and needs of ourselves and others, accompanied by a commitment to alleviate and prevent this in a wise way, is key in innovation, performance and leadership. With a focus on quality patient-centred care and staff wellbeing, compassion is key to all we do as a Trust so by placing compassion central to all, together we can further build safe places to work and flourish; compassion also helps us to perform well in our roles, adapt to pressures and ultimately create better outcomes and experiences for the people who use our services. The first stage of the project was delivered to over 200 senior clinical leads working in adult mental health services.

Going forward, the compassionate management project will be expanded across all specialties and into corporate services. It is hoped that the project contributes to a positive culture by working together with other project leads and directors.

Disability Access Checks

The Health and Safety Team carry out routine checks that are aimed at identifying and removing barriers to access for people who have disabilities. This followed a successful pilot project which helped the Trust to identify barriers that are often not seen and can be missed by people who do not have a disability.

ARCH Recovery College

The Trust has an established recovery college in Durham. In York, the Discovery Hub is a TEWV service which works closely with Converge, a Recovery College hosted by York St. John University. The recovery college provides education and support for service users and their carers who want to learn more about mental health. The college is currently seeking to work in partnership with Mind to establish Recovery Colleges in Teesside and are working with voluntary sector providers in Scarborough to establish a pilot there. The Trust has established a Virtual College and has been available since November 2016.

Trust Experts by experience

The Trust works in collaboration and co-production with service users. The Experts are a group of people who have accessed or are currently accessing Trust services. Their experiences ensure that the Trust considers a wide range of viewpoints and perspectives. Trust Experts also have access to a wide range of developmental opportunities including Leadership Training and volunteering opportunities which can, and has helped some Experts to secure paid employment in the Trust.

The Diversity Engagement Group (DEG)

Staff who identify with the protected groups can access the DEG for support. The group also works with the Trust to help it develop more as an inclusive employer. Staff who access the DEG include: staff who identify as BAME, LGB&T, staff who have a religious or philosophical belief and physical disability. The group meets bi-monthly and have been involved in providing ideas for scenarios that feature in the equality, diversity and human rights training. The group is also involved in working with the deputy director of HR and the Equality, Diversity and Human Rights Lead to understand the analysis of the staff and patient 'Friends and Family Test' outcomes.

Trust Membership Team

The Trust has been working to ensure that its membership is representative and in December 2015 undertook a campaign to recruit public members of the Foundation Trust across York and Selby following the transfer of services in that area. In addition to this, through the project additional members were recruited in Harrogate and Wetherby and Hambleton and Richmondshire with a total of 750 members recruited over the 2 weeks of the face to face campaign.

The membership of the Trust as at 31 March 2017 was representative of the local community.

In November 2015 the Council of Governors approved an Involvement and Engagement Framework which outlined the Trusts intentions to involve and engage with service users and carers in the development and delivery of our services through recognising the critical importance of working in partnership with the users of our services and their carers to design and deliver high quality person centred services which promotes recovery.

Some of the valuable work undertaken through involvement activities have included:

- Recruiting staff including medical and nursing positions with in excess of 50 interview panels including a service user or carer.
- Training a range of nursing students, doctors and those staff undertaking NVQ qualifications.
- Participating in a range of inspections of wards and working environments under Patient Led Assessment of the Care Environment (PLACE) and internal inspections against the Care Quality commission (CQC) Fundamental Standards.

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- Participating in service user and advocate leadership training which provides a mechanism for self-development and confidence building.
 - Assisting in the planning and delivery of conferences, sharing experiences and views.
 - Assisting the Trust with plans to become smoke free.
 - Joining a number of formal meeting groups contributing to the assurance of quality and safety of services.
 - Significant work in looking at force reduction with service users using their own experiences to change culture and approaches.
 - A number of service users joining the experts by experience programme and assisting the Trust to embed recovery principles in all aspects of work.
 - Employment of two experts by experience coordinators (previous attendees of the experts by experience programme).
 - Development of 14 involvement peer roles within the organisations working alongside staff in the delivery of care and support.

The NHS Staff Friends and Family Test

Kerry Jones, the lead for the NHS staff Friends and Family Test is working with the Trust Equality, Diversity and Human Rights Team to ensure that the Trust has access to accurate information about the experiences of people from different protected groups.

Goal	Outcome	Grade and Reason for rating		Outcome links to an Equality Objective
Services are commissioned, procured, designed and delivered to meet the health needs of local communities.				
Better health outcomes.	1.1	Grade Undeveloped <input type="checkbox"/> Developing <input type="checkbox"/> Achieving <input checked="" type="checkbox"/> Excelling <input type="checkbox"/>	Which characteristics fare well Age <input checked="" type="checkbox"/> Disability <input checked="" type="checkbox"/> Gender reassignment <input type="checkbox"/> Marriage and civil partnership <input checked="" type="checkbox"/> Pregnancy and maternity <input type="checkbox"/> Race <input checked="" type="checkbox"/> Religion or belief <input checked="" type="checkbox"/> Sex <input checked="" type="checkbox"/> Sexual orientation <input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
<p>Evidence drawn upon for rating</p> <p>Our approach The Trust is a ‘provider’ of Mental Health and Learning Disability services. Our services are provided based on the requirements set out by commissioners. These criteria and provisions are regularly reviewed and revised to ensure that they continue to meet people’s needs.</p> <p>Services commissioned by Clinical Commissioning Groups (CCGs) are managed on a geographical basis in four localities covering, Durham and Darlington; Teesside; North Yorkshire and York and Selby.</p>				

There is also a Trust-wide Locality for Forensic Services. Each is led by a Director of Operations and a Deputy Medical Director who report to the Chief Operating Officer.

