



The Walton Centre
NHS Foundation Trust

Excellence in Neuroscience 

The logo features a stylized profile of a human head facing right, with several colorful gears (red, green, blue, yellow) inside the brain area.

Public Sector Equality Duty

Equality, Diversity and Inclusion Annual Report 2018

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1 Introduction

I am pleased to introduce The Walton Centre NHS Foundation Trust Annual Equality Diversity and Inclusion (ED&I) Report 2018, which sets out the Trust's approach to ED&I and how the Trust meets the Public Sector Equality Duty (PSED).

Based in Liverpool, the Trust has a wide catchment population of about 3.5 million drawn from areas of ranging diversity across Merseyside, Cheshire, Lancashire, Greater Manchester, the Isle of Man and North Wales. In addition, due to an international reputation in some areas of expertise, referrals are received from other geographical areas of the UK. 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. Due to our specialist nature and outstanding reputation our workforce also come from a wider area, including Liverpool, Cheshire, Manchester, North Wales and other surrounding areas. These factors mean that direct demographic comparisons for both our patient profile and workforce demographics are more difficult.

Our vision is to provide our patients with excellent neurosurgery, neurology, pain and spinal services, built on research and education and delivered with care, dignity and compassion in line with the Walton Way:

- **Caring** - caring enough to put the needs of others first
- **Dignity** – passionate about delivering dignity for all
- **Openness** – open and honest in all we do
- **Pride** – proud to be part of one big team
- **Respect** – courtesy and professionalism – it's all about respect

Our mission is to provide a high quality of treatment, care and patient experience in the most appropriate place for the needs of our patients.

The Walton Centre's commitments to equality, diversity, and inclusion can be encompassed in the following statements:

- 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 patients 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.

The Walton Centre is committed to reducing health inequalities, promoting equality and valuing diversity as an important part of everything we do. This document clearly describes the headline activity that has taken place in 2017/18 and more importantly it sets out the work and approaches that need to be undertaken to advance equality of opportunity. We will continue to monitor our equality diversity and inclusion progress against our action plans and report annually and openly.

Lisa Salter

Lisa Salter
Director of Nursing and Governance, Executive Lead for ED&I

2 Equality Act 2010

The Equality Act, introduced in October 2010, replaced previous anti-discrimination laws with a single Act. Bringing together 9 pieces of primary legislation and over 100 pieces of secondary legislation the Act aimed to reduce bureaucracy, simplify the legislation and ultimately ensure that people are treated fairly when using services or whilst at work.

The Act protects people from discrimination on the basis of 'protected characteristics', which vary slightly depending upon whether a person is at work or accessing services. For example, 'marriage and civil partnership' is a protected characteristic for employees but not for people using services.

The nine protected characteristics are:

- Age
- Disability
- Gender reassignment
- Pregnancy and maternity
- Marriage and civil partnership
- Race (ethnicity)
- Religion or belief
- Sex (gender)
- Sexual orientation

Equality is

'recognising and respecting that each person will have their own coping mechanisms'

The General Duty

The General Duty, as set out in the Equality Act 2010, was introduced in April 2011, and it is the General Duty which guides the everyday work undertaken within the Trust. This includes having due regard to:

- Eliminate unlawful discrimination, harassment and victimisation;
- Advance equality of opportunity between people who share a protected characteristic and those who do not; and
- Foster good relations between those who share and do not share a protected characteristic.

The Specific Duty

The Specific Duties under the Public Sector Equality Duty require public bodies to:

- Publish information to show their compliance with the Equality Duty, at least annually; and
- Set and publish equality objectives, at least every four years.

3 How the Walton Centre Pays due Regard to the General Equality Duty

The information below provides a snapshot of some important ways the Trust works to meet the requirements of The General Equality Duty. In the interests of brevity and readability it is not possible to include all actions that we take, throughout the year, so this report only highlights some of the more significant actions taken by the Trust in meeting the Equality Duty. More information can be found on the Trust's website.

3.1 Eliminating discrimination, harassment, victimisation and other prohibited conduct

Policies & Training

The Trust continues to work to improve the way we identify and address potential discrimination, to ensure that our staff, patients, and their families and carers, experience care or employment that is free from any prohibited behaviours, and that redress is transparent and open for all.

- The Trust has policies and procedures in place to tackle discrimination, harassment, bullying, victimisation, abuse, violence and aggression. These policies are both for staff, and for patients and their families.
- All policies have an equality impact assessment carried out on them prior to their approval.
- Both the induction for new starters and the three yearly mandatory eLearning equality and diversity module raise awareness of discrimination and highlight that such behaviour is not permitted. The refresher training also ensures that all staff are maintaining awareness of equality and remain up to date with any changes in legislation.
- Recruiting managers do not see any applicant's personal demographics, including their name, prior to the shortlisting stage. This helps to ensure that any potential discrimination at this stage is prevented.
- The NHS Accessible Information Standard has led to a number of actions being undertaken in the Trust to ensure we are meeting the communication support and information format needs of patients and their family members or carers who have a disability, impairment or sensory loss.

ED&I Champions

The Trust has recently introduced ED&I Champions. Recruited from a diverse range of staff from across the organisation their aim is to create a higher profile for ED&I and to drive positive culture change to further support the Trust's equality commitments. The role of the Equality and Diversity Champions are:

- To support Walton Centre patients and colleagues to make positive improvements.
- To actively influence the way in which the hospital operates, monitors, plans and develops its services and staff to reflect the value of equality and diversity.
- To promote awareness of equality and diversity issues within our services, and across the Trust as a whole and the wider community; to act as a two-way communications channel between the Trust, colleagues, people who use our services and those who care for them.
- To develop knowledge of equality and diversity issues and educate others on the value of these.

- To provide information and advice on equality and diversity issues and/or signpost people to alternative sources of information and advice within the Trust.

The Trust has conducted extra ED&I training for the ED&I Champions to enable them to work more effectively in their new roles. One example of where the ED&I Champions are already making a positive difference is in their work to foster a greater awareness of key cultural dates and events. One of the important actions for this in 2018 was the Trust's Ramadan Awareness Event. Further initiatives will be identified and implemented throughout this and coming years.

Cultural Ambassadors Programme

The Walton Centre is also part of a pilot programme with the RCN around Cultural Ambassadors. The Trust has recruited some of our Black and Minority Ethnic (BME) staff to receive training to be able to support colleagues through various Human Resources (HR) processes to ensure fairness and improved cultural awareness e.g. Disciplinary, Grievance and Capability processes. In the future, there is also potential to widen the programme out into supporting fairness during recruitment processes.

Navajo Chartermark

The Trust is proud to announce that in March 2018 the Trust successfully underwent a reaccreditation process to keep up our eligibility to use the Navajo Chartermark. This is an equality mark sponsored by InTrust Merseyside & Sefton Embrace and supported by the lesbian, gay, bisexual, and transgender (LGBT) Community networks across Merseyside. It is a signifier of good practice, commitment and knowledge of the specific needs, issues and barriers facing LGBT people in Merseyside. Navajo looks at employment practices and how services are inclusive for LGBTI people. The Trust is working with Navajo to further explore ways to deepen our understanding of, and help to remove the barriers faced by, LGBT patients and staff.

Disability Confident Employer

This year the Trust has also renewed its commitment to the Department for Work and Pensions, Disability Confident Employer Scheme. This demonstrates to applicants and employees that we welcome individuals with disabilities and long term conditions as it commits the Trust to take positive actions to ensure that we have equitable and accessible recruitment processes relating to disability. For example, guaranteeing an interview if an applicant meets the essential criteria of the person specification if they have declared a disability on their application form and requested the guaranteed interview option.

Gender Pay Gap

The Trust has met its Gender Pay Gap reporting obligations and the results are published on the Trust's website. The Trust Board has taken note of the results and will be making use of the data to inform action planning for the coming years.

