

Complete/ Ongoing
In progress/partially complete
Incomplete / overdue

Equality and Diversity Action Plan 2014-2018
(Reviewed and Updated June 2014)

Objective (EDS outcome / link to Equality Objective)	Desired Outcome / Measure of Success	Progress	Action	Lead	Target / Review Date	RAG rating	Line reference number
Compliance with the General and Specific Duties of the Public Sector Equality Duty (PSED)	Governance systems in place to clearly demonstrate compliance with General Duty.	Equality, Diversity and Human Rights Committee oversees equality work. This group reports the Workforce and Organisational Development Committee. Programme for equality and diversity mandatory training in place.	<ul style="list-style-type: none"> Ongoing (each quarter) Further increase compliance rates 	Executive team /ED Manager	June 2014	Complete	1
	Publication of a robust and comprehensive annual Workforce diversity report	Diversity trends for training, promotions, leavers, disciplinary, recruitment and grievance were reported in 2013-2014	<ul style="list-style-type: none"> Compile and publish report 	ED Officer	July 2014	Incomplete	2
			<ul style="list-style-type: none"> Increase reporting for flexible working requests (relevant for the protected characteristic of pregnancy and maternity) – work with Human Resource (HR) to improve processes 	ED Officer	November 2014	In progress	3
	Robust tool available for equality analysis to enable identification and management of equality risks	Equality Analysis Procedure (EAP) was launched in December 2013 and provides clearer, simpler and more relevant process to identify and manage equality risks	<ul style="list-style-type: none"> Take further steps to simplify the process Develop guidance documents that allow effective use of EAP Consult with external expertise to ensure tool is robust but also user friendly Benchmark with other organisations Develop training programme for key managers (senior and departmental) 	ED Officer	September 2014	In progress	4
The Trusts are committed to eliminating discrimination and advancing equality through the implementation of the Equality Delivery System (EDS)	Evaluation of the 4 EDS goals and the 18 outcomes is undertaken annually.	Trusts hosted annual public engagement event to grade equality performance and set objectives for financial year 2013/2014.	<ul style="list-style-type: none"> Collate evidence for EDS and produce report following May 2014 engagement event Survey for staff to be developed to obtain evidence of workforce equality issues 	ED Manager	July 2014	Complete	
	EDS is mainstreamed across both Trusts	Both Trusts use EDS as the mechanism for advancing equality. EDS is mainstreamed into existing governance structures (i.e. reported and monitored through Patient Experience and community partnerships Committee and Engagement and Experience Committee)	<ul style="list-style-type: none"> EDS implementation to added as regular agenda item for both Workforce and Education Committee and Patient Experience and community partnerships 	ED Manager	September 2014	Complete	
	EDS is used as a mechanism for genuine and sustained engagement with staff, the local community and disadvantaged groups.	EDS is used appropriately as a framework for engagement and grading our performance. Relationships built with diverse stakeholders across the voluntary and community sector.	<ul style="list-style-type: none"> Engage with 'seldom heard' / disadvantaged groups (e.g. refugees, Gypsies and Travellers) Continue to build relationships with existing stakeholders 	ED Manager	Ongoing	In progress	
Benchmark best practice with other Trusts and external organisations. Developments exceed, or are at least comparable to, other local organisations with similar demographic.	Local and regional benchmarking – Learning and best practice taken from other Trusts and external organisations by attendance at local and regional events.	ED team attend regular meetings with other NHS organisations in the South West	<ul style="list-style-type: none"> Meet with North, West and East Devon Clinical Commissioning Group (CCG) to obtain learning from their participation Stonewall diversity champions programme Continue to work in partnership with Torbay and South Devon CCG Continue to meet regularly with South West 	ED Manager	September 2014 & ongoing	Complete	

			E&D Leads. • Submit best practice to NHS England Equality and Health Inequalities team				
	National benchmarking – Learning and best practice taken from NHS system leaders (NHS England Equality and Health Inequalities team, NHS Leadership Academy, NHS Employers)	ED team attended the launch of EDS2. ED Manager meets regularly with, NHS Leadership Academy, NHS England National Equalities Team, Third Sector conferences etc	• Review in 6 months • Attend regional and national (where possible) EDS forums	ED Manager	December 2014		
Goal 1 – Better Health Outcomes (patient focused goal)							
Public actively use available opportunities to influence and be involved in the design, delivery and monitoring of health services (outcome 1.1)	Public representation at Trust network groups/forums, particularly from protected characteristic groups, holds to account decision-making and provides constructive challenge to the design and delivery of services.	Public and some LIGs attend E&D groups. The public are able to attend Board meetings.	• Support the ‘Working with Us Panel’ members from diverse backgrounds to enable a culture of inclusion • Encourage diverse groups to attend Board meetings through engagement with a wide range of stakeholders • Develop mechanisms to appropriately engage different LIGs (e.g. focus groups) • Establish equality reference group (virtual) from relationships built with LIGs to act as forum for involvement	ED Manager / Patient Experience Lead	May 2014		
	Foundation Trust (FT) members profiled to ensure representative of the population profile.	Steps have been taken to diversify Foundation Trust membership. ED manager presented about diversifying FT membership at Mutual Development Group (MDG) – Sub-group of the Council of Governors with a remit for FT membership.	• Recruit diverse members at public and patient equality engagement event in May 2014 • Attend members meeting to raise awareness	ED Manager	May 2014		
Services are commissioned, procured, designed and delivered to meet the health needs of local communities (outcome 1.1). Health inequalities data and patient experience data are collected and used for evidence-based strategy and policy decisions (Equality Objective 1)	The Trust is knowledgeable about the health and inequalities experienced by different equality groups. Knowledge of health inequalities is shared between the Trusts and partner organisations	Trust working with ‘Bay6’ homeless project to improve health outcomes for those who are, or are at risk of becoming, homeless. NHS Equality Diversity and Human Rights week is championed by the Trust and a programme of activities was delivered focusing on health inequalities	• Continue to promote ‘Bay6’ homeless project to patients • Include process for homeless patients in the Trust’s discharge policy • Support the Torbay Health and Well-Being Board • Work with Healthwatch to identify data from the community well-being hub when set up	Executive Directors / ED Manager	Ongoing		
	Use of local Census data and health inequalities data and research is interpreted, analysed and used.	Census (2011) and health inequalities data is used to inform comparisons with the staff representation of the Trust	• Identify relevant health inequalities data sets and research • Ensure research and data is included as evidence in Equality Impact Assessments	ED Manager / Departmental and Service managers	Ongoing		
	Health inequalities are communicated to staff at all levels in the most effective way. Health inequalities remains high profile in ED communication activities	Health inequalities information and data have been published on social media at key events	• Presentation to be delivered to several staff groups to raise awareness • Health inequalities to be discussed at all ED events • Raise awareness at Trust induction and mandatory training • Doug Haines to present at PFD session	ED Manager	Ongoing		

