

# Equality, Diversity, and Inclusion (ED&I) 5 Year Vision



## Introduction

This vision sets out the way forward for The Walton Centre to improve equality, diversity, and inclusion (ED&I) for both its patients and staff. This is not an area we have focused on previously and our staff's feedback demonstrates that it is imperative we now make this a key priority as a Trust, from Trust Board to front line services.

This vision has come from both staff and patients sharing what good practice looks like and how we will know when we have achieved it, supported by a detailed strategy action plan. This will be delivered by the Operational ED&I Group, who will be held to account by the ED&I Steering Group. It will be monitored through the Quality Committee with an annual review of the vision and action plans progress in the same manner the Quality & Patient Strategy is currently monitored.

## Background

A fifth of nurses and a third of doctors are from BME (Black Minority Ethnic) backgrounds in the NHS. Yet by most measures their treatment is poorer than their white colleagues as referenced in Roger Kline's Snowy White Peaks 2013. There is still evidence in the latest report on the experience of these staff via the 'Workforce Race Equality Standard' (WRES) data (drawn from 9 workforce and staff survey metrics from all Trusts) which demonstrates no meaningful progress three years on. It demonstrates the more senior the pay grade, the less likely the post will be filled by BME staff. At band 5 BME nurses and midwives make up 24% of the staff – this falls to 4% at grades 8C and 8D. White job applicants are over 1½ times more likely to be appointed from shortlisting than BME applicants - not surprisingly BME staff are more than twice as likely as white staff to believe that their Trust doesn't provide equal opportunities for career progression and promotion. This difference increases even further in London. These findings were published three years after Roger Kline's report (WRES data from 2016) the Snowy White Peaks of the NHS which highlighted the extensive patterns of discrimination facing BME staff. The Walton Centres WRES data below demonstrates why this is a key area for the Trust to focus on now:

The scores presented below are the un-weighted question level score for question Q17b and un-weighted scores for Key Findings 25, 26, and 21, split between White and Black and Minority Ethnic (BME) staff, as required for the Workforce Race Equality Standard.

In order to preserve the anonymity of individual staff, a score is replaced with a dash if the staff group in question contributed fewer than 11 responses to that score.

			Your Trust in 2016	Average (median) for acute specialist trusts	Your Trust in 2015
KF25	Percentage of staff experiencing harassment, bullying or abuse from patients, relatives or the public in last 12 months	White	26%	21%	23%
		BME	38%	18%	36%
KF26	Percentage of staff experiencing harassment, bullying or abuse from staff in last 12 months	White	18%	24%	19%
		BME	29%	28%	9%
KF21	Percentage of staff believing that the organisation provides equal opportunities for career progression or promotion	White	90%	89%	88%
		BME	68%	75%	89%
Q17b	In the 12 last months have you personally experienced discrimination at work from manager/team leader or other colleagues?	White	4%	5%	5%
		BME	18%	12%	14%

The WRES is part of a robust NHS response to ensure trusts demonstrate they are closing the gap between the treatment and opportunities for BME and white staff. WRES data is also a focus now of Care Quality Commission (CQC) inspections and progress on these metrics is regarded as a significant indication. The data is published and encourages public scrutiny. Employers are expected to acknowledge the data and use analysis to understand its causes, from Trust Board to frontline staff need to be clear on why this is important, considering areas such as the loss of talent, impact on turnover, and impact on care and safety of patients.

The Walton Centre has an outstanding reputation for patient care and as a great place to work as demonstrated by our CQC rating, overall staff survey rating, and Investors In People Gold accreditation. However ED&I is an area we have not focused on and it is clear our BME staff and other minority staff with protected characteristics are not experiencing 'gold ' or 'outstanding' standards. We need to be committed to listening to our staff and patients in relation to ED&I, adopting good practice from elsewhere, and holding ourselves to account for measurable progress. Research has demonstrated that leadership, staff engagement, and culture are crucial areas to success and are therefore key elements of this vision. We have also set very clearly where we expect to progress, where training and infrastructure is needed to support that progress, and how we will measure progress to ensure we are on target.



ED&I represents all minority and vulnerable groups of which BME is one element, several documents key to the NHS set out targets and expectations for this wider group and underpin the Trust desire not just to improve the WRES data, but rather to advance our understanding and appreciation of ED&I in its wider sense embracing and celebrating the strength of difference and inclusion and all this brings. The NHS Five Year Forward view also sets targets for the NHS in England for ED&I, and some of the principles and values expected such as:

NHS must provide 'a comprehensive service available to all, irrespective of gender, race, disability, age, sexual orientation, religion, belief, gender reassignment, pregnancy and maternity or marital or civil partnership status. It has a duty to each and every individual it serves and must respect their human rights, it has a wider social duty to promote equality through the services it provides and to pay particular attention to groups or sections of society where improvements in health and life expectancy are not keeping pace with the rest of the population'.