Reciprocal Mentoring

The Trust has now successfully completed the first round of the Reciprocal Mentoring programme. The Reciprocal Mentoring scheme has been established in conjunction with two other local NHS Trusts. The aim of the programme is to support employee's from minority groups to further their development whilst also improving the senior leaders

understanding of what it means to be a BME employee within the Trust. Planning for the 2018 round of Reciprocal Mentoring is now at an advanced stage.

Equality Delivery System (EDS 2)

The Trust's Equality Delivery System review is currently being undertaken for 2018 in conjunction with Healthwatch and local community groups. The Trust is not seeking to increase its grades on any of the sub-goals in 2018 as the emphasis for this year's EDS2 is on the work we are doing with other Merseyside Trusts to focus on improving areas identified as real barriers by organisations who represent the views of people within each protected characteristic. This approach will enable progress to be made in areas that make a real difference, whilst continuing to support the Trust with its duties under the Public Sector Equality Duty. Once completed the grades will be submitted to NHS England and published on our webpage; see section 4 for further details.

Equality Impact Analysis

The improved Equality Impact Assessment/Analysis (EIA) is being developed further following user feedback to increase the level of guidance and support for staff completing the EIA. The electronic form is currently being used for the Cost Improvement Programmes (CIPs) process which contains both a quality impact assessment and an equality impact assessment. This means that the responsible manager must complete both sections before any CIP can be fully considered. These steps will help the Trust to ensure that it pays due regard to its obligations under the Public Sector Equality Duty of the Equality Act 2010.

Engagement

Relationships have continued to be built with all local Healthwatch groups, with equality becoming a standing item on the Patient Experience Group agenda. Involvement with other local networks and charities has included regular engagement with the Brain Charity, epilepsy patients and Navajo etc.

Learning Disability Group

The Trust has a Learning Disability Steering Group that feeds into the Trust's Safeguarding Group which in turn reports to the Board of Directors via the Patient Safety Group. The Learning Disability Steering Group meets quarterly and has developed good links with the community learning disability teams in the local areas. Members of the Trust's Learning Disability Steering Group also attend the Trust's Safeguarding Group meetings.

3.2 Advancing Equality of Opportunity between People who share a Protected Characteristic and People who don't

Human Rights, Equality Diversity and Inclusion (ED&I)

The Walton Centre has always recognised and values the fact that its patients and workforce are made up of individuals with a large diversity of backgrounds, perspectives and characteristics. However 2017/18 has marked a welcome increase in the amount of effort and focus the Trust is putting into this area. During 2017/18, there have been a number of improvements, changes and initiatives that demonstrate the higher energy levels at the Trust regarding ED&I. The Trust has also invested in the creation of a new post of Equality and Inclusion Lead to help move the ED&I agenda forward.

In November 2017 the Trust published its ED&I 5 Year Vision

This vision sets out the way forward for The Walton Centre to improve ED&I for both its patients and staff. This vision has come from both staff and patients sharing their view of what good practice would look like and how to know when it has been achieved:

- 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 patients 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.

The vision is 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 way the Quality & Patient Strategy is currently monitored. This vision will guide the Trust towards making systematic improvements around ED&I in this and coming years.

Professional Interpretation and Translation Services

The Trust contracts with professional interpreting and translation service providers who can be contacted 24 hours a day e.g. we have a contract with Action on Hearing Loss who provide sign language interpretation and translation to support our staff and patients. We recognise that this provision is essential for effective and safe communication in people whose first language isn't English, and that this provision promotes equality of opportunity as well as ensuring dignity, respect and privacy is maintained.

Support for Staff with a Disability

Access to Work is promoted within the Trust for staff with disabilities. All staff can also access Occupational Health and counselling support, as well as the support that can be provided by the HR. This includes the completion of a Tailored Reasonable Adjustment template which looks at what changes can be made to support an individual to remain in work and to have the same opportunities as employees who do not have a disability.

Workforce Race Equality Standard (WRES) 2017 Findings and Actions

The WRES requires Trusts to demonstrate progress against nine indicators focussing on workforce race equality, Board level representation and differences between the experience and treatment of White and BME staff. These findings are returned via the Unify 2 system to enable comparisons to be made between Trusts nationally, as well as being individually published on the Trust website, along with an associated action plan.

The 2017 report showed a disappointing lack of progress across most of the measures. A particular area of concern is the finding that the percentage of BME staff experiencing harassment, bullying or abuse from staff in last 12 months has significantly increased, and the similar measure in respect of experience of discrimination remains far too high. However, it should be noted that these particular indicator findings are from the first Trust wide staff survey, as opposed to a sample and therefore previous years could have been less representative. Following analysis of the WRES, discussion at Board level, and

consultation with the Trust's ED&I Steering Group and ED&I Champions, the Trust has put in place a number of actions to try and improve the experience of BME employees. Tackling bullying, harassment and discrimination will form part of the work plan for the EDI Champions in 2018. The 2018 WRES report will be published in the next couple of month which will allow further analysis of current progress. The Trust is also looking forward to producing and publishing the Workforce Disability Equality Standard (WDES) in 2018/19.

Complaints

Complaints data is monitored in respect of discrimination and other prohibited conduct. Any patterns identified would be addressed accordingly.

3.3 Fostering Good Relations between People who Share Protected Characteristics and People who don't

Many of the actions detailed above also support this aim, however detailed below are a few of the extra things the Trust does in support of fostering good relations:

- The new EIA Toolkit is being developed to actively promote community engagement in service development and redesign.
- The Trust has a Patient Experience Group. Membership includes governors and members as well as staff, Board members and Local Healthwatch this allows active dialogue and engagement between the Trust and the people using our services.
- Islam and Ramadan Awareness Event. Ramadan is an Islamic festival celebrated by Muslims across the world. It is a month long event which involves fasting during daylight hours from dawn until sunset. Fasting means abstaining from food, drink, smoking and sex. For Muslims who have to work during Ramadan, some adjustments and understanding from their colleagues can make it easier for them to work optimally during this period. To help increase understanding of Ramadan, a special event was held on 9 and 10 May 2018. This included an information stall on the first floor of the main building providing an opportunity to speak to Muslim colleagues, and to find out more about this celebration, and enjoy some traditional treats.

4 The Specific Duty and the Walton Centre

The Trust meets its Specific Duties under the Equality Act 2010 via the publication of this report and the equality objectives stated within it.

The Trust also uses the Equality Delivery System (EDS2) as our performance toolkit to support us in demonstrating our compliance with some other aspects of our General Public Sector Equality Duty. EDS2 is a toolkit that can improve the services we provide for our patients and help us to ensure better working environments, free of discrimination, for those who work with us.

The EDS2 has four key goals (with 18 specific outcomes) which are achieving better outcomes, improving patient access and experience, developing a representative and supported workforce and finally, demonstration of inclusive leadership. Each of these goals are assessed and a grading applied to illustrate progress. Involvement of the communities and organisations who represent the views of people with protected characteristics is important. The grading's applied are as follows:

1. **Undeveloped** if there is no evidence one way or another for any protected group of how people fare or Undeveloped if evidence shows that the majority of people in only two or less protected groups fare well
2. **Developing** if evidence shows that the majority of people in three to five protected groups fare well
3. **Achieving** if evidence shows that the majority of people in six to eight protected groups fare well
4. **Excelling** if evidence shows that the majority of people in all nine protected groups fare well

During 2017 and into 2018, the Walton Centre has adopted an innovative collaborative approach to delivering the EDS2 by working with Merseyside CCGs and other local Trusts. Together we have initiated a targeted approach to EDS2 engagement which sees us engaging collectively with national, regional and local organisations who represent the views of people and communities who share protected characteristics. We have developed a series of one-to-one meetings, workshops, interviews, briefings and research sessions with partner organisations and stakeholders, including to name but a few: The Race Equality Foundation, Deaf Health Champions (Sick of It Report), In Trust Merseyside, Alzheimer's Society, Age Concern and Healthwatch. This ongoing engagement is being progressed by allocating the lead responsibility for engagement around a particular protected characteristic to one Trust and then coming back together to share the insight gained on the relevant barriers and issues identified, thus reducing duplication and "consultation fatigue" with the communities we are engaging with.

