

ACTION PLAN - DEPARTMENT OF HEALTH EQUALITY DELIVERY SYSTEM AND EQUALITY AND & DIVERSITY PROGRAMME

Standard 1 – Better Health Outcomes			
“The NHS should achieve improvements in patient health, public health and patient safety for all, based on comprehensive evidence of needs and results”			
DH Suggested Outcome	Equality and Diversity Objective	Evidence of standard being addressed	RAG Rating from External Stakeholders
1.1 Services are commissioned, designed and procured to meet the health needs of local communities, promote well being and reduce health inequalities.	To contribute to and support the development of Trust services, policies and strategies from the perspective of all patients and with respect to their diversity.	<ul style="list-style-type: none"> Inclusion Audits Patient Feedback escalated, discussed and acted upon where appropriate Learning Disabilities Steering Group and Thurrock Learning Disabilities Partnership Board Information available in multiple languages Increased signage for easier navigation around the hospital 	
1.2 Patient’s health needs are assessed and resulting services provided in appropriate and effective ways	Review and develop Trust services and strategies from the perspective of all patients.	<ul style="list-style-type: none"> Inclusion audits undertaken to identify any barriers for protected groups Patient feedback used to ensure services are aligned to health needs of patients Use of Hearing Loops In house sign language lessons for staff SPARK booklet Lift facilities ensuring disabled access throughout hospital Lift facilities ensuring disabled access in car park Incident forms used to address barriers to care 	

DH Suggested Outcome	Equality and Diversity Objective	Evidence of standard being addressed	RAG Rating from External Stakeholders
1.3 Changes across services are discussed with patients and transitions are made smoothly	Ensure regular attendance at external stakeholder groups and events	<ul style="list-style-type: none"> • Provide accessible, timely and comprehensible information to patients and carers on their care and treatment, in a format that meets individual needs. • External stakeholders consulted and informed of service improvements • Open forums with executives 	
1.4 The safety of patients is prioritised and assured	Ensure services are safe and patients are confident when accessing services.	<ul style="list-style-type: none"> • In compliance with Same Sex accommodation requirements • Infection and control audits regularly undertaken to ensure standards are met • Complaints annual report including statistics on ethnicity and gender of complainants, analysing and identifying trends • Patient Safety Group • MRSA screening at pre-admission • Patient Panel 	
1.5 Public health, vaccination and screening programmes reach and benefit all local communities and groups	Ensure the Trust participates with public health initiatives	<ul style="list-style-type: none"> • Occupational Health Flu Fighter winners in NHS Employers awards 	

Standard 2 – Improved Patient access and experience

“The NHS should improve accessibility and information, and deliver the right services that are targeted, useful, useable and used in order to improve patient experience”

DH Suggested Outcome	Equality and Diversity Objective	Evidence of standard being addressed	RAG Rating from External Stakeholders
2.1 Patients, carers and communities can readily access services and should not be denied access on unreasonable grounds	Directorate General managers to undertake on an annual basis, a mini-audit of the inclusivity of the service they are providing, identifying areas for improvement and promoting areas of good practice.	<ul style="list-style-type: none"> • Inclusion audits have been held in 2010/11 to examine service delivery through a diversity lens, in all directorates, – as a form of EIA (equality impact assessment) • Meetings and their outcomes are published on the Trust’s public website • Inclusion audit meetings and outcomes will be published on the website together with any action plans • Foundation News circulated to all members • Translation services • Public Board Meetings • PALS complaints reviewed and actioned where necessary • Bariatric equipment for obese patients 	
2.2 Patients are informed and supported so that they can understand their diagnoses, consent to their treatments and choose their places their treatment	<p>Develop ways to ensure patient and carer views are valued and taken into account in designing, planning and delivering services.</p> <p>To ensure that Trust services are equally accessible to all.</p>	<ul style="list-style-type: none"> • Developed, maintained and improved partnerships with external bodies such as LINKs and Patient Panel to build on best practice, share innovation and listen to public views • Printed information is available on request to patients or their carers in different languages or formats • Individual Directorate impact assessments will identify where additional support is required to meet individual needs • Information corner in outpatients offering advice and support • Hearing loops • Pre-assessment clinics to explain care pathway to 	

		<p>patients</p> <ul style="list-style-type: none"> • Cancer and Stroke user groups • Learning Disabilities Nurse Advisor • Combat team supports patients before discharge and once at home 	
2.3 Patients and carers report positive experiences of the NHS, where they are listened to and respected and their privacy and dignity is prioritised.	Establish effective and innovative patient and carer feedback systems throughout the Trust	<ul style="list-style-type: none"> • A range of methods including a combination of feedback from National Patient Surveys, Patient Tracker, comment cards, Essence of Care benchmarks and local surveys will be used to enable the views of Trust 'users' to influence the development, delivery and evaluation of services • Analysis of the comments received on NHS Choices • Number of plaudits received • Feedback from the bereavement service from relatives • Double gowns used to preserve dignity • Single sex waiting areas • Increased male changing facilities in labour ward • Halal and kosher food included in restaurant menu • Strong support of Polly Parrot appeal displaying support of community with hospital developments 	
2.4 Patients and carers complaints about services and subsequent claims for redress should be handled respectfully and efficiently.	Any negative experience is looked on as an opportunity for learning and improvement for the benefit of future patients	<ul style="list-style-type: none"> • Any negative feedback from the National Patient Survey Programme, the investigation of complaints and feedback via PALS, NHS Choices and other sources will be monitored and acted upon where necessary • Incident reporting to identify and learn from mistakes • Analysis of the comments received on NHS Choices • PALS 	