Further to this we:

- Have a mix of corporate and service driven Equality Objectives which are reviewed every 4 years
- Have an Equality and Human Rights Annual Work Plan to support ongoing and new work
- A dedicated Equality, Diversity and Human Rights Team that provide advice, support and guidance for staff working in services to ensure that service users' needs are met.
- We produce an Annual Publication of Equality Information in line with legislative requirements
- Have a successful Equality, Diversity and Human Rights Steering Group which meets quarterly, produces an agenda, minutes, matters arising and associated actions
- Our staff also conduct equality analyses on all ratified documents and during service design to ensure effective and accessible services. We have an Equality Analysis policy, guidance and screening form. Equality Analyses are carried out on all TEWV Policies, procedures, strategies and there is a procurement screening process in place
- Hold regular Trust Board Seminars that focus on equality, diversity and human rights
- Work in partnership with the British Institute of Human Rights
- Carry out Disability Access Checks and Reasonable Adjustments where needed to ensure that people with a wide range of disabilities are able to access our services in the same way as non-disabled people
- Have a successful and accessible interpreting and translation service which includes British Sign Language to support our Deaf Communities throughout the region
- Have refreshed our Mandatory Equality, Diversity and Human Rights Training to ensure it is current and progressive
- Deliver Unconscious Bias, bullying, harassment and discrimination new session on personal effectiveness course (PEP) and Leadership and Management Course (LAMD)
- We produce Equality Data for services so that they can meet the needs of people accessing their services. We also look at which groups are not accessing services by comparing our data with the local data from the national census

We publish the following information in line with government requirements, including:

- Trust Business Plan 2016 - 2019
- Trust Annual Report 2016 - 2017
- Trust Quality Account 2016 – 2017
- Trust Quality Strategy 2014 - 2019

We have improved our Patient Care Record System (PARIS) in our equality data fields to allow for more accurate recording of protected characteristic information for service users

Patient experience and NHS Friends and family survey results are accessible to all staff and displayed in clinical areas, comments are made available for teams to view.

The NHS Patient Friends and Family Test results (FFT) for assessment and treatment areas and recovery areas form part of CQUIN reports. NHS FFT information is available for in-patient areas and feedback from Data Governance reports

Equality, Diversity and Human Rights are also discussed and minuted at:

- Executive Management Team meeting agenda/minutes
- QuAC and QuAG meeting agenda/minutes
- Locality Management and governance Board meeting agenda/minutes
- CQC inspection, reports and feedback (Trust rated good)
- Pals and complaints
- Datix incidents – We receive electronic notification of any incident involving patient to staff / staff to patient / visitor to staff etc. in relation to discrimination and harassment
- Kaizen Project Office - Agenda for planning meetings, patient questionnaires
- Meeting peoples specific needs is part of the Clinical pathway patient engagement standards

We have worked with CDDFT Procurement team to ensure equality was included within the Invitation to Tender (ITT) and Terms & Conditions

All Project Management forms are embedded with Equality Analysis Screening Form others include where relevant:

- Service specifications and building plans
- CQRG Reports
- EMT Reports
- Serious untoward incidents action plans

Some recent positive improvements relating to Equality, Diversity and Human Rights include the:

- Admission, Transfer and Discharge of service users within hospital and residential settings Policy
- Harm minimisation Project and Training
- Positive Approach Project and training

Better health outcomes		Individual people's health needs are assessed and met in appropriate and effective ways	Outcome links to an objective	
	1.2	<p>Grade</p> <p>Undeveloped <input type="checkbox"/></p> <p>Developing <input type="checkbox"/></p> <p>Achieving <input checked="" type="checkbox"/></p> <p>Excelling <input type="checkbox"/></p>	Which characteristics fare well	
			<p>Age <input checked="" type="checkbox"/></p> <p>Disability <input checked="" type="checkbox"/></p> <p>Gender reassignment <input type="checkbox"/></p> <p>Marriage and civil partnership <input checked="" type="checkbox"/></p>	<p>Pregnancy and maternity <input type="checkbox"/></p> <p>Race <input checked="" type="checkbox"/></p> <p>Religion or belief <input checked="" type="checkbox"/></p> <p>Sex <input checked="" type="checkbox"/></p> <p>Sexual orientation <input checked="" type="checkbox"/></p>
			<input checked="" type="checkbox"/>	

Evidence drawn upon for rating

As 1.1 +

Our approach:

Because our services are provided to people with different and complex needs, health needs are assessed and met in a number of different ways and tailored to the individual. Our patient and record information system 'PARIS' ensures that there is a standardised process for assessment and care planning. Service users and their carers are actively involved in this process either in their family home and/or within an inpatient setting.

Social services, public health and local authorities work alongside staff and service users have access to full multi-disciplinary teams. Individual care plans are completed and are a reflection of how needs are to be met. Teams have information about a range of health and social care services that may provide additional support to individual care plans.

The Trust is a registered provider of services within the Care Quality Commissions framework and a range of outcomes set by the CQC are fully complied with. In relation to patient experience the Trust gathers feedback including demographic information from service users and carers via electronic hand held devices and kiosks.

There are a range of accessible information leaflets. There are CQC Inspections and 'mock CQC Inspections' as a way of the Trust assuring itself that standards are being met. Patients and their carers attend individual reviews and are supported to share their views on services.

The Trust also uses the NHS friends and family test to ensure that levels of patient satisfaction remain high. This can now be broken down by the protected groups which means we can see if there are differences in experience for patients from particular protected groups.

We carry out thorough 'mock CQC Inspections' as a way of assuring ourselves those standards are being met

We host Diversity Champions training with master classes held on LGB&T awareness, Disability, Race and Ethnicity, Unconscious Bias, bullying harassment and discrimination and Gender awareness.