			<ul style="list-style-type: none"> Integrate health inequalities into corporate induction and other training (e.g. PFD network groups) 				
	Reasonable adjustments are considered where necessary.	<p>Double appointments are available for those that need it (for example people with a dementia)</p> <p>Use of 'all about me' profiles and hospital passport for people different requirements</p>	<ul style="list-style-type: none"> Steps to be taken to implement the full range of reasonable adjustments (including the Mencap 'getting it right charter' for people with learning disabilities) Improve IT systems for recording 	Director of Nursing / ED Manager	September 2014		
	Technology is used to appropriately communicate health messages to different audiences	Hiblio live streaming is in the testing stage. Hiblio offers opportunities for health information to be communicated in interesting and informative ways	<ul style="list-style-type: none"> Equality Impact Assessment to be conducted for Hiblio programme Ensure that Hiblio live streaming incorporates 'easy watch' programmes Development of further Hiblio equality and diversity films Use of social media (especially Twitter) to tailor health messages to different groups 	Head of Digital Services	September 2014		
	Understand the diversity profile of patients and experience of services from patient experience surveys and Friends and Family Test (FFT).	<p>Patient equality monitoring pilot commenced February '14. Data is linked to patient surveys and national organisations such as NHS England</p> <p>Meeting taken place with Devon Referral Support Service (DRSS) (supports the GP referral process for outpatient appointments). Agreement to start a pilot to capture patient translation/ interpretation requirements</p>	<ul style="list-style-type: none"> Await refreshed Department of Health guidance regarding ED questions in patient FFT Ensure data has value by linking to patient experience (before FFT guidance is refreshed) Work with IT to ensure accurate and timely reports on project outcomes are produced Test equality monitoring pilot in another department Monitor outcomes of DRSS pilot 	Patient Experience Manager / ED Officer	September 2014		
Individual people's health needs are assessed and met in appropriate and effective ways (outcome 1.2)	Compliance with the Deprivation of Liberty Safeguards(DoLS) amendment to the Mental Capacity Act	Compliant with Deprivation of Liberty Safeguards	<ul style="list-style-type: none"> Review annually Share best practice from the British Institute of Human Rights in relation to the practical application of Human Rights law to health and care settings (particularly around the Mental Capacity Act) Integrate human rights into MCA training 	Director of Nursing	Ongoing (next review April 2015)		
	People's dietary requirements and choices are catered for	Diverse food menus are in place providing foods according to differing physical, religious and cultural needs.	<ul style="list-style-type: none"> Ranges and meals to suit vegetarian, kosher, halal, vegan, gluten-free etc dietary requirements. Meals can be reviewed on an individual basis. Learning Disability Partnership Board sub-group focusing on the production of easy-read (including menus) E&D training delivered to mealtime companion volunteers 	Catering Manager / ED Officer	Sept 2014		
	People's religious and spiritual needs are met	<p>Provide a quiet room for anyone to use in their own way for reflection or prayer</p> <p>Diversity Calendar published on the staff intranet which highlights cultural and religious festivals</p> <p>Religious, spiritual, pastoral and cultural patient care</p>	<ul style="list-style-type: none"> Diversity calendar to be regularly updated Aim to develop webpage to recognise and promote diverse range of festivals. Revise and refresh the guide for staff in providing the religious, spiritual, pastoral and cultural care SwiftPlus boards to show necessary 	Equality and Diversity Assistant	September 2014		

		guide is available for staff The Quiet Room refurbished 2013 to ensure it is more welcoming for all faiths as well as non-faith and spiritual requirements	requirements				
Transitions from one service to another, for people on care pathways, are made smoothly with everyone well-informed (outcome 1.3)	Ensure that people from PCs experience smooth transitions	Transitions for LIGs are prioritised. They include older people and people that misuse drugs and alcohol.	<ul style="list-style-type: none"> Data to be collected from one aspect of a protected characteristic to inform understanding of whether transition is smooth for one particular service 	ED Officer	September 2014		
	Patients, carers and professionals are kept informed of what is happening	Patient survey and WWU panel survey suggest people are kept well-informed. 73% felt involved in discharge decisions (national inpatient survey 2013)	<ul style="list-style-type: none"> Investigate the use of 'talk back' approach to communication Midwives and health visitors, Women's, Children's, Diagnostics and Therapies (WCDT) division operations managers 	ED Officer	October 2014		
When people use NHS services their safety is prioritised and they are free from mistakes, mistreatment and abuse (outcome 1.4)	People from PCs and disadvantaged groups have safety outcomes are proportionate to that of the general population / health inequalities are reduced	<p>SwiftPlus boards are used to identify patients with specific needs</p> <p>The patient safety team have identified 3 priorities for older people:</p> <ul style="list-style-type: none"> Falls; Pressure ulcers; and Malnutrition <p>Patient information leaflets for medicines are available in large print and easy read</p>	<ul style="list-style-type: none"> Number of people with learning disabilities using services is reported. Outpatient department experience to be investigated Contact incident reporting lead to investigate safety performance for people from protected characteristic groups 	ED Manager	October 2014		
	Particular attention is placed on areas patient safety areas that disproportionately affect PC groups (such as catheter care, nutrition, hydration and medicines)	TBC	<ul style="list-style-type: none"> TBC 	ED Officer	TBC		
Screening, vaccination and other health promotion services reach and benefit all local communities (outcome 1.5)	Preventative screening programmes reach all relevant protected characteristics and disadvantaged groups.	Abdominal Aortic Aneurysm (AAA) screening has comprehensive ED action plan in place to target disadvantaged groups	<ul style="list-style-type: none"> Other screening services, such as diabetic retinal screening, to put plans in place to reach disadvantaged groups Investigate the experience of screening for people with a learning disability Liaise with other screening leads to develop awareness of the needs of relevant groups (e.g. Gypsies and Travellers) 	ED Manager	September 2014 July 2014		
	Range of cancer screening programmes services reach all relevant protected characteristic and disadvantaged groups	TBC	<ul style="list-style-type: none"> TBC 	Screening Programme Managers	TBC		