## NHS values include:

'Improving lives, striving to improve health and wellbeing and peoples experience of the NHS and cherishing excellence wherever we find it in the everyday things that make peoples' lives better'.

'That everyone counts, that we maximise our resources for the benefit of the whole community and make sure nobody is excluded, discriminated against or left behind'. Staff rights as part of the NHS Constitution include 'being treated fairly, equally and being free from discrimination'.

These examples add further weight to an already compelling vision for the Trust to focus on ED&I as a key priority.



## The Vision's Journey

In 2017 the Trust celebrated 'Equality and Diversity and Human Rights week' with NHS Employers. Forty staff volunteered from all parts of the Trust to support data collection and engagement leading to the Trust receiving high volumes of both patient and staff feedback on what was important to them based on a number of ED&I-focused questions.

Forty staff volunteered to be 'ED&I Champions' and thirty staff expressed an interest to join our newly formed ED&I Steering Group. Building on this feedback we held a Berwick event dedicated to inclusion, with staff having the opportunity to help plan our journey, and shared a number of blogs sharing our progress. The Berwick session helped inform the Trust's draft ED&I vision, which then went on a 'roadshow' to all staff and patient areas over a number of weeks to have further comments from patients and staff. The draft was also shared at Staff Partnership Committee with staff side, and Patient Experience Group. Following this tour the vision was finalised following last comments and reviewed at Quality Committee prior to Trust Board. Updates on the process were regularly communicated to Senior Managers in Team Brief meetings.

Trust Board earlier in the year marked the lack of progress annually in this area with the annual staff and patient data reports and WRES data showing the need to focus our ambitions on ED&I. The Trust Board also noted that the WRES data for the current year (2017 published 2018/9) had been gathered already, so it would be the following WRES report that would determine progress in this area. It is therefore important that the Vision is also discussed, approved and monitored by Trust Board; this also includes Trust Board championing the approach to ED&I.

Overall The Walton Centre's commitments to equality, diversity, and inclusion can be encompassed in the following statements. This then leads onto the components of the vision and how we will know when we have achieved these, utilising the key areas known to have the most influence in ED&I.



#### **Overall ED&I Walton Centres commitments:**

- We are committed to making ED&I a priority. We want to be a workplace that inspires leadership at all levels, with all staff, where everyone's voice is heard.
- We are committed to creating an inclusive culture, where staff and patients believe there is strength in difference. We want to celebrate and actively embrace diversity.
- We are committed to ensuring that staff and patient have good experiences at the Trust, and feel comfortable "bringing their whole self" to The Walton Centre.
- We are committed to ensuring our care with, and for, all patients is meaningful to them, that ED&I is part of everyone's role, and is an integral part of our health and wellbeing approach.

## Leadership

We are committed to making ED&I a priority. We want to be a workplace that inspires leadership at all levels, with all staff, where everyone's voice is heard. How will we achieve this? What will this look like?

- We have staff diversity at every level (protected characteristics)
- We have visible role models with an Executive lead with a passion for diversity
- We have a clear, accessible plan for next 5 years
- Visible campaign
  - Celebrate key events (events calendar)
  - Positive communication campaign, promoting inclusivity for both staff and patients with protected characteristics
  - ED&I champions badges for visibility, clear roles that matter
  - Executive and ED&I blog
- We take positive action in gaining NED/Exec/Board advisor role re ED&I
- We ensure Equality, Diversity & Inclusion boards are in staff areas
- We have a Trust ambition to be part of NHS Leadership Academy's 'Building Leadership for Inclusion', or a similar opportunity
- We have ED&I staff story heard at Trust Board & Staff Partnership Committee
- We have ED&I patient story heard at Trust Board & Patient Experience Group
- We establish active ED&I Steering Group
- We have active ED&I champions
- We aspire to be exemplar Trust for ED&I

- We ensure our leaders are equipped to achieve, and create an increasing and sustainable legacy of inclusion
- We develop our inclusive leaders' skills 6 traits (ref Deloittes 2016 & NHS Leadership Northwest Building Leadership for Inclusion):
  - Cultural intelligence because not everyone sees the world through the same cultural frame
  - Collaboration because a diverse thinking team is greater than the sum of its parts
  - o Commitment because staying the course is hard
  - Courage because talking about imperfections involves personal risk taking
  - Cognisance because bias is a leader's 'achilles heel'



## Culture

We are committed to creating an inclusive culture, where staff and patients believe there is strength in difference. We want to celebrate and actively embrace diversity. How will we achieve this? What will this look like?