We produce leaflets for service users and carers on 'How we make sure you are treated fairly' and 'Human Rights – Speaking up for myself' in plain English and easy read

We also have access to patient data by protected group

	<p>The Equality, Diversity and Human Rights Lead reports to the Quality Assurance Committee and the Executive Management team providing information and recommendations</p> <p>We have a dedicated advanced nurse practitioner for the deaf</p> <p>The Trust has a multi faith Chaplaincy Team, and has developed a 'Spirituality flower' and staff resources to support people from different faith groups and people who want to explore and know more about spirituality</p> <p>We produce a quarterly magazine called Insight which included many equality and diversity themes</p> <p>We have an internal e-bulletin news articles, InTouch (intranet) articles and Equality and Diversity Pages that staff can access for information, support and signposting</p> <p>We have embedded the Care Programme Approach and Standard Care Policy and Framework into service delivery.</p> <p>We have a current physical health care project – linked 'Reducing Premature Mortality for those with Serious Mental Illness</p> <p>We continue our work in the Green Lights project - access to mental health care for people with learning disabilities</p>
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Better health outcomes	Transitions from one service to another, for people on care pathways, are made smoothly with everyone well-informed			Outcome links to an objective
	1.3	Grade Undeveloped <input type="checkbox"/> Developing <input type="checkbox"/> Achieving <input checked="" type="checkbox"/> Excelling <input type="checkbox"/>	Which characteristics fare well Age <input checked="" type="checkbox"/> Disability <input checked="" type="checkbox"/> Gender reassignment <input type="checkbox"/> Marriage and civil partnership <input checked="" type="checkbox"/> Pregnancy and maternity <input type="checkbox"/> Race <input checked="" type="checkbox"/> Religion or belief <input checked="" type="checkbox"/> Sex <input checked="" type="checkbox"/> Sexual orientation <input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
<p>Evidence drawn upon for rating</p> <p>As 1.1 and 1.2 + We have protocols in place to ensure that transitions between our services are smooth and efficient. E.G. Transfer of Care from Child and Adolescent to Adult Services Protocol and Clinical Pathways</p>				

Better health outcomes	When people use NHS services their safety is prioritised and they are free from mistakes, mistreatment and abuse			
	1.4	<p>Grade</p> <p>Undeveloped <input type="checkbox"/></p> <p>Developing <input type="checkbox"/></p> <p>Achieving <input checked="" type="checkbox"/></p> <p>Excelling <input type="checkbox"/></p>	<p>Which characteristics fare well</p> <p>Age <input checked="" type="checkbox"/></p> <p>Disability <input checked="" type="checkbox"/></p> <p>Gender reassignment <input type="checkbox"/></p> <p>Marriage and civil partnership <input checked="" type="checkbox"/></p>	
<p>Evidence drawn upon for rating</p> <p>As 1.1, 1.2 and 1.3 + Our approach: The Trust has a number of ways of ensuring that people’s safety is prioritised. Assurance processes are inclusive of all protected groups and action is taken and lessons learned when a negative impact is identified.</p> <p>Quality Assurance Committees (QuAC) The Quality and Assurance Committee (QuAC) has the key purpose of providing assurance to the Board of Directors and Council of Governors on the quality and safety of the operational clinical services as outlined in the Quality Strategy.</p> <p>Divisional Quality and Assurance Groups (QuAg) The prime purpose of the Divisional Quality and Assurance Groups is the development of quality within the specialty that is</p>				

covered by the Divisional QuAG. The main role of the Senior Clinical Director is therefore to develop and support the specialty's quality development agenda. The Divisional QuAG provides the "thought" leadership for each specialty promoting a positive, patient focused culture. The Divisional QuAG develops standards of best practise, informed for example by lessons learned by SUIs, patient experience reports, benchmarking etc. They have responsibility for analysing new national policies and strategies that will be relevant, for example National Dementia Strategy, National Autism Strategy etc. and to provide advice to the Trust on the implications of new national policies and strategies and what action the Trust should be taking.

Our suite of policies, processes and procedures includes:

- Incident Reporting and Investigation Policy
- Incident Procedure Manual
- Datix (incident reporting system) and SBARDS – Briefings re serious incidents
- Information Security and Risk Policy
- Clinical Safeguarding Adults Protocol
- Clinical Safeguarding Children Policy
- Clinical Child Visiting Policy
- Clinical MAPPA Protocol
- Clinical Risk Assessment and Management Policy
- Clinical Engagement and Observation Procedure
- Raising Serious Concerns and Whistleblowing Procedure
- TEWV Nursing Strategy
- Clinical Practice Policies, Procedures and protocols
- Training and registration of Nurses and allied professionals
- Mandatory Training
- Clinical audit
- CQC inspections and mock CQC inspections
- Health and Safety audits
- Security Procedure
- Training and registration of Nurses and allied professionals
- Health and Safety audits and disability access checks
- Whistle blowing policy
- Induction and training registers
- Lessons learned bulletin, project forms and action plan database
- Commissioner Quality review Group (CQRG) report (outlining how many actions completed).

Better health outcomes, continued	Screening, vaccination and other health promotion services reach and benefit all local communities			Outcome links to an objective
	1.5	Grade Undeveloped <input type="checkbox"/> Developing <input type="checkbox"/> Achieving <input checked="" type="checkbox"/> Excelling <input type="checkbox"/>	Which characteristics fare well Age <input checked="" type="checkbox"/> Disability <input checked="" type="checkbox"/> Gender reassignment <input type="checkbox"/> Marriage and civil partnership <input checked="" type="checkbox"/> Pregnancy and maternity <input type="checkbox"/> Race <input checked="" type="checkbox"/> Religion or belief <input checked="" type="checkbox"/> Sex <input checked="" type="checkbox"/> Sexual orientation <input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
<p>Evidence drawn upon for rating</p> <p>As 1.1, 1.2, 1.3, and 1.4 + We ensure that all service users have access to Flu vaccinations and we monitor take up. We issue resource packs that are available for staff to use with people with learning disabilities so that all are fully informed about their choices and understand the health screening processes. We provide support to primary care regarding understanding of screening procedures to inform capacity decisions. We ensure that all our service users have an understanding of the benefits of exercise and healthy eating. Many of our inpatient hospitals have gyms and staff that are trained in physical education, some services cook meals with service users (dependent on need) to enable them to continue to eat healthily once they leave hospital. We have a highly successful smoking cessation programme.</p>				