Standard 3 – Empowered, engaged and well supported staff

“The NHS should increase the diversity and quality of the working lives of the paid and non-paid workforce, supporting all staff to better respond to patients’ and communities’ needs”

DH Suggested Outcome	Equality and Diversity Objective	Evidence of standard being addressed	RAG Rating from Internal Stakeholders
3.1 Recruitment and Selection processes are fair, inclusive and transparent so that the workforce becomes as diverse as it can be within all occupations and grades	<p>Ensure that the NHS Safer Recruitment Policies and Procedures are complied with.</p> <p>Ensure annual ethnicity reporting is undertaken to identify any areas of concern, and demonstrate appropriate actions taken.</p>	<ul style="list-style-type: none"> • Annual ethnicity reports produced and presented to the Board of Directors showing breakdown of applications, short listed and appointed applicants • Equality Scheme updated and published on the Trust website • Workforce monitoring data shows that overall workforce numbers reflect key aspects of diversity in the local population • The public website shows monitoring data for recruitment etc. The data also forms part of the annual improvement plan reporting to Healthwatch and others. 	Green
3.2 Levels of pay and related terms and conditions are fairly determined for all posts with staff doing the same work in the same job being remunerated equally.	Ensure Agenda for Change is complied with	<ul style="list-style-type: none"> • Agenda for Change terms and conditions applied to staff • Job evaluation undertaken by panel of management and staff side representatives • Levels of pay evidenced and agreed with personnel 	Yellow
3.3 Through support, training, personal development and performance appraisal, staff are confident and competent to do their work so that services are commissioned or provided appropriately	<p>Ensure staff who should receive an annual appraisal do so and report appraisal performance to the Board of Directors on a monthly basis.</p> <p>Ensure that equality and diversity is included as a core component in all training.</p>	<ul style="list-style-type: none"> • Appraisal performance is reported on a monthly basis to the Board of Directors with 90% target. • Equality and Diversity is referenced in training programmes with appropriate links being made. • A range of Equality and Diversity Training Courses are run within the Trust for different staff groups and bands • Analysis of workforce statistics • Resources available to ensure staff confident delivering care to diverse population i.e. SPARK booklet, Learning Disabilities Nurse Advisor, sign language lessons 	Yellow

DH Suggested Outcome	Equality and Diversity Objective	Evidence of standard being addressed	RAG Rating from Internal Stakeholders
3.4 Staff are free from abuse, harassment, bullying, violence from both patients and their relatives and colleagues with redress being open and fair to all	<p>Report and analyse employee relations activity on a quarterly basis.</p> <p>Report findings from the annual staff survey to the Board of Directors, ensuring action plans are produced to respond to points raised.</p>	<ul style="list-style-type: none"> • Bullying and Harassment Policy accessible for all staff on the Hub • Whistle Blowing Policy accessible for all staff on the Hub • Employee Relations Activity Reports are presented to the Governance Group on a quarterly basis • Staff Survey report presented to the Board of Directors on an annual basis • Incident reporting 	
3.5 Flexible working options are made available to all staff consistent with the needs of patients and the way that people lead their lives	Employees are given the opportunity to request flexible working	<ul style="list-style-type: none"> • Flexible working available for all staff within the Trust to request and is available on the Hub • Emergency Leave policy accessible for all staff on the Hub 	
3.6 The workforce is supported to remain healthy with a focus on addressing major health and lifestyle issues that affect individual staff and the wider population.	Develop appropriate health and well being strategies to support the workforce.	<ul style="list-style-type: none"> • Absence levels within trajectory • Attendance managed via the Attendance Management Policy available for all staff on the Hub • Our in-house Occupational Health Service gives advice to management and employees relating to health problems which impact on work • The Trust has a health and well-being champion and a strategy for addressing health and wellbeing in the workplace 	

Standard 4 – Inclusive leadership at all levels			
“NHS organisations should ensure that equality is everyone’s business, and everyone is expected to take an active part, supported by the work of specialist equality leaders and champions”			
DH Suggested Outcome	Equality and Diversity Objective	Evidence	RAG Rating from Internal Stakeholders
4.1 Boards and senior leaders conduct and plan their business so that equality is advanced and good relations fostered within their organisations and beyond	To demonstrate leadership on equality and diversity.	<ul style="list-style-type: none"> • Attendance at Essex Local Implementation Group • Minutes and actions from the BTUH EDMG chaired by Director of Personnel • Patient Engagement Strategy led by Director of Nursing • Summary and actions from Programme of Inclusion Audit Meetings with Clinical Directorates • Executive Open Forums held with staff 	
4.2 Middle managers and other line managers support and motivate their staff to work in culturally competent ways within a work environment free from discrimination	To ensure and maintain the work environment is free from Discrimination for all staff	<ul style="list-style-type: none"> • Staff Survey results are circulated to managers and action plans created to address concerns • Personnel policies prevent discrimination and promote diversity within the workforce • Equality and Diversity e-learning available. All elements of Trust training incorporate Equality and Diversity 	
4.3 The organisation uses the NHS Equality and Diversity Competency Framework to recruit, develop and support strategic leaders to advance equality outcomes	To support leads within the Trust who are champions for equality and diversity	<ul style="list-style-type: none"> • Minutes from EDMG meetings and contributions from representatives • Delivery of the Education and Training Service Plan, including evaluation of equality and diversity training 	