The aim of the engagement is to ensure that the Walton Centre truly understands the 'barriers' individuals with protected characteristics face so as to enable the Trust to improve access and outcomes.

The Walton Centre recognises that patients and staff who share certain protected characteristics are less likely to complain, complete NHS surveys or access community networks to provide their feedback, and this level of focussed engagement with stakeholders will ensure that the entrenched barriers communities face in relation to accessing healthcare services are understood and mitigated as part of the our strategic and operational programmes. Meeting and understanding the needs of people is essential to remove disadvantage and advance equality of opportunity, so we will continue to endeavour to address these issues through mainstream plans, the way we monitor our service, business plans and strategies, procurement activity and discussions with key partners including NHS England, Clinical Commissioning Groups and community, voluntary and faith sectors. The NHS is facing unprecedented challenges and it's vitally important to ensure that our services remain accessible and can meet the needs of our whole population. In order to progress this, the Trust has set up an Equality, Diversity & Inclusion Steering Group to develop a Trust wide and SMART Equality Objective action plan that is driven by senior executives across the organisation.

Specifically in relation to EDS2, during the first quarter of 2019 the Equality, Diversity & Inclusion Steering Group will work with external stakeholders e.g. Local Healthwatch to refresh the Equality Objectives of the Trust, based on the insight gained via our joint working approach in 2017/2018. This coincides with the Trust's current equality objectives which are to be revised in 2019; which is 2 years ahead of our statutory requirement to do so.

The current equality objectives are:

- Objective 1 – Extend patient profiling (equality monitoring) data collection to all protected characteristics
- Objective 2 – Improve support for, and reporting of, disability within the workforce
- Objective 3 – Ensure ongoing involvement and engagement of protected groups including patients, carers, staff, Healthwatch and other interested parties
- Objective 4 – Ensure all staff members are paid equally for equal work done
- Objective 5 – Increase the number of BME staff within management positions

Currently grading for the vast majority of patient and public related services (Goals 1, 2 & 4) for The Walton Centre are assessed as **developing**. Once these barriers are fully understood and can be addressed and/or mitigated via mainstream business plans then the Trust can progress from **developing** status to **achieving** across the relevant outcomes and goals. The current EDS2 assessment for The Walton Centre can be viewed in Appendix 1 and below.

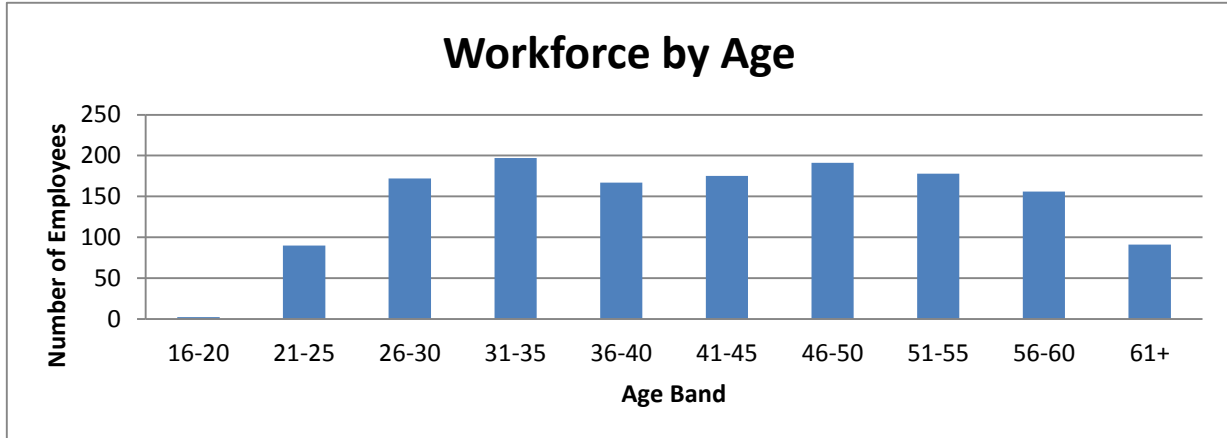
Current 2017/18 EDS2 Grades

The Walton Centre EDS2: The Goals and Outcomes			Grade Status
Goal	Sub	Description of outcome	
Better health outcomes	1.1	Services are commissioned, procured, designed and delivered to meet the health needs of local communities	Developing
	1.2	Individual people's health needs are assessed and met in appropriate and effective ways	Developing
	1.3	Transitions from one service to another, for people on care pathways, are made smoothly with everyone well-informed	Developing
	1.4	When people use NHS services their safety is prioritised, and they are free from mistakes, mistreatment and abuse	Developing
	1.5	Local health campaigns reach communities	Developing
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	Developing
	2.2	People are informed and supported to be as involved as they wish to be in decisions about their care	Achieving
	2.3	People report positive experiences of the NHS	Achieving
	2.4	People's complaints about services are handled respectfully and efficiently	Developing
A representative and supported workforce	3.1	Fair NHS recruitment and selection processes lead to a more representative workforce at all levels	Achieving
	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	Developing
	3.3	Training and development opportunities are taken up and positively evaluated by all staff	Achieving
	3.4	When at work, staff are free from abuse, harassment, bullying and violence from any source	Developing
	3.5	Flexible working options are available to all staff consistent with the needs of the service and the way people lead their lives	Developing
	3.6	Staff report positive experiences of their membership of the workforce	Developing
Inclusive leadership	4.1	Boards and senior leaders routinely demonstrate their commitment to promoting equality within and beyond their organisations	Developing
	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	Developing
	4.3	Middle managers and other line managers support their staff to work in culturally competent ways within a work environment free from discrimination	Developing

5 Workforce Profile

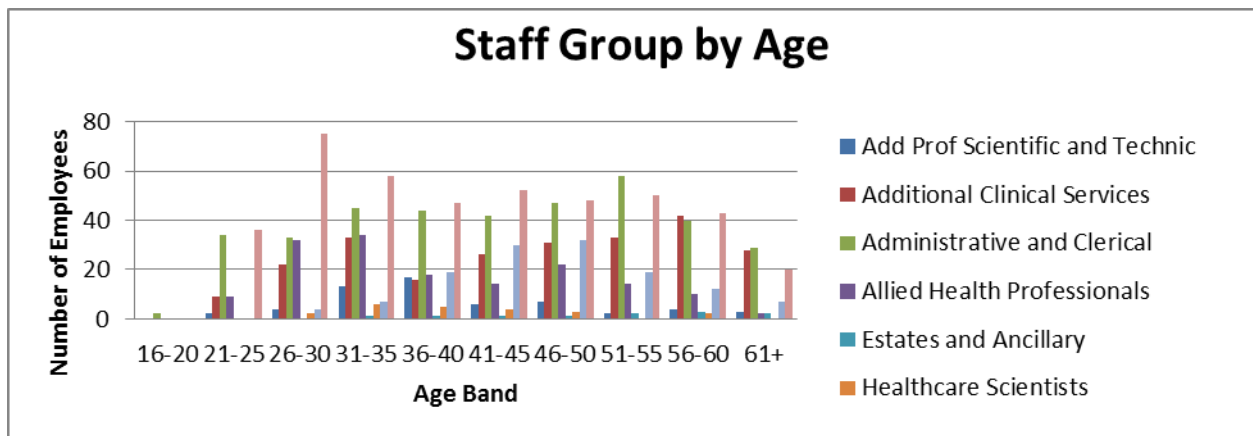
The Walton Centre workforce demographics for 1 April 2017 to 31 March 2018 are as follows:

5.1 Age



Numbers remain fairly evenly spread between all age groups from 26 through to 55 with two minor peaks at 31-35 and 46-50. The number of employees between 56 and 60 has continued to increase year on year and is now less than 1% under the numbers in the age bracket 36-40. The number of employees over 61 has also continued to increase year on year. These changes are in line with expectation given the aging population and national economic changes.