Improved patient access and experience	People, carers and communities can readily access hospital, community health or primary care services and should not be denied access on unreasonable grounds			Outcome links to an objective										
	2.1	Grade Undeveloped <input type="checkbox"/> Developing <input type="checkbox"/> Achieving <input checked="" type="checkbox"/> Excelling <input type="checkbox"/>	Which characteristics fare well <table border="0"> <tr> <td data-bbox="958 411 1400 518">Age <input checked="" type="checkbox"/></td> <td data-bbox="1406 411 1816 518">Pregnancy and maternity <input type="checkbox"/></td> </tr> <tr> <td data-bbox="958 528 1400 635">Disability <input checked="" type="checkbox"/></td> <td data-bbox="1406 528 1816 635">Race <input checked="" type="checkbox"/></td> </tr> <tr> <td data-bbox="958 644 1400 751">Gender reassignment <input type="checkbox"/></td> <td data-bbox="1406 644 1816 751">Religion or belief <input checked="" type="checkbox"/></td> </tr> <tr> <td data-bbox="958 761 1400 868">Marriage and civil partnership <input checked="" type="checkbox"/></td> <td data-bbox="1406 761 1816 868">Sex <input checked="" type="checkbox"/></td> </tr> <tr> <td></td> <td data-bbox="1406 877 1816 975">Sexual orientation <input checked="" type="checkbox"/></td> </tr> </table>	Age <input checked="" type="checkbox"/>	Pregnancy and maternity <input type="checkbox"/>	Disability <input checked="" type="checkbox"/>	Race <input checked="" type="checkbox"/>	Gender reassignment <input type="checkbox"/>	Religion or belief <input checked="" type="checkbox"/>	Marriage and civil partnership <input checked="" type="checkbox"/>	Sex <input checked="" type="checkbox"/>		Sexual orientation <input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
Age <input checked="" type="checkbox"/>	Pregnancy and maternity <input type="checkbox"/>													
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Gender reassignment <input type="checkbox"/>	Religion or belief <input checked="" type="checkbox"/>													
Marriage and civil partnership <input checked="" type="checkbox"/>	Sex <input checked="" type="checkbox"/>													
	Sexual orientation <input checked="" type="checkbox"/>													
<p>Evidence drawn upon for rating</p> <p>As 1.1, 1.2, 1.3, 1.4 and 1.5+</p> <p>The Trust would not deny anyone access to its services, however on some occasions it may be appropriate for a person to be referred to another service if it is felt that their needs would be better met by another provider e.g. primary care services.</p> <p>The Trust also looks at access for older people and people with disabilities. We completed disability access checks on our hospital and in our out-patients settings. If we identify an issue or a potential issue we ensure that the barrier (e.g. a very heavy door or lack of clear signage) is removed, improved or that there is a reasonable adjustment in place for people who otherwise may struggle to use the service. We want everyone to benefit from our services. On occasion we find that we cannot make modifications to all our sites (listed buildings etc.). When this happens alternative arrangements are made such as home visits or</p>														

visits in a local G.P surgery if the person does not want their appointment at home.

Our equality, diversity and Human rights team is on hand to ensure that staff can ask questions about access needs and this often leads to service improvements.

People access our services in a number of ways, including:

- GP referral
- Improving Access to Psychological Therapies referral – people can self-refer into our IAPT services and a referral may sometimes be made. Please note we are not the provider of IAPT services in Teesside
- A person may be picked up by police under Section 136 of the Mental Health Act
- The Police may request street triage, we attend and an admission or referral is made
- Our crisis team attend an incident and an admission or referral is made if appropriate.
- A person may present at A&E and the liaison team see them and recommend admission or a referral
- Social services may make a referral

Improved patient access and experience		People are informed and supported to be as involved as they wish to be in decisions about their care		Outcome links to an objective										
	2.2	<p>Grade</p> <p>Undeveloped <input type="checkbox"/></p> <p>Developing <input type="checkbox"/></p> <p>Achieving <input checked="" type="checkbox"/></p> <p>Excelling <input type="checkbox"/></p>	<p>Which characteristics fare well</p> <table border="1"> <tr> <td data-bbox="956 391 1400 502">Age <input checked="" type="checkbox"/></td> <td data-bbox="1404 391 1821 502">Pregnancy and maternity <input type="checkbox"/></td> </tr> <tr> <td data-bbox="956 505 1400 617">Disability <input checked="" type="checkbox"/></td> <td data-bbox="1404 505 1821 617">Race <input checked="" type="checkbox"/></td> </tr> <tr> <td data-bbox="956 620 1400 732">Gender reassignment <input type="checkbox"/></td> <td data-bbox="1404 620 1821 732">Religion or belief <input checked="" type="checkbox"/></td> </tr> <tr> <td data-bbox="956 735 1400 847">Marriage and civil partnership <input checked="" type="checkbox"/></td> <td data-bbox="1404 735 1821 847">Sex <input checked="" type="checkbox"/></td> </tr> <tr> <td></td> <td data-bbox="1404 850 1821 962">Sexual orientation <input checked="" type="checkbox"/></td> </tr> </table>	Age <input checked="" type="checkbox"/>	Pregnancy and maternity <input type="checkbox"/>	Disability <input checked="" type="checkbox"/>	Race <input checked="" type="checkbox"/>	Gender reassignment <input type="checkbox"/>	Religion or belief <input checked="" type="checkbox"/>	Marriage and civil partnership <input checked="" type="checkbox"/>	Sex <input checked="" type="checkbox"/>		Sexual orientation <input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
Age <input checked="" type="checkbox"/>	Pregnancy and maternity <input type="checkbox"/>													
Disability <input checked="" type="checkbox"/>	Race <input checked="" type="checkbox"/>													
Gender reassignment <input type="checkbox"/>	Religion or belief <input checked="" type="checkbox"/>													
Marriage and civil partnership <input checked="" type="checkbox"/>	Sex <input checked="" type="checkbox"/>													
	Sexual orientation <input checked="" type="checkbox"/>													
<p>Evidence drawn upon for rating</p> <p>As 1.1, 1.2, 1.3, 1.4 , 1.5 and 2.1 + Our approach: Care planning supports service users to engage with clinical staff and discuss what will happen should they become unwell. Information Governance</p> <p>The Trust's Information Governance Policy pulls together the complex law relating to keeping people's confidential information safe. Confidentiality and information sharing guidance describes how the Trust discusses with services users the choices they have around how their information is used. It further describes how the Trust meets the needs of services users during the times they lack capacity to make decisions about their information. The Records Management Policy defines the competencies of staff who deal with patient information and the processes that are followed to keep patient information safe.</p>														