	The Trusts work with Torbay Council and Devon County Council Public Health teams to support health needs assessments, outcome reporting to highlight best practice and support commissioning	Trusts involved in LGBT Health Needs Assessment led by Devon County Council Public Health team	<ul style="list-style-type: none"> Attend LGBT needs assessment working group session Having an effective drugs and alcohol patient pathway is a priority for the Integrated Care Organisation (ICO) – ensure healthy lifestyles and prevention is at the core of the pathway 	ED Manager	September 2014		
	Prevention and cessation programmes (e.g. Torbay Stop smoking campaign) reach and benefit all communities	Specialist support is available for women that are pregnant, people with a mental health condition and people with learning disabilities	<ul style="list-style-type: none"> Provide support to black and minority ethnic (BME) service users Monitor outcomes by protected characteristics 	ED Manager	December 2014		
Goal 2 – Improved patient access and experience (patient-focused goal)							
Ensure services are physically accessible for all (i.e. people with physical / sensory disabilities) (outcome 2.1)	All people can access buildings, there is knowledge of and compliance with the Equality Act (2010) and best practice	Estates work plan (2013/2014) complete and considerable improvements made across the site. £250K worth of upgrades to site accessibility. Priorities were ramps, handrails and hearing induction loops, proposed toilet hoist for outpatients. Access to accessible toilets improved in Out Patient Department as part of refurbishment November 2013. Self-book-in also now available in Outpatients. No money this financial year designated specifically for Equality Act works	<ul style="list-style-type: none"> Estates work plan to be reviewed annually 	Director of Estates	Ongoing Review annually (next review July 2014)		
	Equality Analysis Procedures carried out (involving service users as / when required) and action points monitored. Full Equality Impact Assessments are published publically as appropriate.	Estates and Facilities Management department (EFM) perform EAP for all new builds, refurbishments, capital projects in line with Building regulations. EAP incorporated into EFM procedures Compliance with disability discrimination guidance (site completed 250K upgrade over 2013 financial year)	<ul style="list-style-type: none"> Full Equality Impact Assessments to be shared with other directorates Key strategies and policies to be audited. 'Observations of care' to be conducted to ensure patient environment is appropriate for different groups 	ED Officer Departmental / service managers	Ongoing (next review November 2014)		
	Staff have knowledge of support available to people with hearing loss	Positive feedback from patients and staff report positively about systems Modifications have been made to site buildings to increase accessibility to hearing loops- this information is communicated to staff through practice manager and staff training	<ul style="list-style-type: none"> Incorporate hearing loops into mandatory ED training Put boxes into patient areas for hearing loops Raise awareness of hearing machines available to departments Raise awareness of hearing loops 	ED Officer	September 2014 November 2014		
	Staff have knowledge of support available to people with visual impairment	Low Vision group has been established to share best practice and information	<ul style="list-style-type: none"> Low Vision group to form a sub-group of the wider disability group with clear lines of accountability developed Remit of Low Vision group to be changed to focus on actions and outcomes as opposed to information sharing Visit Jasmine House (community resource hub for people with visual impairment) 	ED Manager	September 2014		

	All signage in the hospital is appropriate and inclusive	<p>Patients report positively on accessibility of site and are able to navigate.</p> <p>New external and internal signage in place in 2013. Community-led disability group (Disability Awareness and Action Group) has reported satisfaction with new signage Review annually at the DAAG.</p>	<ul style="list-style-type: none"> Ensure all new signage is inclusive Organise site tour to understand access requirements for disabilities other than physical 	Director of Estates	Ongoing (next review December 2014)		
	There are an adequate number of disabled parking spaces which are compliant with legislation. Patients report positively on availability of appropriate spaces.	<p>Car Parking policy being reviewed March 2014. Circa 400 new spaces to be created with appropriate allocations for further disabled spaces.</p> <p>Already more disabled spaces available on site the required minimum</p> <p>ED manager a member of both staff and patient car parking group</p>	<ul style="list-style-type: none"> Work with the General Services department to ensure car parking allocations plans are as inclusive and meet the needs of different patients (e.g. the creation of parent and child spaces, drop-off points for carers) Ensure that disabled spaces are prioritised in the continued development of the Estates master plan Ensure service user feedback from car parking systems is incorporated into decision-making (e.g. height of pay-on-exit machines) 	Head of Facilities / ED Manager	October 2014		
Information and communication for all patients and service users is in the most appropriate format to enable understanding (outcome 2.1)	Reasonable adjustments are adequately made for people with communication difficulties. (This includes, but not limited to, people with cognitive impairment, people with learning disabilities, people that speak English as a second language.)	<p>Details available for staff on website on how to produce patient information – considers a variety of impairments.</p> <p>Easy-Read project underway.</p> <p>The ED team work closely with SPOT (Speaking Out Torbay) and TCN (Total Communication Now).</p>	<ul style="list-style-type: none"> Analysis of the patient survey by diverse strands to understand need Create Trust template document for the production of easy-read Obtain licences for photo symbol software package Train Personal, Fair and Diverse (PFD) champions and divisional representatives to become ‘experts’ in easy-read production Develop question related to reasonable adjustments on the real-time patient experience survey 	ED Officer	September 2014		
	Information to be available in all formats including different languages, large print, easy-read, Braille, audio tape and text facilities.	Food menus are available in other formats (e.g. braille)	<ul style="list-style-type: none"> Work with Learning Disability Partnership Board (LDPB) health group to develop standardised easy-read procedures. Recruit Employability Hub candidate to do photo library project 	ED Officer	October 2014		
	There is a comprehensive translation and interpretation service in place (including foreign languages, British Sign Language and easy-read) that supports patients, families and carers to have the best patient experience	<p>Translation and Interpretation Policy (including easy-read) being reviewed in partnership with South Devon and Torbay Clinical Commissioning Group (CCG) as part of the LDPB health sub-group.</p> <p>Review of translation and interpretation policy and processes commenced March 2014.</p>	<ul style="list-style-type: none"> Understand how current translation and interpretation services are being used and review processes before reviewing policy. Re-focus policy towards ‘accessible information’ Obtain service user data from contracted providers (Deafinite, Language Line) Train staff on British Sign Language (BSL) basics to improve customer experience 	ED Officer	December 2014 and February 2015		
	Staff are aware of how to access translation and interpretation services	Guidance document available on the staff intranet.	<ul style="list-style-type: none"> Increase the number of interpreters booked by 10% / or to reflect needs of the community Invite Deafinite events co-ordinator to speak at PFD network group Meet with different service leads and managers to reinforce the importance of 	ED Officer	November 2014		