The number of employees aged below 26 remains lower compared to most age brackets over that age; however, this will be largely due to the level of qualifications required for most posts within the Trust and the requirement for all under-18s to remain in education or training.



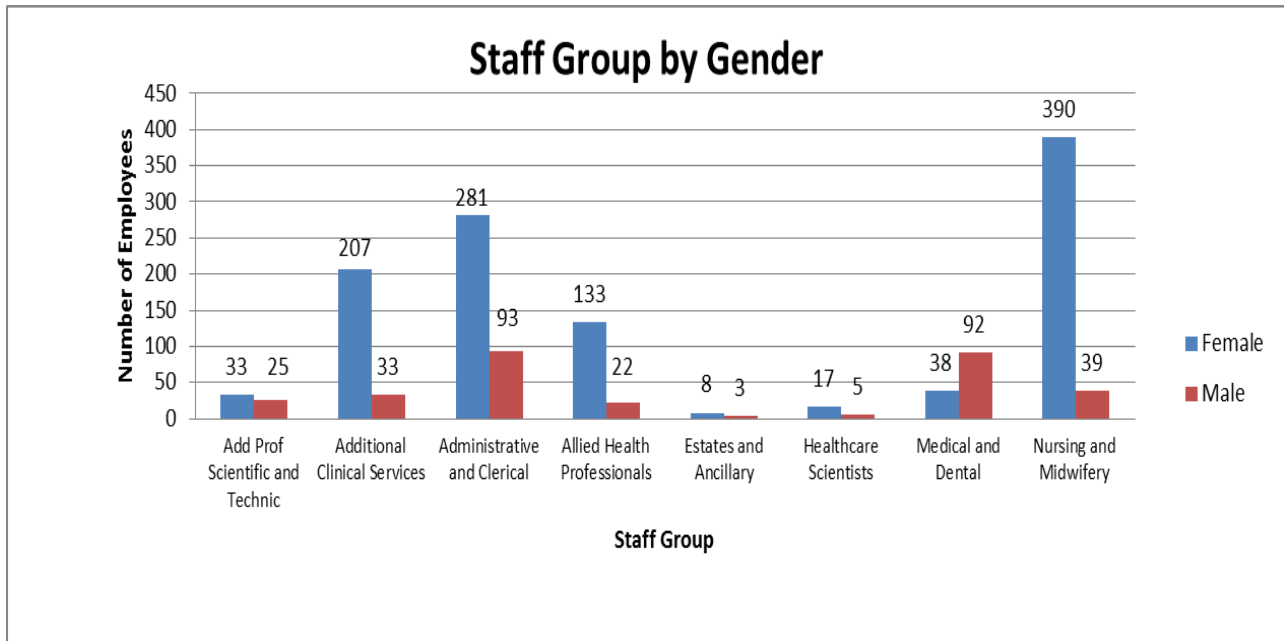
Analysis by staff group shows that the highest proportion of Registered Nurses are 26-30, this remains unchanged from previous years. Also continuing the upward trend from previous years, the percentage of Nurses above the age of 51 has risen to just over 29%. The percentage of Nurses above the age of 51 has fallen back 26% from a high of 29% in 2016.

The number of Nurses under 30 has remained relatively constant at just under 26% this year.

29% of Medical staff are aged 51 or above which is an increase on last year's figure.

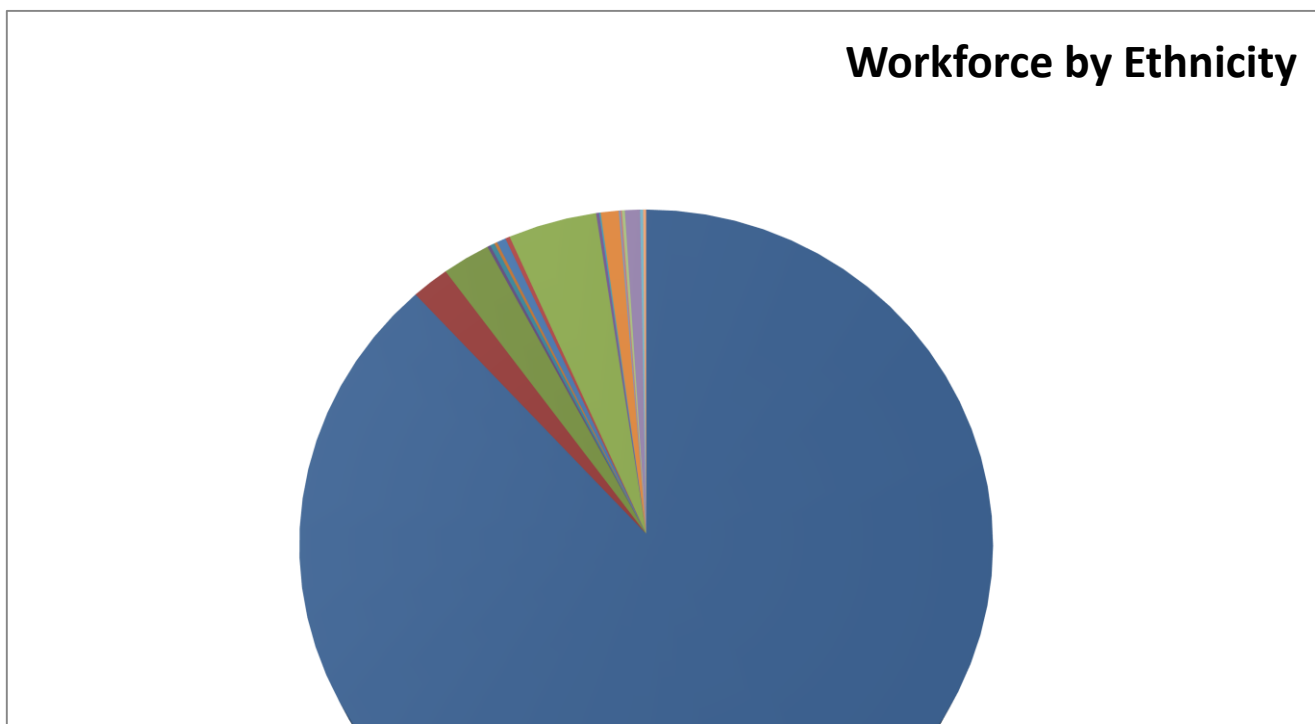
Again, as with last year, the age group 51-55 represented the highest proportion of staff for Additional Clinical Services, Admin & Clerical and Estates & Ancillary. Likewise for Allied Health Professionals (AHP's) 31-35 has remained the highest proportion, although 26-30 remains close second. No analysis has been done between age senior managers/directors since these relationships will always be highly skewed due to the nature of career pathways.

5.2 Gender



Females continue to make up the majority of the workforce at 78.01%. This is a very slight reduction from last year 78.7% and the previous year (79.9%). This shows a very slow downward trend in percentages relating to what remains a relatively stable majority female workforce. Whilst this is not consistent with the local population where approximately 50.6% are female (Census, 2011) it is similar to the national NHS demographics off 77% reported by NHS Employers The gender split within staff groups also remains fairly consistent with only Medical staff having a higher composition of males than females.