All policy and procedure documents undergo an equality analysis which includes consultation with groups that include people (staff, patients, carers, support groups etc.) from across the protected groups. The consultation process is identified on the equality analysis. Full consultation with staff ensures that people from all the protected groups have an opportunity to raise concerns regarding the content of policy documents and any negative impact, or the impact of the service they apply to, would have or does have on them. Consultation with patients and carers enables the considerations of those with particular needs to be met.

Accessible Patient Information

All our patient information has Information Standard accreditation www.theinformationstandard.org/members this includes a plain English certification. Information is also available in a number of different formats. The Mental Health Act Team has information available about people's rights in a number of different languages and has recently published leaflets in easy read. The Information Governance Team has leaflets in the Trusts core languages and other languages are available when a need is identified. Pharmacy services provide information about medication choice and medication which is available in different languages and formats. Information is also available on our website at <http://www.tewv.nhs.uk/medication> there are different styles of leaflets and an audio facility.

The Mental Health Act (MHA) Team

The MHA allows certain decisions to be made about treatment for mental health conditions when a person is detained under the Act. In general a person can make their own decisions about their care or treatment, and that is as true of a person who has a mental ill health as it is of anyone else. The Mental Capacity Act (MCA) protects the right of people to make their own decisions, and provides a framework for assisting people to make their own decisions and authorises a decision that is in the best interests of a person where that person lacks the capacity to make a particular decision, due to a disturbance in the functioning of their mind or brain. The MCA allows a person to make statements of preference and advance refusals of treatment should they lose the capacity to make a particular decision in the future.

Patient and Carer Involvement

The Patient and Carer Involvement (PCI) Team implements the 'Triangle of Care' Document's six key elements to ensure carers have appropriate support and information that meets their needs. This involves working with external Carer Support Organisations to involve them with our inpatient and community teams. The PCI team support service users and their carers to be involved with the Trust. This includes a service user 'reader's panel' which is managed by the PCI team, further supporting the Trust to produce information that is accessible to all protected groups.

Supporting people to be involved in decisions about their care

Service users are involved in the process of assessing their needs, care planning and review in order to meet their needs through

	<p>a standardised process that is documented on PARIS. Care Programme Approach processes may also be used .When decisions are made they are done in full consultation with the patient their carer and/or their advocate. Where the person lacks capacity to make certain decisions then it is done either through a 'best interest decision' or through the Court of Protection. Where major decisions are to be made about lifestyle an Independent Mental Capacity Advocate could be appointed by commissioners/care management</p>
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		People report positive experiences in the NHS		Outcome links to an objective	
Improved patient access and experience	2.3	Grade	Which characteristics fare well		<input checked="" type="checkbox"/>
		Undeveloped <input type="checkbox"/> Developing <input type="checkbox"/> Achieving <input checked="" type="checkbox"/> Excelling <input type="checkbox"/>	Age <input checked="" type="checkbox"/> Disability <input checked="" type="checkbox"/> Gender reassignment <input type="checkbox"/> Marriage and civil partnership <input type="checkbox"/>	Pregnancy and maternity <input type="checkbox"/> Race <input checked="" type="checkbox"/> Religion or belief <input checked="" type="checkbox"/> Sex <input checked="" type="checkbox"/> Sexual orientation <input checked="" type="checkbox"/>	
<p>Evidence drawn upon for rating</p> <p>As 1.1, 1.2, 1.3, 1.4 , 1.5, 2.1, 2.2 + The Trust has a number of ways of monitoring the experiences of people who identify with protected groups who access Trust services. The Trust analyses the experiences of service users from different protected groups using the patient Friends and Family Test.</p>					

		People's complaints about services are handled respectfully and efficiently		Outcome links to an objective	
Improved patient access and experience	2.4	Grade	Which characteristics fare well		<input checked="" type="checkbox"/>
		Undeveloped <input type="checkbox"/> Developing <input type="checkbox"/> Achieving <input checked="" type="checkbox"/> Excelling <input type="checkbox"/>	Age <input checked="" type="checkbox"/> Disability <input checked="" type="checkbox"/> Gender reassignment <input type="checkbox"/> Marriage and civil partnership <input type="checkbox"/>	Pregnancy and maternity <input type="checkbox"/> Race <input checked="" type="checkbox"/> Religion or belief <input checked="" type="checkbox"/> Sex <input checked="" type="checkbox"/> Sexual orientation <input checked="" type="checkbox"/>	
<p>Evidence drawn upon for rating</p> <p>As 1.1, 1.2, 1.3, 1.4 , 1.5, 2.1, 2.2 , 2.3 + Complaints are handled within agreed timescales, involving the complainant as far as possible. Complainants are regularly updated regarding progress.</p> <p>Patient views are regularly sought by use of questionnaires and internal inspections. There is a PALS helpline available with free phone number and facility for mobile/text contacts. All issues raised including those relating to equality are forwarded to operational services and specialist services are informed where necessary.</p> <p>The Patient and Carer involvement Team undertake inspections, visits and interview panels with the assistance of patients and carers.</p>					

Datix Incident Reporting and Monitoring

Datix is the trust's incident reporting system. When Trust staff are involved in or witness an incident, a Datix incident report is completed so that the incident can be investigated. Datix is widely used across the NHS for incident reporting. Logged incidents of a discriminatory nature are instantly viewable to all the departments who need to know about them, including the equality and diversity lead. Datix allows the Trust to identify problems and patterns quickly, so that the trust can act on them in a timely way.