- Our staff and patients believe there is strength in difference and diversity, celebrate this, and actively seek to promote inclusion
- We aspire to be the employer of choice for staff by creating an inclusive culture
- We provide outstanding care with and for our patients with protected characteristics that is meaningful to them and represents their whole self
- We have an active ED&I Champion in every department
- ED&I is a part of everyone's role, and an integral part of our health and wellbeing approach
- We share a staff and patient story at Trust Board, including their experiences of ED&I at The Walton Centre
- We hold interactive Berwick sessions shaping our journey on ED&I
- We hold a Schwartz round focusing on ED&I and lived experiences
- We establish an approach that inspires leadership at all levels where everyone's voice is heard and valued
- We have a clear understanding of equality, diversity and inclusion
- We have BME representation (cultural ambassadors/diversity lead/champion) on hearings
- We have BME representation on senior appointment panels
- We have explored a Talent Management Pool/collective leadership programme for ED&I
- We promote and publish diversity events/dates to raise awareness
- We include protected characteristics in communication material e.g. pictures; and ensure language is gender-neutral
- We have a culture of equal opportunities for training
- We have a culture of staff and patients not being afraid to stand up and be different, not afraid to speak up or out without worrying about the future or fear of repercussions
- We have a culture of openness and honesty with no inappropriate 'banter'
- We generate a culture where patients and staff are happy to see staff and patients of all races, cultures, ethnicity, gender and sexuality
- We have a culture where staff feel able to challenge attitudes and inappropriate behaviours without fear
- We explore dignity standards with our staff

# **Engagement**

We are committed to ensuring that staff and patient have good experiences at the Trust, and feel comfortable "bringing their whole self" to The Walton Centre.

What will 'good' engagement look like? How will we know we have achieved it?

# **Patients**

- Our patients with protected characteristics (e.g. BME patients) have an experience of high quality that is meaningful to their whole self, and their lives
- Our staff processes and paperwork are flexible to suit all patients' and their family's needs
- Our services are accessible to all
- Our information is accessible to all e.g. large print, colour, languages, easy read
- Our information is appropriate to all, for example gender-neutral
- We promote and provide meaningful consultation with patient groups who use our hospital/the NHS to ensure that we build upon progress to good Accessible Information Standard (AIS).
- We work with the community setting to promote equal partnership working
- We improve our data collection for patients and how this informs our priorities e.g. Friends & Family demographics, local patient survey data
- All patients feel their religious and cultural beliefs are respected and honoured
- Develop inclusive approach guide so staff and patients are clear on our 'Walton' expectations

## Staff (includes The Walton Centre staff and ISS team at Walton)

- Our staffs' experience is good and inclusive
- We have a ED&I champion in every department
- Our staff are supported with reasonable adjustments
- We have BME representatives available for hearings
- We have a talent pool/reverse mentoring in place.
- We model listening into action
- Our staff have a suite of training and education on ED&I to feel comfortable with their knowledge and skills to be part of the journey.
- Our staff have greater awareness of protected characteristics and unconscious bias
- We ensure there is opportunities for all career progression

We will review our staff contracts/job descriptions to include expected behaviours related to ED&I

- Our staff have confidence to ask questions
- There are awareness raising sessions for all our staff
- Our staff feel comfortable and understand how to raise a concern
- Our staff feel comfortable and understand how to challenge others
- We will employ an ED&I expert to our HR team to lead on these changes and ensure we are in keeping with best practice.

# **Experts**

- We will work with experts to set our goals and ambitions to:
  - o Improve equality, diversity and promote inclusion
  - Provide bespoke training
  - o Advise on our policies, change programmes, recruitment
- We will work in partnership with third sector specialist groups forge strong links, e.g. Intrust Merseyside and Cheshire – welfare of transgender, intersex and gender variant people
- Working with others e.g. RCN Cultural Ambassador opportunity, staff side representations on steering group and utilising RCN suite of good practice guides once issued
- We will help create new knowledge, be able to test what works, raise aspirations & quicken pace of change for ED&I
- We have wider engagement in equality impact assessments (EIA) to ensure through consultation with staff and patients they are utilised wherever applicable
- We will work with NHS bodies e.g. NHS England/NHS Leadership Academy etc. to increase our knowledge, expertise and approach for patients & staff in ED&I e.g. cultural ambassador programme and building leadership for inclusion.
- We will ensure we are developing new knowledge and new actions, learning from experts



10

#### Skills

We are committed to ensuring our care with, and for, all patients is meaningful to them, that ED&I is part of everyone's role, and is an integral part of our health and wellbeing approach. How will we know we have achieved this? What will 'good' in this area look like?

