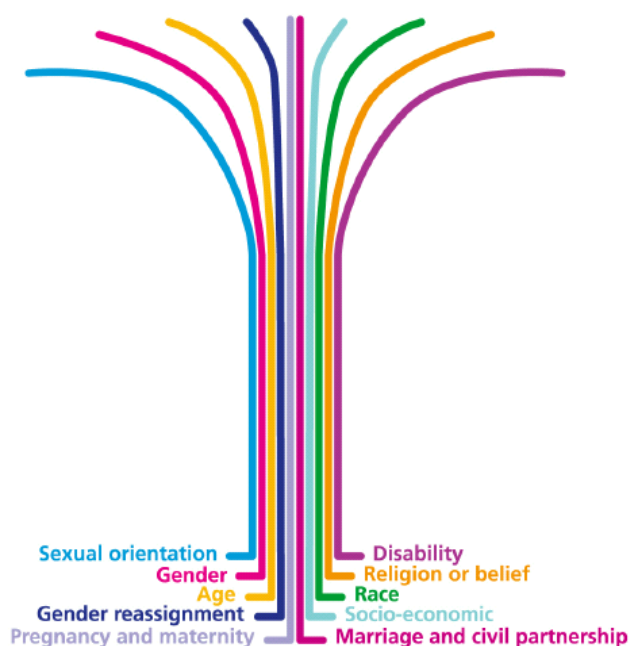




## Equality Improvement Plan

# Cambridgeshire Community Services NHS Trust

March 2014





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## **A) An introduction to the Cambridgeshire Community Services NHS Trust Equality Improvement Plan**

The Cambridgeshire Community Services NHS Trust Equality Improvement Plan explains how the Trust is advancing equality of opportunity, tackling discrimination and fostering good relationships between different community groups through its Equality Objectives and associated action plans. It also covers what the Trust is doing to support equality of opportunity within its workforce.

The Trust's approach to its Public Sector Equality Duties (PSED) has been, and continues, to be developed in collaboration with our workforce, our external partners and stakeholders from the statutory, voluntary and community sectors.

The Trust has assessed its compliance with the PSED through the collection of evidence from across the organisation. The evidence was presented to patient and staff assessment panels throughout January, February and March, and feedback has contributed to the development of the Trust's Equality Objectives. The Panel's view is that the Trust has made progress in developing its approach to all elements of equality, with several outcomes seeing improvements in the last 12 months.

However, the Trust recognises that there is still much to do if service users and staff are to experience true equality of access and experience, regardless of any of the Protected Characteristics groups. This report gives a summary of the Trust's work towards setting the Equality Objectives and details how these can be achieved through the Improvement Plans.

## **B) Good practice in relation to the production of the Equality Objectives and Improvement Plan**

The Trust has implemented an Equality and Diversity Steering Group, with Executive leadership and organisation-wide leads for HR and Patient Experience supported by a Project Manager, Staff-Side and Communications Support.

During 2013-14 the following engagement relating to the Equality Objectives and Equality Implementation Plan has been undertaken:



### **Patient and stakeholder engagement:**

- The Trust participated in assessments in Cambridgeshire, Peterborough, Suffolk and Luton as well as running an internal staff event
- The previous year's rag-rating panel were invited to this year's event in order to provide consistency and rigour in their assessment of the Trust's performance.
- The Trust also invited Foundation Trust members to contribute to the assessment process through grading panels.
- A number of pieces of information and data were used to inform the assessment panels, including:
  - Case studies from services
  - Updates on the Trust's Equality Improvement Plan
  - Equality Monitoring Data gathered through the Trust's patient experience surveys of over 5000+ patients
  - Patient feedback through engagement events throughout the year, complaints and compliments
  - Information on incidents within the Trust
  - Staff survey results
  - Staff workforce and recruitment
  - Training data and feedback

### **Workforce engagement:**

- Staff-side and all staff were invited to an EDS Grading Panel event on the 6<sup>th</sup> February 2013. Feedback was also invited through the comms cascade and Trust website, and through interactive presentations at team meetings
- In addition, the Trust's staff-side committee were given oversight of all EDS documentation and evidence for evaluation and feedback.
- A number of pieces of information and data were used to inform the assessment panels, including:
  - Information on incidents within the Trust
  - Staff survey results
  - Staff workforce and recruitment
  - Training data and feedback



## C) The Trust's Equality Objectives

The four Equality Objectives outlined below are specific, time-bound and designed to bring measurable improvements in our Equality and Diversity performance in 2014-15.

### The Equality Objectives 2014-15

#### **1. Achieve an improvement in the percentage of service users who report that they are able to access the Trust services that they require**

Success measurement as result of the groups identified for focus through public/ patient engagement: 90% of service users who identify themselves by virtue of their Gender, a Disability or as a Carer report being able to access the Trust services that they require.\*

#### **2. Improving the depth and breadth of the Trust's understanding of the experience of hard to reach or seldom heard groups**

This will be achieved through a focus on initiatives which aim to:

- Introduce or improve methods of enabling specific groups to share their experience of our services
- Strengthen the methods through which patient experience is used to inform and influence service design and delivery

#### **3. Achieve an improvement in the % of staff who report that they are able to access training and education opportunities.**

- Increase % of staff reporting being able to access education and training in the 2014 survey.
- Introduction of better monitoring of take up of training and education by protected characteristics and actions in place to address under representation

#### **4. Support leaders and managers to support all staff to work in a culturally competent way**

Embedding the Appraisal policy and processes, including introduction of a discussion at appraisal between managers and staff to improve competence in Equality and Diversity and cultural awareness

\*As part of the Trust's development of engagement with patients, service users and the wider community, it will endeavour to improve access for those who are potential patients or



seldom access our services. This is in order that we improve access for all of those who may require the Trust's services, in addition to those who are already our service users.