Communications Team

Service users, families and carers sometimes submit complaints via the tewv.enquiries@nhs.net (trust generic) email address. These are acknowledged on the same working day and passed through to the correct department. The sender is also informed about which the correct department is should they wish to contact them directly.

		Fair NHS recruitment and selection processes lead to a more representative workforce at all levels		Outcome links to an objective	
A representative and supported workforce	3.1	Grade Undeveloped <input type="checkbox"/> Developing <input checked="" type="checkbox"/> Achieving <input type="checkbox"/> Excelling <input type="checkbox"/>	Which protected characteristics fare well		<input checked="" type="checkbox"/>
			Age <input checked="" type="checkbox"/> Disability <input type="checkbox"/> Gender reassignment <input type="checkbox"/> Marriage and civil partnership <input checked="" type="checkbox"/>	Pregnancy and maternity <input type="checkbox"/> Race <input type="checkbox"/> Religion or belief <input checked="" type="checkbox"/> Sex <input checked="" type="checkbox"/> Sexual orientation <input checked="" type="checkbox"/>	
<p>Evidence drawn upon for rating</p> <p>The Trust strives to ensure that its recruitment and selection processes are fair and lead to a representative workforce. We encourage and recognise the business benefits of having a diverse workforce that can meet the challenges of delivering person centred care to our communities.</p> <p>We also recognise that diversity should be encouraged at every level in both clinical and corporate services. We know that a more diverse workforce and diverse leadership enables us to be even more innovative, creative and solution focused.</p> <p>We also monitor staff experience through the NHS Staff Survey and the NHS Friends and Family Test. We are able to review</p>					

staff experiences which in turn enables us to be an inclusive employer. Although we have BAME staff that are representative of our community these are mainly doctors and are not evenly distributed throughout all levels of the organisation. We believe disability is under reported on ESR (electronic staff record) so we are unable to ascertain how representative we are of our community in regards to this characteristic.

Sources of evidence include:

- Annual workforce monitoring and analysis
- NHS Jobs captures monitoring information for all applicants
- Equal pay audit
- Equality and diversity mandatory training compliance rate
- NHS Staff survey medium term analysis, associated corporate and local action planning
- Increased use of service users and carers in the recruitment process
- Evaluation of a process to recruit staff who exhibit positive value based behaviours
- WRES and associated action plans 2017 - 18
- Disability confident action plan 2017 - 18

		The NHS is committed to equal pay for work of equal value and expects employers to use equal pay audits to help fulfil their legal obligations		Outcome links to an objective	
A representative and supported workforce	3.2	Grade	Which protected characteristics fare well		<input checked="" type="checkbox"/>
		Undeveloped <input type="checkbox"/> Developing <input checked="" type="checkbox"/> Achieving <input type="checkbox"/> Excelling <input type="checkbox"/>	Age <input checked="" type="checkbox"/> Disability <input type="checkbox"/> Gender reassignment <input checked="" type="checkbox"/> Marriage and civil partnership <input type="checkbox"/>	Pregnancy and maternity <input type="checkbox"/> Race <input type="checkbox"/> Religion or belief <input checked="" type="checkbox"/> Sex <input checked="" type="checkbox"/> Sexual orientation <input checked="" type="checkbox"/>	
<p>Evidence drawn upon for rating</p> <p>As 3.1 + The Trust has carried out an equal pay audit and will continue to ensure that people are paid fairly and in line legislative requirements. Sources of evidence:</p> <ul style="list-style-type: none"> • Annual workforce monitoring and analysis • NHS Jobs captures monitoring information for all applicants • Equal pay audit 					

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| | <ul style="list-style-type: none">• Equality and diversity mandatory training compliance rate• NHS Staff survey medium term analysis, associated corporate and local action planning• Increased use of service users and cares in the recruitment process• Evaluation of a process to recruit staff who exhibit positive value based behaviours |
|--|--|

		Training and development opportunities are taken up and positively evaluated by all staff		Outcome links to an objective	
A representative and supported workforce	3.3	Grade	Which protected characteristics fare well		<input checked="" type="checkbox"/>
		Undeveloped <input type="checkbox"/> Developing <input checked="" type="checkbox"/> Achieving <input type="checkbox"/> Excelling <input type="checkbox"/>	Age <input checked="" type="checkbox"/> Disability <input type="checkbox"/> Gender reassignment <input type="checkbox"/> Marriage and civil partnership <input checked="" type="checkbox"/>	Pregnancy and maternity <input type="checkbox"/> Race <input type="checkbox"/> Religion or belief <input checked="" type="checkbox"/> Sex <input checked="" type="checkbox"/> Sexual orientation <input checked="" type="checkbox"/>	
<p>Evidence drawn upon for rating</p> <p>As 3.1 and 3.2 + The Trust recognises the value of training and staff having access to development opportunities, but more than that we want our staff to have a positive experience whilst receiving training.</p> <p>We have been reviewing our training and looking at how we can improve the style and delivery of the training.</p> <p>We need to be able to balance the need to provide our staff with training that enables them to do their job to a high standard,</p>					

whilst considering staffing levels on wards and in operational offices. We are looking at modernising the way in which mandatory training is delivered and we are currently considering the use of webinar and other media.

This means that staff will be travelling less, able to sit at a desk with a computer near to where they work and receive on-line training with a trainer who can connect to staff that are located anywhere within the Trust. Staff can make a drink, have their training and then return to work which means they are out of the ward/office for less time but still receive high quality training.

We are also reviewing the way we deliver e-learning.

Sources of evidence:

- Annual workforce monitoring and analysis
- Mandatory training compliance rate
- Appraisal audits
- NHS Staff survey medium term analysis, associated corporate and local action planning
- Training evaluation and Trainer assessment
- The trust has concerns about its BAME and disabled staff's access to training and development and promotion as indicated in its WRES action plan and disability confident action plan.

