



Equality Objectives 2016-17

Completion report



Equality Objectives 2016-17 – Completion report

The Trust's Equality Objectives 2016-17 were developed based on the information in our published equality monitoring reports in respect of patient services and workforce, from engagement with our stakeholders including patients, staff and staff side representatives, and with reference to the NHS Equality Delivery System 2 goals and outcomes.

Objectives 1, 2 and 3 were developed in respect of our patient services and objectives 4 and 5 in respect of our workforce.

Progress on the patient services objectives was formally reported to the Patient Experience Committee, while progress on the workforce objectives was formally reported to the Staff Forum, including the trade unions. Progress on all five objectives was also formally reported to the Capital and Workforce Planning Committee.

Appendix I reports progress on the five objectives.

New Trust equality objectives from 2017 are published separately.

Jo Ann Hughes
Future Workforce Engagement & Inclusion Manager
May 2017



Appendix I Equality Objectives 2016-17 – progress/completion report

| | Equality objective | Actions and timescales | Progress at March 2017 |
|----|---|---|---|
| 1. | To enhance the experience of vulnerable patients, with disabilities in addition to their cancer diagnosis, with provision of personalised and accessible information. | <ul style="list-style-type: none"> Establish and implement a consistent approach to identifying, recording, flagging, sharing and meeting the communication support needs of patients and carers, where those needs relate to a disability or impairment. <p>By 31 July 2016</p> | <ul style="list-style-type: none"> Multi-disciplinary implementation team established from Jan 2016. Detailed action plan progressed for identification, recording and flagging in electronic patient systems, meeting and sharing of individual communication needs. New policy, staff guidance and intranet page delivered Training delivered to key staff groups Trial on Endocrinology prior to launch Multi-disciplinary team continuing to monitor implementation through 2017. |
| 2. | To develop local procedures which continue to improve safe discharge arrangements for our patients through specific and targeted changes. | <p>To develop local procedures and protocols that continue to improve discharge arrangements through specific and targeted changes:</p> <ul style="list-style-type: none"> Providing expected date of discharge to patients, to set expectation and facilitate appropriate discharge planning Assessment of complex discharge patients prior to admission | <p>Pilot planned date of discharge posted in patient room in two wards in July 2016; later rolled out to all clinical inpatient areas, with the exception of the Palatine Ward. In addition to planned date of discharge being given to the patient, nurse responsible for patient tasked with amending and updating planned date of discharge, which was then communicated to the patient.</p> <p>This worked in conjunction with the weekly meeting of ward coordinators with the complex discharge team to discuss ways of meeting planned date of discharge for those patients with</p> |

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| | | By March 2017 | the longest length of stay. Work underway to remodel existing pathway that assesses all patients in an outpatient setting and identified complex discharge needs, as well as their psycho-social needs. |
| 3. | To assess of the appropriateness of a self-management application (app) for our patients with prostate cancer. | <ul style="list-style-type: none"> • Trial self-management application (app) for patients with prostate cancer. • Report on uptake and usage of self-management application, lessons learned and next steps <p>By March 2017</p> | App designed with input from clinicians and patients. Trialled with patients with feedback from patients and clinicians. Mixed reviews on the benefits provided by this app so future of the app is unclear, but learning integrated into future developments. |
| 4. | To continue to mainstream mechanisms for staff to confidently raise concerns at work, including any concerns of harassment or bullying. | <ol style="list-style-type: none"> 1. Through the 'One Week All Staff' engagement plans, seek to further understand staff experience in reporting concerns. 2. Appoint to new post of Freedom To Speak Up Guardian. 3. Develop targeted action plans to support staff in reporting concerns. <p>By March 2017</p> | <ol style="list-style-type: none"> 1. Engagement Raising concerns at work plans - progress report to Staff Forum in April 2016. Respect at Work policy audit reported to Staff Forum in September 2016. Informal discussion with staff side colleagues in November 2016. 2. Freedom to Speak Up Guardian appointed September 16. Promoted in team brief, posters, attendance at team meetings. 3. Staff awareness – essential training The Respect at Work policy, harassment and bullying behaviours, the informal and formal routes for raising a complaint and how a complaint is managed were explained in the Equality, Diversity and Human Rights combined essential training event for all staff. Staff also able to access this training via an e-learning module. |

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| | | | <p>Staff Adviser Network New promotional posters and leaflets developed, which were shared across divisions, in staff Health & Wellbeing event and team brief. Staff Advisers intranet page revised.</p> <p>Briefing for managers and staff Managers issued with information to brief staff on how to raise concerns at local team meetings. Managers issued with information on managing concerns effectively. Revised Skills for Managers development programme focuses on management skills and how to deal with concerns effectively.</p> |
| 5. | To demonstrate progress against indicators within the NHS Workforce Race Equality Standard (WRES). | <ol style="list-style-type: none"> 1. 2016 (second) report of data in respect of WRES indicators to be published by August 16. 2. To improve the relative likelihood of BME and White staff being equally appointed from shortlisting. A review of Trust recruitment processes will include a representative for the Chief Executive will take part in all selection panels for posts at Band 8+ as a guardian of good practice. 3. To improve the relative likelihood of that BME and White staff consider equally that the Trust provides equal opportunities for career progression or promotion. A review of the Trust Performance Development Review process to include career development and how the individual might approach this. <p>By March 2017</p> | <ol style="list-style-type: none"> 1. WRES report reported on Trust website and submitted to WRES Implementation Team. 2. Review of Trust recruitment processes included implementation of plan to ensure a representative for the Chief Executive on panels. 3. Review of Performance Development Review (PDR) process completed and new materials posted on PDR intranet page which include promoting discussion on providing opportunities for development to support in current role and future career progression. |