			raising awareness with patients				
	Key patient information is translated into foreign languages	Patient letters are translated into the appropriate foreign language by	<ul style="list-style-type: none"> Conduct cost-benefit analysis on whether particular corporate documents could be translated Identify priority documents that should be translated Develop protocol to provide guidance to staff requiring information to be translated 	ED Officer	October 2014		
	Accessibility strap-line publicised on all patient information on intranet and internet	Standardised equality statement and accessibility strapline written and added to Trust template policies – expand across all services. In place for HR and health and safety.	<ul style="list-style-type: none"> Audit policies to gain assurance on organisation-wide implementation 	ED Assistant	November 2014		
	Public website is easy to navigate and fully accessible to everyone	Website being redesigned as part of Integrated Care Organisation (ICO).	<ul style="list-style-type: none"> Ensure alternative languages/sensory interfaces are available (for example 'browse aloud') E&D team to be involved in development of new website 	IT Web Manager and Digital Content Manager	November 2014		
Local Interest Groups (LIGs) and service users are involved with service change planning which effects patient access and experience (outcome 2.2)	The LIGs are engaged in a meaningful way and on a continual basis. Relationships with third sector partners are developed	<p>LIGs have been identified for the 9 PCs. LIGs attend E&D groups to aid the development of services.</p> <p>Working With Us (WWU) panel. The panel conducts real time surveys with patients upon discharge to understand their experience. Membership diversity has been increased.</p> <p>Established relationships with Shekinah Mission, Pluss and other stakeholders as part of the 'Employability Hub'. Positive relationship with local Healthwatch.</p>	<p>Identify other disadvantaged groups in local population, particularly 'inclusion health' groups such as people that are homeless, people that misuse substances etc. Specifically:</p> <ul style="list-style-type: none"> Engage with Refugee Support Devon Engage with Hikmat centre (Exeter) Engage with Totnes drop-in centre for people that are homeless 	ED Manager	Ongoing (next review November 2014)		
	Senior Managers are present at EDHR and other E&D groups. Robust and effective Equality Analysis process in place to identify consultation / engagement with LIGs where appropriate	Membership of the group includes senior managers from a broad section of the Trusts. EAP prompts engagement and consultation with broad range of internal and external stakeholders	<ul style="list-style-type: none"> Secure senior level manager (clinical or non-clinical) for Black and Minority Ethnic staff network group Clarify level of stakeholder engagement required / recommended for different types of policy / service Share example of best practice with other departments 	ED Manager	October 2014		
People from all equality groups have similar levels of satisfaction with the services they receive compared to people in general (outcome 2.3)	Analysis of complaints to pick up any diversity issues / trends. Refer to patient survey and friends and family test	Complaints mentioning issues relevant to E&D are reported directly E&D manager, complaint is then dealt with directly or signposted to other relevant members of staff and/or learning from complaints.	<ul style="list-style-type: none"> Identify link between equality data and patient surveys. FFT may report breakdown by protected characteristics Translate complaints policy into Chinese Mandarin, Spanish and Polish 	Patient Experience Lead / ED Manager	July 2014		
Patient complaints relating to ED&HR are handled robustly and efficiently (outcome 2.4)	Patient experiences collected via patient surveys. Practice relating to ED shows the Trusts as inclusive environments. ED issues are raised at 'learning from complaints' meetings and subsequent actions	<p>75% of patients who responded to Friends and Family Test reported they were extremely likely to recommend our hospital.</p> <p>Complaints policy published on public website and signposted to the Patient Advice and Liaison Service</p>	<ul style="list-style-type: none"> Review quarterly 	Patient Experience Lead	December 2014		