		When at work, staff are free from abuse, harassment, bullying and violence from any source		Outcome links to an objective	
A representative and supported workforce	3.4	Grade	Which protected characteristics fare well		<input checked="" type="checkbox"/>
		Undeveloped <input type="checkbox"/> Developing <input checked="" type="checkbox"/> Achieving <input type="checkbox"/> Excelling <input type="checkbox"/>	Age <input checked="" type="checkbox"/> Disability <input type="checkbox"/> Gender reassignment <input type="checkbox"/> Marriage and civil partnership <input checked="" type="checkbox"/>	Pregnancy and maternity <input type="checkbox"/> Race <input type="checkbox"/> Religion or belief <input checked="" type="checkbox"/> Sex <input checked="" type="checkbox"/> Sexual orientation <input checked="" type="checkbox"/>	
<p>Evidence drawn upon for rating</p> <p>As 3.1, 3.2 and 3.3 + The Trust understands the impact of abusive behaviours and how they can impact on patient care and human rights. We saw how this behaviour resulted in the investigation and subsequent public inquiry at Mid Staffordshire NHS Foundation Trust.</p> <p>We are working to ensure that no one is bullied, harassed or discriminated against. An example of this is that we have reviewed our Equality, Diversity and Human Rights Training to include further information about what these behaviours are and how they could manifest either at work or in the delivery of services.</p>					

There is now a Trust 'speak up champion' and first contact officers that our staff can access to discuss issues at work or workplace behaviours that are affecting them. The trust recognises that its BAME staff experience higher levels of abuse than its white staff and is taking action to address this as part of the WRES and related action plan 2017/18. The trust is currently developing a bullying and harassment resolution procedure which will be in place by April 2018.

Sources of evidence:

- NHS Jobs captures monitoring information for all applicants
- Annual workforce monitoring and analysis
- Equality, Diversity and Human Rights training
- NHS Staff survey medium term analysis, associated corporate and local action planning
- Established a Trust reference group
- Whistleblowing and raising serious concerns procedure
- Datix incident reporting procedure, follow up processes and monitoring
- Grievance procedure
- Disciplinary procedure
- Confidential support line
- Employee support officers
- Staff Retreats

		Flexible working options are available to all staff consistent with the needs of the service and the way people lead their lives		Outcome links to an objective	
A representative and supported workforce	3.5	Grade	Which protected characteristics fare well		<input checked="" type="checkbox"/>
		Undeveloped <input type="checkbox"/> Developing <input checked="" type="checkbox"/> Achieving <input type="checkbox"/> Excelling <input type="checkbox"/>	Age <input checked="" type="checkbox"/> Disability <input type="checkbox"/> Gender reassignment <input type="checkbox"/> Marriage and civil partnership <input checked="" type="checkbox"/>	Pregnancy and maternity <input type="checkbox"/> Race <input type="checkbox"/> Religion or belief <input checked="" type="checkbox"/> Sex <input checked="" type="checkbox"/> Sexual orientation <input checked="" type="checkbox"/>	
<p>Evidence drawn upon for rating</p> <p>As 3.1, 3.2, 3.3 and 3.4 + We offer a range of flexible working opportunities that are balanced and in line with service requirements.</p> <p>We also recognise that more than ever people want the benefits of balancing work and life. We offer a wide range of employment opportunities to suit everyone. Many of our most skilled and experienced clinicians and corporate staff are electing to work flexibly as they near retirement or work beyond their retirement.</p>					

This has benefits for the Trust and for the staff member. We are able to retain their knowledge and skills, whilst they are able to enjoy the benefits of reduced working hours/days whilst being valued for their expertise. The Trust is seeking to improve the experience of staff with disabilities and their access to a range of reasonable adjustments. This is addressed in the Disability Confident workplan

Sources of evidence:

- Developed material to support managers who have staff that may require adjustments to be made to the normal working environment
- NHS Jobs captures monitoring information for all applicants
- Annual workforce monitoring and analysis
- NHS Staff survey medium term analysis, associated corporate and local action planning
- Grievance procedure
- Employee support officers
- Retreats
- Flexible working procedure
- Flexible retirement options
- Option for staff to increase annual leave allowance
- Staff Rostering policy

		Staff report positive experiences of their membership of the workforce		Outcome links to an objective	
A representative and supported workforce	3.6	Grade	Which protected characteristics fare well		<input checked="" type="checkbox"/>
		Undeveloped <input type="checkbox"/> Developing <input checked="" type="checkbox"/> Achieving <input type="checkbox"/> Excelling <input type="checkbox"/>	Age <input checked="" type="checkbox"/> Disability <input type="checkbox"/> Gender reassignment <input type="checkbox"/> Marriage and civil partnership <input checked="" type="checkbox"/>	Pregnancy and maternity <input type="checkbox"/> Race <input type="checkbox"/> Religion or belief <input checked="" type="checkbox"/> Sex <input checked="" type="checkbox"/> Sexual orientation <input checked="" type="checkbox"/>	
<p>Evidence drawn upon for rating</p> <p>As 3.1, 3.2, 3.3, 3.4 and 3.5 + The Trust has attained the 'Investors on People - Gold' level standard which we believe demonstrates our commitment to staff. We also monitor the experiences of staff using a variety of different means.</p> <p>We want our staff to know how much they are valued and that they have a stake in the direction of the Trust and its values.</p> <p>Sources of evidence:</p> <ul style="list-style-type: none"> • NHS Jobs captures monitoring information for all applicants • Annual workforce monitoring and analysis 					