- Our staff are trained and confident in a broad spectrum of skills and have understanding of:
  - o Equality and diversity and inclusion
  - o Importance of collecting equality monitoring information
  - Unconscious bias
  - Cultural competence
  - White privilege & fragility
  - o EIA
  - Hidden disability
- Our recruitment teams are skilled to promote diversity in our appointment processes
- Our patient access teams and secretaries understand and are confident in AIS and actions they need to take
- We have skills to implement, promote and enhance Public Sector Equality Duty (PSED)
- We have a clearer system of EIA assistance, assessment, review lessons learnt. With an increase in staff understanding of EIA, so they are seen as useful guides, and we see increase in compliance and the number undertaken.
- We undertake a review of training tools and priorities (e.g. E&D, Equality act, NHS constitution/contracts)
  - What we already have internal/external
  - What we need internal/external
  - Unconscious bias
  - o EIA
  - o AIS (HEE)
- We will review and prioritise leads and timescales of all ED&I action plans and consider skills required
- We will review ED,&I induction sessions
- We will ensure we are learning from those with lived experience, both those most negatively affected, and those whose experiences are consistently inclusive
- We will review 'must dos': prioritise, ensure leads, consider resources and skills required

- We will take part in reverse /reciprocal mentoring scheme
- We will explore employing a subject expert dedicated post, obtaining diagnostics of our Trust's initial position and/or working in partnership with other trusts to provide expert post
- We will reference our ED&I strategy to key documents e.g.:
  - NHS constitution
  - Equality Act
  - Snowy White Peaks
  - o key data and managed outcomes e.g. WRES
- Our on-call staff will have specific training on MCA and DOLS
- Our interview panels will have training on unconscious bias

# Measurement for Improvement

- To be able to track our progress and ensure we are making continuous improvement year on year, we will expect that:
- Our National Staff Survey demonstrates year on year improvement in relation to ED&I questions and our staff members' feedback
- Our National In-Patient Survey demonstrates year on year improvement in relation to ED&I questions and our patients' feedback
- We see year on year improvement in our WRES data, progress in our action plan and we can see the impact
- We have year on year improvement in our E&D data
- Increase in volume of data
- increase in sources
- increase in results of patients and staff experience
- We see measureable impact from action plans
- We understand our WRES data/EDSR data and make improvements
- We begin collating gender pay gap data as a first step
- We increase our EIA undertaken and they are seen as important guides
- We review our original E&D objectives 2017 2021 and ensure they are representative of The Walton Centre's requirements
- We cross-reference our strategy to data and documents to ensure all areas are progressed and measureable

- We will improve monitoring of workforce and ED&I
- We will increase the quality of our patient data
- We will increase in the quality of our workforce monitoring data

### Goals

- To ensure we strive for excellence we have set stretch goals to measure our progress:
- We launch a ED&I 5 year vision developed by staff
- We define and recruit ED&I champions role, ensure role has value
- We have year on year improvement of our measurements (in National Surveys In-Patients and Staff)
- We are the employer of choice for staff with protected characteristics
- We have good engagement and working relationships with 3<sup>rd</sup> sector expert groups
- We have an increase in EIA undertaken for planning and projects
- We have set up and established terms of reference for ED&I steering group
- We complete action plans for data and track progress and impact
- We complete actions plans for WRES findings and expand and track impact
- Our public sector equality duty is met (PSED)
- We are successful in our reaccreditation for Navajo or have an action plan for future accreditation
- We have a EIA guidance/toolkit developed and utilised
- We have met Accessible Information Standard
- We have an increase in staff with protected characteristics in our workforce over the duration of the vision's programme
- We have improved the experience of patients with learning difficulties, brain injuries, and protected characteristics
- We have expanded training in unconscious bias/cultural competency
- Our staff feel equipped with skills and knowledge on ED&I
- We have a place on a national campaign e.g. Building Leadership for Inclusion, or alternative

#### Conclusion

The ED&I vision and underpinning strategic action plan set out the steps the Trust needs to achieve to make a real difference for both our patients and our staff. We will review our progress annually formally at the Quality Committee using the vision's measurable goals. The ED&I Steering Group and Operational group will progress the strategy and ensure that actions and ambitions are monitored, progressed, and championed, ensuring our ED&I commitments are realised.

#### **ED&I Commitments**

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