5.3 Ethnic Origin



Workforce by Ethnic Origin		
Ethnic Origin	Total	Percentage
A White - British	1217	85.76%
B White - Irish	25	1.76%
C White - Any other White background	32	2.26%
CP White Polish	2	0.14%
CY White Other European	3	0.21%
E Mixed - White & Black African	2	0.14%
F Mixed - White & Asian	6	0.42%
G Mixed - Any other mixed background	3	0.21%
H Asian or Asian British - Indian	59	4.16%
J Asian or Asian British - Pakistani	2	0.14%
K Asian or Asian British - Bangladeshi	1	0.07%
L Asian or Asian British - Any other Asian background	12	0.85%
LH Asian British	1	0.07%
LK Asian Unspecified	1	0.07%
M Black or Black British - Caribbean	2	0.14%
N Black or Black British - African	10	0.70%
P Black or Black British - Any other Black background	2	0.14%
R Chinese	2	0.14%
S Any Other Ethnic Group	16	1.13%
Undefined	6	0.42%
Z Not Stated	15	1.06%
Grand Total	1419	100.00%

As at 31 March 2018, 85.76% of the workforce identified themselves as White (including all White ESR Categories). This is a change on previous years as in 2016 90.9% of the workforce identified themselves as White, and 90.3% in 2015. The latest figures move the Trust more in line with national NHS statistics. The previous figures were broadly in line with the Liverpool population where 88.9% are estimated to be White British, Irish or Other (Census, 2011).

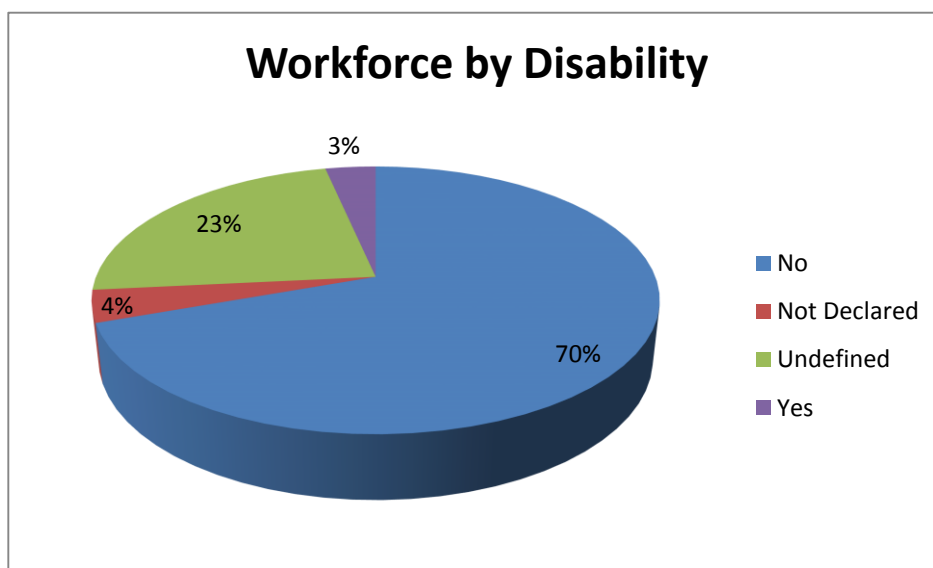
By comparison, 12.76% of the workforce identify themselves as Black and Minority Ethnic (BME). This is a positive increase on the previous year's figure which stood at 7.8%. The latest figure is just slightly above that of the Liverpool population where 11.1% are reported to be BME (Census, 2011). Those not declaring an ethnicity stood at 1.48%, which is not significantly different from previous years.

Analysis by Staff Group

The highest proportion of BME staff remains within the medical workforce. This has risen to 47% from the previous year of 33.9%. Similarly, Registered Nurses remain the second most diverse staff group with BME staff accounting for 12%; a little up on 10.5% last year.

The percentage of BME staff within Senior Managers remains significantly below the overall representation in the workforce at 1.7%. There remains no BME representation within the Directors. This remains an area highlighted on the WRES analysis and associated action plan.

5.4 Disability



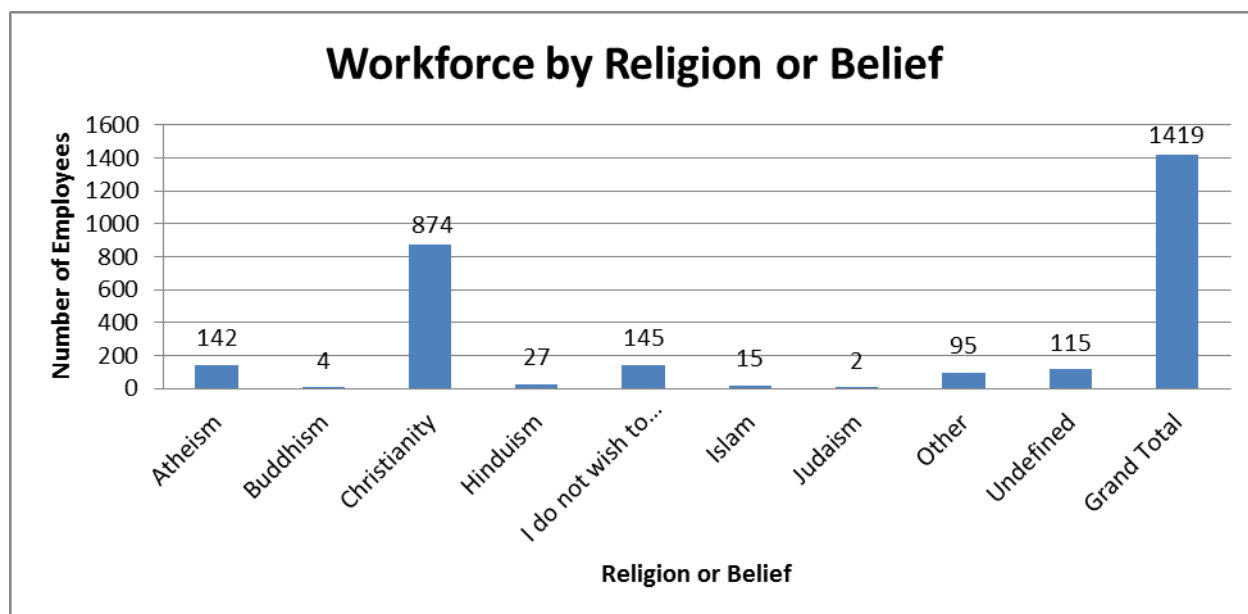
Workforce by Disability		
Disabled	Total	Percentage
No	987	69.56%
Not Declared	55	3.88%
Undefined	329	23.19%
Yes	48	3.38%
Grand Total	1419	100.00%

The number of staff whose disability status is unknown has remained roughly stable at 27% this year from 26.0% last year. This has decreased significantly from 73.4% in 2012; however, this still needs work to improve further, particularly in light of the introduction of the Workforce Disability Equality Standard (WRES) in 2019. The number of employees choosing not to declare has also decreased again this year from 4.42% to 3.9%. The number of staff declaring a disability has remained consistent at 3.38, with 3.2% in 2016 and 3.3% in 2015. However, this remains below the estimates given for the local working age population (16-64 years) where 17.9% identify themselves as having a limiting long-term illness or disability (Census, 2011).

Analysis by Staff Group

The areas with highest undisclosed rates are within Healthcare Scientists and Medical and Dental.