	taken	(PALS). Complaints which relate to any form of discrimination are directly brought to the attention of ED manager.					
Raise the profile of equality information, confidentiality, and the use and benefits of providing relevant personal information for LIGs and staff (Equality Objective 2)	Equality monitoring is implemented across Trusts.	Equality monitoring pilot in progress. Importance of equality monitoring stressed through FAQs (staff and patients) and Hiblio.	<ul style="list-style-type: none"> Continue to stress importance of equality monitoring through roll-out Keep update as an agenda item on E&D groups 	ED Manager	Ongoing		
	Equality Analysis Procedures include supporting evidence/ data/ consultation from LIGs where appropriate.	Training delivered to frontline staff. Training for managers for the revised Equality Analysis procedure underway. Raised awareness through communications.	<ul style="list-style-type: none"> Continue to provide EAP awareness training sessions in a variety of settings and formats (e.g. library bite-sized sessions, all managers briefings, PFD workshops, blog posts) Develop guidance which highlights appropriate sources of evidence that could be included in EAPs Develop a flow chart to aid managers decision-making which clearly shows appropriate course of action 	ED Officer	November 2014		
Patient facilities are appropriate and uphold/ promote respect and dignity (Equality Objective 4)	Provision of single sex accommodation, single rooms and privacy and dignity continues to be compliant with Department of Health recommendations	Compliant - More Eliminating Mixed Sex Accommodation (EMSA) work programme close to completion. Recommendation to add curtains in changing areas to account for respect and dignity of transgender patients – now in place	<ul style="list-style-type: none"> Review annually (last reviewed 	Director of Estates/ Director of Nursing, Professional Practice and People's Experience	Ongoing (next review date December 2014)		
Goal 3 – A representative and supported workforce (staff-focused goal)							
Fair NHS recruitment and selection procedures lead to a more representative workforce (outcome 3.1)	Recruitment and selection process is based on fairness and merit. Unconscious bias is mitigated as far as reasonably possible. Positive action is used to make appointments where appropriate.	Workforce diversity report shows diversity of workforce is largely reflect of local population. Recruitment and Selection training incorporate E&D into objectives.	<ul style="list-style-type: none"> Update recruitment and selection training 	ED Manager / Director of Workforce & Organisational Development	September 2014		
	The Trusts demonstrate a visible commitment to equality and diversity to external organisations and individuals	Trust is host site for Project Search (work programme for young people with learning disabilities) Trust is a Mindful Employer, Remploy, Plus, disability two-ticks, Access to Work. Also recognition of Stonewall Diversity champion for LGBT staff	<ul style="list-style-type: none"> Publish PFD pledge on public website Ensure diversity logos are consistently applied to NHS jobs website 	ED Assistant	September 2014		

	Ensure that the proportion of staff from protected characteristics is reflective of the local population demographics at all levels of the organisation (including senior manager and senior medical and dental grades)	Trust established an Employability Hub to take 'positive action' to support disadvantaged groups (e.g. homeless, substance abuse, learning disability/mental health, social exclusion and convictions) within the community to gain valuable employability skills. The desired outcome is to have a more employable, highly skilled and competitive local workforce, which is representative of the community we serve.	<ul style="list-style-type: none"> Implement recommendations in workforce diversity report 2013 Workforce diversity report to be submitted to workstream 4 (integrated workforce and education governance board) for action Develop a business advisory group Ensure Employability Hub processes are robust (clear and transparent recruitment checks and eligibility criteria are used) Policy to get parents participation forum Expand the Hub to include other disadvantaged groups 	ED Manager	September 2014 January 2015		
	Recruitment and selection process (administratively) is accessible to all people in the community	TBC	TBC	Recruitment Manager	November 2014		
Staff pay equality is reduced and maintained (outcome 3.2)	Produce and consider the Trust's gender pay gap and Produce target to address gaps	Since the implementation for Agenda for Change, any equal pay cases have now been resolved. There are therefore currently no equal pay cases and no further cases foreseen. The Trust has a job evaluation process (using the national NHS job evaluation handbook) for all new posts which must be approved through a 3 person panel, including a staff side (union) representative.	<ul style="list-style-type: none"> Consider whether E&D could attend job evaluation panel to conduct sample audits Equal pay audits to be introduced 	Director of Workforce and Organisational Development	September 2014		
Training and development opportunities are taken up and positively evaluated by all staff (outcome 3.3) and identify deliver and evaluate training and Organisational Development (OD) interventions to build confidence and competence of the workforce (Equality Objective 3)	Ensure that the Trust retains and develops staff from diverse backgrounds	Clinical Simulations offered to students and preceptees to enhance learning of specific areas. Positive feedback received on revised E&D training.	<ul style="list-style-type: none"> Develop a day of training with customer care and conflict Work with Enhancing Clinical team to develop clinical simulation scenarios (e.g. with a focus on spirituality/ learning disability) 	ED Officer	December 2014		
	Minority groups have participation levels similar to staff in general	We currently do not monitor participation broken down by PC	<ul style="list-style-type: none"> Collect equality information relating to training and development opportunities Develop a coaching culture Develop OD leadership programme based on values 	Head of Organisational Development	January 2015		
	Positive engagement and feedback from training from all staff groups and protected characteristics. Bespoke sessions available to meet organisational need and need of particular groups	Mandatory training currently provided 6 times per month. Bespoke session coordinated on an ad hoc basis.	<ul style="list-style-type: none"> Develop robust evaluation process for training 	ED Manager	October 2014		
Staff are free from harassment, bullying and violence (outcome 3.4)	Staff from minority groups are free from abuse, specifically in respect to: 1. Pay bands 2. Professions 3. Services / care settings	Information is currently sourced from the annual staff survey Staff experience with disabilities higher than national average	<ul style="list-style-type: none"> Work with HR to identify relevant actions 	ED Officer	September 2014		