### **Impact Assessments**

The Trust continues to equality impact assess all strategies and policies and this is part of the annual policy review process.



## D) The Equality Improvement Plan for 2013-4

### Service users – Equality Objectives 1 and 2

Equality Objective	Action	Lead	Timeframe	Measurements	Accountable to
<b>Equality Objective 1: Achieve an improvement in the percentage of service users who report that they are able to access the Trust services that they require</b>					
Objective 1 Action 1	Actively recruit people with learning disabilities to take part in our 15 Steps Plus (combined 15 steps, golden rules, PLACE and NICE Patient Experience) service visit programme	Head of Patient Experience	September 2014	15 Steps Plus visit reports will show evidence of contributions from patients with Learning Disabilities	Chief Nurse
Objective 1 Action 2	<ul style="list-style-type: none"> <li>Introduce patient representative panel to review and approve patient leaflets</li> <li>Promote leaflets and raise awareness in services of how to source information in alternative languages and formats</li> </ul>	Head of Patient Experience	September 2014	Patient representative reader panel in place  Promotional activity re availability of information in different languages and formats	Chief Nurse
Objective 1 Action 3	<ul style="list-style-type: none"> <li>Undertake specific survey of access to our services, using contacts in community groups to reach a wider audience</li> <li>Review feedback to identify action plan for</li> </ul>	Head of Patient Experience	February 2015	Patient representative reader panel in place verifying patient information in easy read formats	Chief Nurse



Equality Objective	Action	Lead	Timeframe	Measurements	Accountable to
	improvement				
Objective 1 Action 4	Revise Trust website to clarify index of services, contact details and microsites	Head of Patient Experience / Comms Team	August 2014	Refreshed webpage launched	Chief Nurse





Equality Objective	Action	Lead	Timeframe	Measurements	Accountable to
<b>Equality Objective 2: Improving the depth and breadth of the Trust's understanding of the experience of hard to reach or seldom heard groups</b>					
Objective 2 Action 1	<ul style="list-style-type: none"> <li>Review of Complaints policy and procedures to ensure consideration to equality and diversity issues</li> <li>Introduce new training programme for staff re complaints</li> <li>Introduce new complaints leaflet including easy read format and in multiple languages</li> </ul>	Head of Patient Experience	July 2014	Complaints policy  Easy read and common language versions of complaints leaflet available	Chief Nurse
Objective 2 Action 2	<ul style="list-style-type: none"> <li>Monitor complaints against the nine protected characteristics to ensure we understand</li> <li>Ensure action plans in place to respond to any equality and diversity concerns</li> </ul>	Head of Patient Experience	July 2014	Patient Experience Board and Equality and Diversity committee Reports and Action Plans	Chief Nurse
Objective 2 Action 3	<ul style="list-style-type: none"> <li>Conduct post complaint surveys</li> <li>Stratify feedback by the nine protected characteristics to check if there is difference in satisfaction levels following resolution of complaints</li> </ul>	Head of Patient Experience	July 2014	Patient Experience Board and Equality and Diversity committee reports	Chief Nurse
Objective 2	Work to capture and improve the patient experience for people with learning disabilities by creating easy read versions of patient surveys and	Head of Patient Experience	September 2014	Easy read survey available and being offered to Service Users	Chief Nurse



Equality Objective	Action	Lead	Timeframe	Measurements	Accountable to
Action 4	other information				
Objective 2 Action 5	Programme of engagement with community groups implemented and embedded	Head of Patient Experience	September 2014	Planned programme of visits in place  Mechanism in place for capturing and addressing any feedback	Chief Nurse



## Workforce – Equality Objectives 3 and 4

Equality Objective	Action	Lead	Timeframe	Measurements	Accountable to
<b>Equality Objective 3: Achieve an improvement in the % of staff who reports that they are able to access training and education opportunities.</b>					
Objective 3 Action 1	Undertake analysis of the 2013 feedback on access to training across the 9 protected characteristics, and identify opportunities to address disparities	Training and Education manager	March 2014	Analysis document outlining feedback on access to training by the 9 protected characteristics	Director of Workforce and Transformation
Objective 3 Action 2	Commence active monitoring of all internal training opportunities by protected characteristics	Training and Education manager	August 2014	Monitoring commences	Director of Workforce and Transformation
Objective 3 Action 3	Implement plan to address negative feedback regarding access	Training and Education manager	August 2014	Plan in place and underway	Director of Workforce and Transformation
Objective 3 Action 4	Implement plan to address any disparities in access between protected characteristics	Training and Education manager	November 2014	Plan in place and underway	Director of Workforce and Transformation



Equality Objective	Action	Lead	Timeframe	Measurements	Accountable to
<b>Equality Objective 4: Embedding the Appraisal policy and processes including the discussion at appraisal between managers and staff to access Knowledge and competence in E and D and cultural awareness</b>					
Objective 4 Action 1	Review the success of the revised appraisal policy via real time staff feedback and 2013 SOS and compare to the 2012 survey	Training and Education manager	April 2014	Review of staff feedback	Director of Workforce and Transformation
Objective 4 Action 2	Identify actions to address any differences  (Equality and diversity improvement plan to be updated accordingly)	Training and Education manager	May 2014	Action plan in place	Director of Workforce and Transformation
Objective 4 Action 3	Provide additional Equality and Diversity cultural awareness training to local community units and teams, tailored to local demographics and challenges	Training and Education manager	August 2014	Training commences	Director of Workforce and Transformation