5.5 Religious Belief



Workforce by Religious Belief		
Religious Belief	Total	Percentage
Atheism	142	10.01%
Buddhism	4	0.28%
Christianity	874	61.59%
Hinduism	27	1.90%
I do not wish to disclose my religion/belief	145	10.22%
Islam	15	1.06%
Judaism	2	0.14%
Other	95	6.69%
Undefined	115	8.10%
Grand Total	1419	100.00%

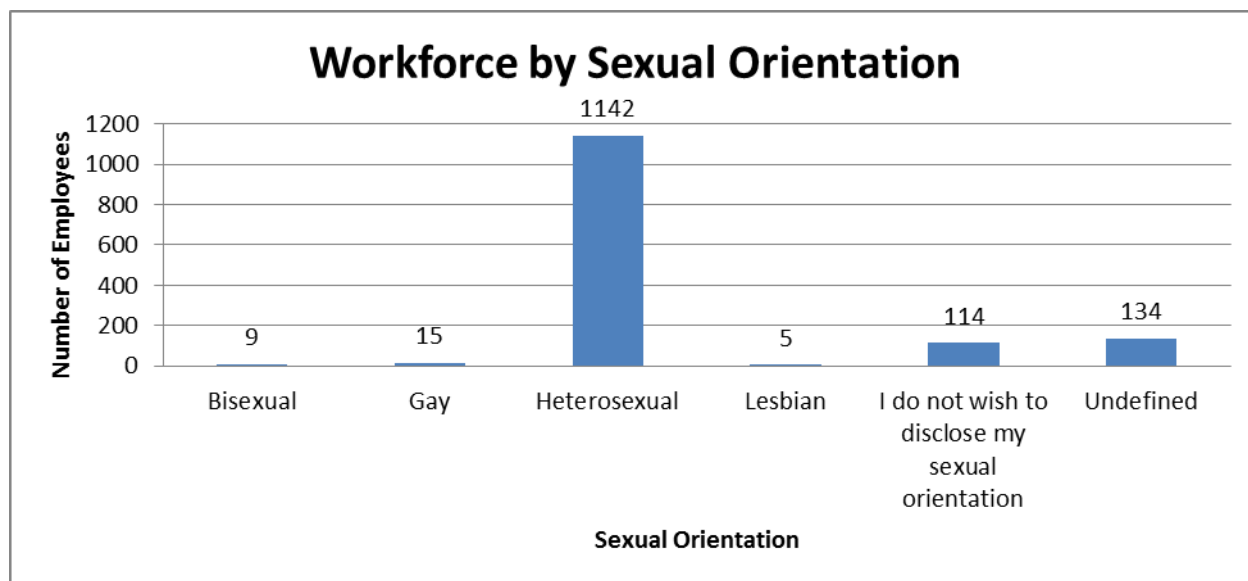
Christianity remains the most prevalent religion/belief at 61.6%; this has remained constant from last year and a notable increase from 49.3% in 2013. However, this remains slightly lower than the demographic figure for Liverpool of 71% (Census 2011).

The percentage not wishing to disclose has remained constant at 10.2% (10.3% IN 2016) but the percentage not recorded has decreased for the fifth year running to 8.10% with 9.3% last year and 27.3% in 2012.

Analysis by Staff Group

There does not appear to be any particular pattern with regard to religion or belief across different staff groups, including senior managers and Directors, or across average salaries.

5.6 Sexual Orientation



Workforce by Sexual Orientation		
Sexual Orientation	Total	Percentage
Bisexual	9	0.63%
Gay	15	1.06%
Heterosexual	1142	80.48%
Lesbian	5	0.35%
I do not wish to disclose my sexual orientation	114	8.03%
Undefined	134	9.44%
Grand Total	1419	100.00%

The percentage of the workforce identifying themselves as heterosexual has increased again to 80.48% from 78.4% last year and 76.5% in 2015. The percentage of staff identifying as gay is 1.06%. The percentage of staff identifying as Lesbian is 0.35% and staff identifying as bisexual is at 0.63%. The number not wishing to disclose and the number undefined have also both decreased again (8.03% from 8.8% and 9.44% from 10.7% respectively).

Although there is limited information available for the local Lesbian, Gay and Bisexual (LGB) population the Government has estimated that 5-7% of the National population identify as LGB. Based on this figure the Trust is underrepresented in relation to LGB staff. However, this is likely to result from the reluctance of staff to identify themselves for fear of suffering stigma and discrimination in society rather than there actually being such low numbers of LGB staff.

Analysis by Staff Group

Analysis by staff group remains consistent with last year, however, Administrative and Clerical is now the only area which has all designated sexual orientations recorded. This is different from last year when all sexual orientations were represented within Nursing, Additional Clinical Services, Additional Prof Scientific & Technical and Admin & Clerical areas. This is not indicative of significant shifts in disclosure; rather it results from the generally low reporting of sexual orientation other than Heterosexual, which means that even one or two movements within the Trust's declared LGB staff can influence the analysis significantly. There is very limited variation shown within Estates, Healthcare

Scientists and Medical staff. Senior Managers and Directors actually have greater variation than the overall workforce, with the exception of Bisexual.

5.7 Gender Reassignment

Due to the fact that data regarding gender reassignment is protected sensitive information the Trust does not currently collect this due to the limitations on the storing of such data. However, the Trust does provide support for trans staff; including information on all adverts placed on NHS jobs regarding alternative options for completion of DBS documentation, a Transgender Staff Support Policy and specific transgender awareness training sessions (upon request) to increase understanding amongst staff.

5.8 Marital Status

Workforce by Marital Status		
Marital Status	Total	Percentage
Civil Partnership	12	0.85%
Divorced	87	6.13%
Legally Separated	13	0.92%
Married	627	44.19%
NULL	21	1.48%
Single	600	42.28%
Unknown	49	3.45%
Widowed	10	0.70%
Grand Total	1419	100.00%

There remains a minimal difference between the number of staff recorded as single and the number recorded as married. The number of staff for whom the Trust has no marital status recorded has decreased for the fifth year running now at 3.45% from 4.0% and 5.85% in the previous two years.

5.9 Training and Development

A total of 651 applications were made by staff for non-mandatory training courses between April 2017 and April 2018.

Of these, all but one was approved. This figure demonstrates no bias in term of the approval of training across any of the protected characteristics.

5.10 New Starters

The following table provides some basic information on the members of staff recruited to the Trust in 2017/18.

THE WALTON CENTRE STARTERS FIGURES	
Gender	Head Count
Female	200
Male	75
Grand Total	275
Age Band	Head Count
16 - 20	15
21 - 25	56
26 - 30	38
31 - 35	38
36 - 40	30
41 - 45	19
46 - 50	19
51 - 55	27
56 - 60	24
61 - 65	7
66 - 70	1
71 & above	1
Grand Total	275
Religious Belief	Head Count
Atheism	44
Buddhism	1
Christianity	164
Hinduism	7
I do not wish to disclose my	23
Islam	6
Judaism	2
Other	18
Undefined	10
Grand Total	275
Sexual Orientation	Head Count
LGBT	5
Straight	251
Wished not to disclose	19
Grand Total	275
Ethnic Origin	Head Count
White	246
BME	25
Undefined	4
Grand Total	275
Disabled	Head Count
No	251
Wished not to disclose	2
Undefined	12
Yes	10
Grand Total	275

Further information is given in Appendix 2 about the percentages of job candidates that applied for jobs, were shortlisted and were appointed to the Trust in 2017/18 in related to Protected Characteristics.

6 Patient Profile

The following patient data is taken from the Trust's main patient record system.

6.1 Gender

Gender	Total
Male	61854
Female	85072
Indeterminate	7
Grand Total	146933

42.10% of Patients seen were male

57.90% of Patients were Female

6.2 Ethnicity

Row Labels	Inpatient	Outpatient	Grand Total
African	19	177	196
Any other Asian background	35	161	196
Any other Black background	47	145	192
Any other ethnic group	97	567	664
Any other mixed background	18	149	167
Any other White background	243	1090	1333
Bangladeshi	4	56	60
British	18455	99404	117859
Caribbean	16	84	100
Chinese	11	140	151
Indian	43	282	325
Irish	77	462	539
Pakistani	25	155	180
White and Asian	33	170	203
White and Black African	11	115	126
White and Black Caribbean	29	136	165
Not stated	448	2457	2905
No Ethnicity Recorded	277	21295	21572
Grand Total	19888	127045	146933

Overall, 16.66% of patients seen in 2017 did not declare their ethnicity – 3.65% of Inpatients and 18.70% of outpatients.