Flexible working options are available to all staff (outcome 3.5)	Minority groups in specific areas have good access to flexible working options in respect to specific: 1. Pay bands 2. Professions 3. Services / care settings	Flexible working options are available to all staff and the flexible working policy has a clear equality statement	<ul style="list-style-type: none"> Improve the access to flexible working options Investigate the reasons for refusal of flexible working options from the last 12 months to identify any equality themes Ensure staff that are carers are being granted flexible working 	HR Manager / ED manager	November 2014		
Staff report positive experiences of their membership of the workforce as a fair and rewarding place to work (outcome 3.6)	Staff report positive experiences via engagement with equality network groups and E&D sub-groups. Other networks for protected groups (including DAAG/ LGBT/ BME) are available to staff Leaders and managers have increased understanding of the importance and relevance of equality to their services	E&D is mainstreamed through the Trusts through Employee Network Groups (ENGs) including the Personal, Fair and Diverse (PFD) campaign. The LGBT group have a communications strategy which can be replicated for other groups EDHR group established DAAG established for many years Gender Reassignment Group established July 2012 and now merged with LGBT group - established June 2013. All groups report back to EDHR (quarterly)	<ul style="list-style-type: none"> Continue to promote E&D through communications and E&D network groups. Review progress and terms of reference for all groups quarterly Continue to develop E&D training and work with OD in terms of living the Trust values Analyse themes from EDS staff survey to identify priorities Engage other protected characteristic groups through electronic forums, discussion boards and interaction 	ED Manager	Ongoing October 2014		
	Review staff survey by diversity strand. Ensure Human Resource (HR) policies and procedures are up to date and Equality Impact Assessed Workforce diversity report informs business planning	Workforce Diversity Report is updated and published annually	<ul style="list-style-type: none"> Equality monitoring being introduced for staff with friends and family testing – monitor outcomes 	ED Officer	December 2014		
Improve the quality of the data from staff regarding the 9 protected characteristics (Equality Objective 1)	Staff statistics can be used to analyse data according to equality strands/ the 9 PCs	Currently collect 6 of the 9 PCs. Staff can update their own electronic Staff Record (ESR) however not all staff currently have access. Data currently only collected at application.	<ul style="list-style-type: none"> Work with workforce planning team to update equality information for all staff. Develop bespoke surveys through Trust intranet to gain more detailed experiences in relation to PC. Local equality monitoring to disaggregate FFT data by 5 protected characteristics 	ED Officer	July 2014		
	The non-disclosure rate for staff equality monitoring are reduced by 10%	There is currently a high percentage of non-disclosure rates for some PCs (e.g. sexual orientation) is 20%	<ul style="list-style-type: none"> Utilise results from EDS staff survey to update details Promote self-service for staff to update their own information Develop a communications plan to raise awareness of collecting staff equality information 	ED Officer	February 2015		
	Local work enables staff Friends and Family Test supports provides breakdown of staff experience according to PC	Staff Friends and Family Test due to commence April 2014.	<ul style="list-style-type: none"> Analyse results from clinical effectiveness 	HR Manager	August 2014		

Goal 4 – Inclusive leadership (staff-focused goal)

Board and senior leaders across the Trusts visibly demonstrate their commitment to promoting equality for staff and patients (outcome 4.1)	The Board advances equality through strategic decision-making. Data and patient feedback from protected characteristic and disadvantaged groups is used to make evidence-based decisions and, where appropriate, take 'positive action' permitted under the Equality Act 2010 to develop a diverse workforce.	Trust supports major work programme (Project SEARCH) for young people with learning disabilities has flagged up opportunities. Employability Hub created to take 'positive action' to support disadvantaged groups within our community to gain valuable employability skills. Board members participated in 'Connect Board' programme (builds Equality, Diversity and Inclusion into planning and decision-making at Board level)	<ul style="list-style-type: none"> • Ensure E&D is a re-occurring agenda item on leadership engagement forums (e.g. All – managers briefings) and team meetings (e.g. Matrons meetings) • Integrate E&D into Trust's Business Planning Cycle. • Integrate Equality Analysis into business case proforma 	Board of Directors	Ongoing and December 2014		
The Trust Chairman & Chief Executive are senior champions for diversity		Board signed up as Personal, Fair & Diverse (PFD) champions. Directors of Nursing and Peoples' experience led the EDS engagement event.	<ul style="list-style-type: none"> • Ensure Board/CEO are signed up as PFD champions • Create PFD pledge for Board to sign up to demonstrate commitment to equality • Designate a couple of senior PFD champions and provide them with a meaningful role description to champion equality 	Board of Directors	October 2014		
Equality is integrated into mainstream governance structures in order to maximise outcomes and ensure that the agenda is fundamental to the Trusts' business	Equality is integrated into mainstream governance structures in order to maximise outcomes and ensure that the agenda is fundamental to the Trusts' business	Use of Equality Analysis Procedures to raise awareness of impact on equality groups. Equality, Diversity and Human Rights Group (EDHRG) reports to Workstream 4 (Workforce and Organisational Development Committee) and, in turn, the Board of Directors. Monthly Board reports to the Director of Workforce and Organisational Development (OD). Workforce and OD Board report is reviewed at the bi-monthly Trust Board meetings. Annual E&D Report to Board of Directors as part of Trust annual report. The E&D section reports progress on the EDS, Action Plan, and Equality Impact Assessment	<ul style="list-style-type: none"> • Equality-related patient stories are delivered at the Trust Board and other major committees to ensure real-life experiences are shared. • Utilise EDS to create action plans for individual areas and/or collect evidence as appropriate • Integrate equality reporting into the Quality Accounts for 2015/2016 financial year 	Board of Directors / ED Manager / Quality Lead	Ongoing and March 2014		
Board and senior leaders promote equality beyond the organisation. (outcome 4.1)	Ensure that partner organisations are Equality and Human Rights compliant.	Complete - Although review periodically.	<ul style="list-style-type: none"> • Work with procurement to obtain robust evidence for EDS and Stonewall workplace equality index 	ED Manager / Head of Procurement & Logistics	Ongoing (next review January 2014)		
	Procurement process appropriately manages E&D risks	TBC – Mark Slaney	<ul style="list-style-type: none"> • TBC 	Head of Procurement & Logistics	TBC		