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| <ul style="list-style-type: none">• Equality, Diversity and Human Rights training• NHS Staff survey medium term analysis, associated corporate and local action planning• Quarterly friends and family test and analysis, associated action planning• Established a Trust reference group• Whistleblowing and raising serious concerns procedure• Datix incident reporting procedure, follow up processes and monitoring• Grievance procedure• Disciplinary procedure• Confidential support line• Employee support officer• Staff Retreats• NHS Staff Friends and Family Test• Investors in People Gold• Research to better understand issues for BAME, disabled and LGB staff• The Trust recognises that there is a difference in experience and outcome for its BAME and disabled staff. It is addressing this issue in its WRES action plan and Disability Confident Action plan. |
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		Boards and senior leaders routinely demonstrate their commitment to promoting equality within and beyond their organisations		Outcome links to an objective	
Inclusive leadership	4.1	Grade	Which protected characteristics fare well		<input checked="" type="checkbox"/>
		Undeveloped <input type="checkbox"/> Developing <input checked="" type="checkbox"/> Achieving <input type="checkbox"/> Excelling <input type="checkbox"/>	Age <input checked="" type="checkbox"/> Disability <input type="checkbox"/> Gender reassignment <input type="checkbox"/> Marriage and civil partnership <input checked="" type="checkbox"/>	Pregnancy and maternity <input type="checkbox"/> Race <input type="checkbox"/> Religion or belief <input checked="" type="checkbox"/> Sex <input checked="" type="checkbox"/> Sexual orientation <input checked="" type="checkbox"/>	
<p>Evidence drawn upon for rating</p> <p>The Trust Board of Directors has ratified and approved all equality and human rights processes and protocols that the Equality, Diversity and Human Rights Team have requested. We believe that this shows a genuine commitment to ensuring that the Trust promotes equality within the organisation. All formal papers within the trust require the completion of a section on equality and diversity however the trust feels that it could improve the quality of these.</p> <p>Equality and Human Rights are standard items at the Quality and Assurance Group and the Director of Human Resources and Organisational Development attends this meeting to ensure that the Trust is aware of its legislative duty to promote, foster and eliminate discrimination in employment and service delivery.</p>					

Beyond the Trust, the Equality, Diversity and Human Rights Lead and Officer regularly attend a monthly regional meeting where ideas and best practice are shared and discussed.

Many senior clinical and corporate managers in the Trust are 'Diversity Champions' and attend regular master classes on a range of equality and human rights issues.

Sources of evidence:

- Equality analysis policy and guidance
- Associated library of equality analyses
- Interpreting and translation policy and guidance
- Dress code policy
- Project management framework
- Equality, Diversity and Human Rights Steering Group minutes
- Various articles of Trust board or EMT supporting equality related activity

		Papers that come before the Board and other major Committees identify equality-related impacts including risks, and say how these risks are to be managed			Outcome links to an objective
Inclusive leadership	4.2	Which protected characteristics fare well			<input checked="" type="checkbox"/>
		Grade Undeveloped <input type="checkbox"/> Developing <input checked="" type="checkbox"/> Achieving <input type="checkbox"/> Excelling <input type="checkbox"/>	Age <input checked="" type="checkbox"/> Disability <input type="checkbox"/> Gender reassignment <input type="checkbox"/> Marriage and civil partnership <input checked="" type="checkbox"/>	Pregnancy and maternity <input checked="" type="checkbox"/> Race <input type="checkbox"/> Religion or belief <input checked="" type="checkbox"/> Sex <input checked="" type="checkbox"/> Sexual orientation	
<p>Evidence drawn upon for rating</p> <p>The Trust has a ratified and established Equality analysis policy, guidance, screening form. Recently the equality analysis proforma has been included in all templates for policy writers including the policy template, the guidance template and the procedure and protocol templates.</p> <p>We felt it was essential for staff to understand that equality analysis is part of the policy writing process. Equality analyses are also carried out on Trust projects, and service developments.</p> <p>The Trust also has equality and human rights included in the report template so that staff are able to say within the report that</p>					

equality or human rights are a factor in their considerations.

The Equality, Diversity and Human Rights Lead also reports to the Executive Management Team twice a year and as often as required.

Although the standard reporting document is used for all such committees which include a standard paragraph on equality and diversity issues the trust considers that the quality of these could be improved.

		Middle managers and other line managers support their staff to work in culturally competent ways within a work environment free from discrimination		Outcome links to an objective
Inclusive leadership	4.3	<p>Grade</p> <p>Undeveloped <input type="checkbox"/></p> <p>Developing <input checked="" type="checkbox"/></p> <p>Achieving <input type="checkbox"/></p> <p>Excelling <input type="checkbox"/></p>	<p>Which protected characteristics fare well</p> <p>Age <input checked="" type="checkbox"/></p> <p>Disability <input type="checkbox"/></p> <p>Gender reassignment <input type="checkbox"/></p> <p>Marriage and civil partnership <input checked="" type="checkbox"/></p> <p>Pregnancy and maternity <input checked="" type="checkbox"/></p> <p>Race <input type="checkbox"/></p> <p>Religion or belief <input checked="" type="checkbox"/></p> <p>Sex <input checked="" type="checkbox"/></p> <p>Sexual orientation <input type="checkbox"/></p>	<input checked="" type="checkbox"/>
<p>Evidence drawn upon for rating</p> <p>There is support available for new and existing managers. We make sure that all our managers receive the same mandatory training as non-managerial staff so that they are able to see what staff can expect from them.</p> <p>We also run courses on managing and the recruitment process which includes equality and diversity within them. The Leadership and Management Course we host, now includes a session on unconscious bias, bullying harassment and discrimination.</p> <p>Sources of evidence:</p>				

- Developed material to support managers who have staff that may require adjustments to be made to the normal working environment
- Annual workforce monitoring and analysis
- Equality and diversity training compliance rates
- Trust Values training
- Productive conversations training
- Leadership and management development programme
- NHS Staff survey medium term analysis, associated corporate and local action planning
- Trust reference group
- Appraisal audits
- Developed and piloted a process to recruit staff who exhibit positive value based behaviours
- Increased use of service users and carers in the recruitment process
- Whistleblowing and raising serious concerns procedure
- Datix incident reporting procedure, follow up processes and monitoring
- Grievance procedure
- Disciplinary procedure
- Employee support officers
- Staff Retreats
- Staff Mindfulness Courses
- Human Rights, Equality and Diversity Policy
- Reasonable Adjustments Toolkit
- Policy and Equality Analysis Audit
- WRES and Disability confident action plans