	Contractors on-site understand and abide by E&D requirements and expectations	TBC – Clive Radestock	<ul style="list-style-type: none"> Review Trust protocols for contractors. Statement agreed through safeguarding committees and with the facilities department to include in contractors code of conduct 	Director of Estates & Facilities Management	TBC		
	Evidence of strong and sustained commitment to promoting equality beyond the organisation.	TBC	<ul style="list-style-type: none"> TBC 	Board of Directors	TBC		
Papers that come before the Board and other major committees identify equality risks and identify how these will be managed (outcome 4.2)	The Board can demonstrate that 10-20 substantive papers took proper account of equality risks (i.e. demonstrating compliance with the PSED)	<p>Equality risks are identified and managed through the EDHR Committee. The Committee has senior management level representation. Where appropriate risks are escalated to the relevant Workstream Committee.</p> <p>The Board receives bi-monthly updates from the Workforce and Organisational Development Board report. The Board are asked to note the contents of the report. Actions to address/ manage equality risks are raised at Workstream 4 which has delegated responsibility from the Board to provide assurance on workforce issues.</p>	<ul style="list-style-type: none"> Clarify best practice for this objective with NHS England equality and health inequalities team Board and senior managers to identify and manage risks at other major committees (i.e. the workstreams) 	Board of Directors / ED manager	September 2013 November 2014		
Middle managers and line managers are culturally competent within a work environment free from discrimination (outcome 4.3)	All staff are trained on diversity. There is a comprehensive E&D training programme in place. Appropriate training, and other opportunities, are in place to advance cultural competency	A programme of cultural and language support has been commissioned for international staff. International welcome days are planned quarterly for tailored support to international staff	<ul style="list-style-type: none"> Develop bespoke training sessions for line and middle managers in terms of understanding Polish cultural differences Work with HR to address any concerns in the Staff Survey results related to bullying and discrimination Develop ED webpage dedicated to advise on a variety of needs (e.g. religious) Refresh social, cultural, spiritual and religious guide for staff Understand cultural health of organisation through cultural barometer tool 	ED Officer / ED Assistant	September 2014		
	<p>Staff are well supported by line managers to work in culturally competent ways in respect to specific:</p> <ul style="list-style-type: none"> Pay bands Professions Services / care settings 	Cultural barometer has been developed	<ul style="list-style-type: none"> Identify specific areas of good practice and challenge to inform evidence collection Use insight from cultural barometer tool 	ED Officer/ OD Facilitator	November 2014		
	Staff are aware of the Trust's commitment to the Personal, Fair and Diverse (PFD) approach to health and care. Target for 300 staff to be signed up as PFD champions.	<p>C100 members of staff have signed up to PFD so far. Bespoke training developed to coach champions on their role. Monthly/ bi-monthly themed 'spotlight sessions' held to raise awareness on specific topics.</p> <p>PFD session on cultural awareness delivered to staff</p>	<ul style="list-style-type: none"> TBC 	ED Officer	TBC		

	Comprehensive 'diversity calendar' available to staff which shows key equality related events (local, national and international)	Diversity calendar published on staff intranet	<ul style="list-style-type: none"> Development of diversity calendar to include international, national and local/ Trust events 	ED Assistant	Ongoing (next review January 2014)		
Embed and mainstream the Trust values and behaviours (Equality Objective 4)	National leadership standards, competencies and values for E&D to be implemented in the Trust in a way in which embraces the ethos of the national agenda but is appropriate at the local level to the Trust's strategy and vision.	<p>Policy review completed every 2 years ensuring language is explicitly linked to E&D aims. E&D Policy launched November 2013 and will be regularly reviewed in line with national legislation.</p> <p>EDS report published annually following community engagement grading event.</p>	<ul style="list-style-type: none"> Ensure Trust policies are reflective of national agenda but adapted for local purposes Work with Health Education England (HEE) and National Leadership Academy to ensure up to date 	ED Manager	Ongoing		

Abbreviations	
DAAG	Disability Awareness and Action Group
EAP	Equality Analysis Procedure (formally Equality Impact Assessment)
EDHR	Equality, Diversity and Human Rights
EDS	Equality Delivery System
ESR	Electronic Staff Record
PC	Protected Characteristics
PFD	Personal, Fair and Diverse
ED	Equality and Diversity
ICO	Integrated Care Organisation
LDPB	Learning Disability Partnership Board
LGBT	Lesbian, Gay, Bisexual, Transgender
LIG	Local Interest Group
SD&T CCG	South Devon and Torbay Clinical Commissioning Group
SDHFT	South Devon Healthcare NHS Foundation Trust
TSDHCT	Torbay and Southern Devon Health and Care NHS Trust

The goals and outcomes of *EDS2*

Goal	Number	Description of outcome
Better health outcomes	1.1	Services are commissioned, procured, designed and delivered to meet the health needs of local communities
	1.2	Individual people's health needs are assessed and met in appropriate and effective ways
	1.3	Transitions from one service to another, for people on care pathways, are made smoothly with everyone well-informed
	1.4	When people use NHS services their safety is prioritised and they are free from mistakes, mistreatment and abuse
	1.5	Screening, vaccination and other health promotion services reach and benefit all local communities
Improved patient access and experience	2.1	People, carers and communities can readily access hospital, community health or primary care services and should not be denied access on unreasonable grounds
	2.2	People are informed and supported to be as involved as they wish to be in decisions about their care
	2.3	People report positive experiences of the NHS
	2.4	People's complaints about services are handled respectfully and efficiently

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The goals and outcomes of *EDS2* (continued)

A representative and supported workforce	3.1	Fair NHS recruitment and selection processes lead to a more representative workforce at all levels
	3.2	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
	3.3	Training and development opportunities are taken up and positively evaluated by all staff
	3.4	When at work, staff are free from abuse, harassment, bullying and violence from any source
	3.5	Flexible working options are available to all staff consistent with the needs of the service and the way people lead their lives
	3.6	Staff report positive experiences of their membership of the workforce
Inclusive leadership	4.1	Boards and senior leaders routinely demonstrate their commitment to promoting equality within and beyond their organisations
	4.2	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
	4.3	Middle managers and other line managers support their staff to work in culturally competent ways within a work environment free from discrimination

South Devon Healthcare NHS Foundation Trust **Equality Objectives 2013 – 2014**

Aim – Data collection and usage

We will continue to improve the quality and range of intelligence we have to advance equality outcomes.

Objective 1 – Capture, monitor and evaluate information and data for relevant protected characteristics related to:

- Access to services
- Patient / customer / carer experience
- Staff and workforce activity

By when: March 2014

Measured by / Successful outcomes:

- Identify learning from the 'personal information sharing' project pilot
- Improved performance in relation to national equality benchmarking tools (e.g. Stonewall Equality Indices)
- Disclosure rates will increase as demonstrated by the annual workforce diversity report¹

Aim – Engagement with staff and local interest groups²

Further develop meaningful engagement with staff, service users, carers and the local community to improve and align Trust services to meet the needs of the local population and reduce health inequalities³.

Objective 2 – Wide range of staff and local interest groups are engaged

For service users, carers and the local community:

- Identify local interest groups to engage within South Devon as well as Torbay
- Identify local interest groups and service users to be involved in service change planning and resourcing decisions, where appropriate.
- Raise the profile of the importance of equality information with service users, and the use and benefits of providing relevant, personal information.

Measured by / Successful outcomes:

- Successful relationships built with interest groups from all 9 protected characteristics
- Equality Impact Assessments⁴ that include local interest groups involvement where appropriate
- Register of local interest group relationships established and positive feedback received.

For employees:

- Raise the profile, visibility and awareness across the Trust regarding equality and diversity
- Regular communication about equality related matters using communication channels such as equality and diversity staff network groups, the staff bulletin and the intranet
- Raise profile of sharing personal information and why it is important

Measured by / Successful outcomes: Mandatory training information, staff survey, quality of service user and employee data.

By when: March 2014

Aim – Culturally competent⁵ and empowered staff

Develop consistency of approach to equality across the organisation in respect of leadership, staff empowerment and access to development opportunities.

Objective 3 – Identify, deliver and evaluate training and Organisational Development (OD) interventions⁶ to build confidence and competence of the workforce

- Provide advice and guidance to enable and support staff to work in culturally competent ways.
- Raise awareness of equality issues and encouraging the development of initiatives to address inequality and promote understanding amongst all staff.
- Ensure staff take responsibility for delivering a high quality service which is appropriate, culturally sensitive and meets the needs of our diverse population.
- Identify training to ensure staff are competent in their understanding of equality and diversity issues and the Trust's commitment.

By when: March 2014

Measured by / Successful outcomes:

The Trust will measure this through:

- Staff feedback (e.g. via the staff survey, OD evaluation tools, all staff conferences, appraisals)
- Patient interaction (e.g. observations of care⁷, clinical simulation scenarios⁸)

Aim – Demonstrate leadership in equality and diversity

Demonstrate leadership in advancing the equality agenda to ensure discrimination is eliminated and to ensure equity of access, experience and outcomes for patients.

Objective 4 – Embed and mainstream the Trust values and behaviours

- Use OD interventions to ensure staff represented by the protected characteristics are actively supported
- Develop and maintain a Personal, Fair and Diverse (PFD)⁹ network group
- Develop and maintain a number of staff engagement groups focused around the protected characteristics
- Assess the needs of the organisation's staff, developing a framework for inclusive leadership across management structures which support the organisation to advance equality outcomes
- Identify how equality and diversity competencies can be embedded into core into the Trust's leadership development programmes.
- Ensure Board members and senior and middle managers have an understanding of equality, diversity and human rights so that equality is advanced within the organisation.

By when: March 2014

Measured by / Successful outcomes:

- The Trust will measure this through: workforce data, Trust policies and procedures, OD evaluation, Board diversity and inclusion programme¹⁰ and staff survey, Employability hub¹¹ outcomes, PFD network group, patient feedback and surveys (for example Friends and Family Test¹²).

Notes

¹ The Workforce diversity report is an annual report published by the Trust which provides information on workforce activity in relation to the nine protected characteristics. The latest report can be found here:

http://www.sdht.nhs.uk/pdf_docs/aboutus/equalityanddiversity/annualworkforcediversityreport2012.pdf

² 'Local interest groups' are the communities, organisations and people whom the Trust believes are important to engage with to advance equality. Often they represent people who identify with one of the nine protected characteristics.

³ 'Health inequalities' refers to the lifestyle (e.g. smoking and exercise) and wider social factors (e.g. housing and education) that determine and shape people's health and well-being. Different groups and individuals experience tend to have varying degrees of health depending on these social factors.

⁴ 'Equality Impact Assessment' is a documented procedure for considering and analysing the impact of a new build, service change, policy or process on equality in relation to the nine protected characteristics.

⁵ 'Culturally competent' refers to the ability to interact effectively with people of different backgrounds, values, beliefs, and behaviours. In the NHS this means tailoring care to meet patients' social, cultural and linguistic needs.

⁶ 'OD interventions' are a set of sequential planned actions which are designed to help an organisation increase its effectiveness (Cummings and Worley, 2014)*

⁷ 'Observations of care' involves spending a set amount of time observing an environment within the Trust and noting what happens. This is then discussed with staff who work in the ward/department.

⁸ 'Clinical simulation scenarios' are scenarios where staff are observed and supported to learn in a safe environment in order to develop clinical excellence in knowledge and skills.

⁹ 'Personal Fair and Diverse' is a vision for personalised to the individual, fair for all and diverse as the community we serve. This is one of the Trust's Corporate Objectives for 2013/2014.

¹⁰ 'Board diversity and inclusion programme' refers to the Connect Board programme which aimed to embed the agenda into the Board's core business.

¹¹ 'Employability Hub' refers to the strategy to be an inclusive employer by recruiting and developing people from a range of backgrounds included those from 'disadvantaged' backgrounds.

¹² 'Friends and Family Test' is an opportunity for patients to provide feedback on the care and treatment received when discharged from hospital (or within 48 hours).

*Cummings, T. G. and Worley, C. G. (2008). *Organization Development & Change*. 9th Edition. Mason: South-Western Cengage