6.3 Age

Row Labels	Inpatient	Outpatient	Grand Total
Under 18	21	619	640
18-24	872	7375	8247
25-34	2209	14981	17190
35-44	3372	18380	21752
45-54	5137	26649	31786
55-64	4058	25601	29659
65-74	2988	20622	23610
75+	1231	12818	14049
Grand Total	19888	127045	146933

6.4 Religion or Belief

Row Labels	Inpatient	Outpatient	Grand Total
Agnostic	14	53	67
ANGLICAN	12	135	147
ATHEIST	124	513	637
BAPTIST	19	218	237
BUDDHIST	25	120	145
Christian	588	2533	3121
CHURCH OF ENGLAND	5356	30104	35460
CHURCH OF SCOTLAND	36	125	161
CHURCH OF WALES	40	355	395
CONGREGATIONAL	6	32	38
GREEK ORTHODOX	10	51	61
HINDU	31	124	155
JEHOVAH'S WITNESS	31	311	342
JEWISH	47	212	259
METHODIST	239	1219	1458
MORMON	8	35	43
MUSLIM	109	566	675
NO RELIGIOUS PREFERENCE	3823	18408	22231
OTHER CHRISTIAN	139	1153	1292
OTHER NON CHRISTIAN	44	105	149
PATIENT REFUSED TO GIVE INFO	10	25	35
PRESBYTERIAN	2	63	65
QUAKER	1	14	15
RASTAFARIAN		1	1
RELIGION IN ROMANIA		2	2
ROMAN CATHOLIC	3832	19487	23319
SALVATION ARMY	5	38	43
SEIKH	9	31	40
SPIRITUALIST	17	54	71
UNKNOWN	1166	5702	6868
WESLEYAN		5	5
WHITE WITCHCRAFT		6	6
No Religion Recorded	4145	45245	49390
Grand Total	19888	127045	146933

Overall 33.61% of patients seen in 2017/18 did not declare their Religion or Belief - 20.84% of Inpatients and 35.61% of Outpatients.

7 Conclusion

This annual Equality, Diversity and Inclusion Report has set out how the Walton Centre has been demonstrating 'due regard' to our Public Sector Equality Duty' and the 2010 Equality Act's Specific Duties to publish equality information and set equality objectives.

8 Contact Details

For further information the Equality and Inclusion Lead can be contacted as follows:

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Equality and Inclusion Lead

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Equality Delivery System – EDS2 Summary Report

The Equality Delivery System – EDS2 will be made mandatory in the NHS standard contract from April 2015. NHS organisations are strongly encouraged to follow the implementation of EDS2 in accordance with the ‘9 Steps for EDS2 Implementation’ as outlined in the 2013 EDS2 guidance document. The document can be found at: <http://www.england.nhs.uk/wp-content/uploads/2013/11/eds-nov131.pdf>

This *EDS2 Summary Report* is designed to give an overview of the organisation’s most recent EDS2 implementation. Once completed, this Summary Report should be published on the organisation’s website.

NHS organisation name:

The Walton Centre NHS Foundation Trust

Organisation’s Board lead for EDS2:

EDS2 lead (name/email):

Lisa Salter (Director of Nursing & Governance)

Organisation’s

Patients – Clare James
(Clare.James@thewaltoncentre.nhs.uk)
Workforce – Andrew Lynch
(Andrew.Lynch2@thewaltoncentre.nhs.uk)

Level of stakeholder involvement in EDS2 grading and subsequent actions:

- Staff Partnership Committee
- Patient Experience Group
- Business Performance Committee
- Healthwatch Liverpool

Organisation’s Equality Objectives (including duration period):

2017-2021

- *Objective 1* – Extend patient profiling (equality monitoring) data collection to all protected characteristics
- *Objective 2* – Improve support for, and reporting of, disability within the workforce
- *Objective 3* – Ensure ongoing involvement and engagement of protected groups including patients, carers, staff, Healthwatch and other interested parties
- *Objective 4* – Ensure all staff members are paid equally for equal work done
- *Objective 5* – Increase the number of BME staff within management positions

Headline good practice examples of EDS2 outcomes (for patients/community/workforce):

In November 2017 the Trust published its ED&I 5 Year Vision.

This vision sets out the way forward for The Walton Centre to improve ED&I for both its patients and staff. 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. This vision will guide the Trust towards making systematic improvements around ED&I in this year and in coming years.

EDS2 Grades (Date: 08/06/2018)		
Goal	Outcome	Grade and reasons for rating
Better health outcomes	1.1	<p>Services are commissioned, procured, designed and delivered to meet the health needs of local communities</p> <ul style="list-style-type: none"> Grade: Developing Number of protected characteristics that fare well: 4 Evidence drawn upon for rating: <p>The Trust has chosen to maintain the previous year's grade on all EDS 2 Outcomes except for Outcome 3.4, as the evidence available has not changed significantly since the previous grading. The Trust is currently working with local CCGs and other local hospital trusts on Merseyside to engage collectively across multiple protected characteristics and will form a new high level and diverse EDS 2 grading panel to assure future grading and ensure PSED compliance.</p> <p>The Trust believes that the highest quality services should be provided to all patients, which is reflected in the Trust's corporate objectives and mission statement. This belief is the key driver in the design and procurement of all its services. The Trust works in partnership with commissioners to shape their contract thus ensuring that services are commissioned to meet the needs of the local population and to reduce health inequalities. Equality performance is routinely monitored in the quality contract with the Trust's commissioners.</p> <p>Any new services or existing services undergoing change are assessed for possible equality impact on patients, visitors and staff. In addition, services are designed to be compliant with the Royal College of Nursing and National Institute for Health and Clinical Excellence (NICE) standards and guidelines, and are fully accredited by awarding bodies.</p> <p>The Trust believes that the services offered by the Trust are available to all irrespective of their protected characteristics, and data from the patient data report, complaints monitoring, patient surveys and engagement supports this belief. Patients, carers, Foundation Trust members and other stakeholders and local organisations and community groups are consulted with and involved in the design and delivery of services, thus ensuring that the health needs of the local communities are considered. All tenders assess equality and diversity, with responses considered as part of the tender process. All contracts include equality clauses.</p> <p>For this outcome, the Trust has good evidence and data to demonstrate that services are equality impact assessed. The Trust can also demonstrate that the health and well-being of its staff and patients is taken seriously through strategic planning processes and policy making. Patients from all protected characteristics are engaged with in the above processes, but the Trust currently does not capture all characteristics and therefore is unable to demonstrate a higher number of protected characteristics that fare well. Continuing actions will be implemented to address these issues in the next 12 months.</p>
	1.2	<p>Individual people's health needs are assessed and met in appropriate and effective ways</p> <ul style="list-style-type: none"> Grade: Developing Number of protected characteristics that fare well: 4 Evidence drawn upon for rating:

	<p>The Trust has chosen to maintain the previous year's grade on all EDS 2 Outcomes except for Outcome 3.4, as the evidence available has not changed significantly since the previous grading. The Trust is currently working with local CCGs and other local hospital trusts on Merseyside to engage collectively across multiple protected characteristics and will form a new high level and diverse EDS 2 grading panel to assure future grading and ensure PSED compliance.</p> <p>The Trust remains in a similar position for sub goal 1.2. Due to the limited data captured the Trust is unable to evidence further progression to show all protected characteristics fair well. However, processes are in place to ensure that all patients' health needs are assessed and met regardless of protected characteristics. The Trust is committed to provide individualised patient care and, where required, protected characteristics are taken into account during the health needs assessment and through the patient journey. For example, the Trust ensures that reasonable adjustments are made for disabled patients, patients with learning disabilities, and patients with dementia. In addition, the Trust has access to 24-hour interpretation services that cover the languages or dialects that are spoken within the organisations catchment area.</p> <p>Following an individual health needs assessment, either in an outpatient, inpatient or in a community setting, all patients are provided access to the services they require in an appropriate and effective manner. The Trust ensures effective assessments are undertaken and case note and nursing quality audits support this process.</p> <p>Risk assessments are undertaken on all patients and therefore from all protected characteristics in relation to falls, pressure ulcers, venous thromboembolism (VTE) and nutrition, in line with Commissioning for Quality and Innovation (CQUIN) payment targets and these are reported in the quality accounts. The assessment includes review of patient's religious and cultural requirements, communication and care requirements, family support and carer needs. Individual care plans are developed for each patient and reviewed throughout their period of care. These plans are contributed to by all members of the Trust multidisciplinary team as and referrals made to subsequent services such as smoking cessation, dieticians, support groups or district nursing and rehabilitation services as appropriate.</p> <p>For this outcome, the Trust is satisfied that the processes in place across the organisation allow for all the patients who are referred to services or self-refer, where appropriate, are provided with individualised health needs assessments. Although quantitative data is not available for all protected characteristics, plans are in place to address this.</p>
1.3	<p>Transitions from one service to another, for people on care pathways, are made smoothly with everyone well-informed</p> <ul style="list-style-type: none"> • Grade: Developing • Number of protected characteristics that fare well: 4 • Evidence drawn upon for rating: <p>The Trust has chosen to maintain the previous year's grade on all EDS 2 Outcomes except for Outcome 3.4, as the evidence available has not changed significantly since the previous grading. The Trust is currently working with local CCGs and other local hospital trusts on Merseyside to engage collectively across multiple protected characteristics and will form a new high level and diverse EDS 2 grading panel to assure future grading and ensure PSED compliance.</p> <p>The Trust has numerous examples to demonstrate effective and appropriate transitions from services to support individual needs. This happens during transfer of patients into the Trust from the Trauma Network, from District General Hospitals, from other specialist Trust, for example Alder Hey, and GP referrals. We also transfer patients onto various points of care, including services within the Rehab Network, repatriating hospitals and social care or specialist services. This includes patients from Wales and the Isle of Man.</p> <p>Individual care plans are developed for each patient and reviewed throughout their period of care. The patient's assessment includes a review of their religious and cultural requirements, communication and care requirements, family support and carer needs. These plans are contributed to by all members of the Trust's multidisciplinary teams with input from the patient and carers, alongside health and social care professionals. Any change in services provided is planned and communicated with all concerned and any referrals are made to subsequent services with full handover of information.</p> <p>The Trust has good links with local communities and social services across its footprint. Holding multi-disciplinary meetings with internal and external stakeholders, as well as family members, to ensure arrangements are agreed and planned in the best interests of individual patients.</p> <p>The Trust is currently working to ensure that the needs of people with learning disabilities are fully taken into account in accessing services and in transitions. Patients who have learning disabilities are encouraged to utilise the Traffic Light Assessment system the Trust has in place which gives consistent and current information about the patient and ensures continuity of care.</p> <p>The Trust actively signposts carers to appropriate support, includes them as partners in care and has developed a Carer's Strategy identifying how the Trust will continue to support and work with carers in the future. The Trust is currently allocating space for a carers resource where it will provide information and a quiet space for carers to access. This resource will be supported by the Brain Charity in partnership with the Trust.</p> <p>For this outcome, despite good examples, the Trust cannot provide data to demonstrate that people from all protected groups are supported and have smooth transitions between services. However, complaints received by the organisation do not demonstrate that any protected characteristics are discriminated against during this process.</p>
1.4	<p>When people use NHS services their safety is prioritised and they are free from mistakes, mistreatment and abuse</p> <ul style="list-style-type: none"> • Grade: Developing

	<ul style="list-style-type: none"> • Number of protected characteristics that fare well: 4 • Evidence drawn upon for rating: <p>The Trust has chosen to maintain the previous year's grade on all EDS 2 Outcomes except for Outcome 3.4, as the evidence available has not changed significantly since the previous grading. The Trust is currently working with local CCGs and other local hospital trusts on Merseyside to engage collectively across multiple protected characteristics and will form a new high level and diverse EDS 2 grading panel to assure future grading and ensure PSED compliance.</p> <p>The Trust believes that patient safety and quality must be at the heart of everything it does. The Quality Accounts Annual Report provides the back drop to demonstrate the organisations commitment to improving the quality of services and safety of care. The Trust must ensure that it listens to and acts on feedback received.</p> <p>The Trust takes patient safety very seriously and has reported on several current work streams within the Quality Accounts report, including medication errors, cancelled operations and healthcare acquired infections. Data is available for 4 protected characteristics at the present time however, as previously stated, work is being undertaken to extend the data collection systems to improve data capture.</p> <p>Patient Led Assessment of Cleanliness and Environment (PLACE) inspections are carried out annually. Teams are made up of patient representatives and members of staff. The visits are unannounced and intended to review the hospital for standards in cleanliness, hand hygiene, quality of accommodation and food</p> <p>The organisation has a system in place whereby incidents of abuse must be reported by staff whether the abuse is directed at staff by patients, patient to patient or patient to staff, patient to patient and staff to patient. Abuse includes behaviours such as violence, verbal abuse, gestures, sexual or racial abuse. Reporting is web based, and all incidents are investigated thoroughly and actions undertaken to address the behaviours. All incidents are reported through the appropriate governance committee structures. Some incidents, such as neglect, abuse of vulnerable adults or children, are reported directly to the Strategic Executive Information System (STEIS) as per NHS standard procedures for external reporting.</p> <p>Reporting incidents by protected characteristic is difficult at the present time. Work is being undertaken to tie in together the three data systems required: the patient administration system, the electronic staffing record and the incident reporting system in order that data can be gathered for protected characteristics. The Trust seeks causes through incident reporting and whistle-blowing systems, which informs actions to be undertaken. Therefore, having a robust and safe complaints and whistle-blowing process is vital. Policies are in place to protect people making complaints and follow strict guidelines. Staff and patients are able to make complaints without fear of victimisation.</p> <p>The Trust has a Safeguarding Adults and Children team to ensure the Trust operates within national statutory and non-statutory guidance for on safeguarding vulnerable people. Policies have been introduced to provide guidance to staff on the management of allegations of abuse and deprivation of liberty safeguards. In addition, staffs have access to taught sessions and e-learning training packages on safeguarding issues.</p> <p>For this outcome, the Trust firmly believes that all people from all protected characteristics are given the same protection in accordance with its mission statement to provide the very best care for each patient on every occasion, which is at the core of everything it does. However, grading has been identified as developing. This is due to the good data and evidence to demonstrate patient safety across the protected characteristics available in comparison to the less adequate data available for incident reporting of bullying or harassing behaviours. Patients from all protected characteristics are engaged with in the above processes.</p>
1.5	<p>Screening, vaccination and other health promotion services reach and benefit all local communities</p> <ul style="list-style-type: none"> • Grade: Developing • Number of protected characteristics that fare well: 4 • Evidence drawn upon for rating: <p>The Trust has chosen to maintain the previous year's grade on all EDS 2 Outcomes except for Outcome 3.4, as the evidence available has not changed significantly since the previous grading. The Trust is currently working with local CCGs and other local hospital trusts on Merseyside to engage collectively across multiple protected characteristics and will form a new high level and diverse EDS 2 grading panel to assure future grading and ensure PSED compliance.</p> <p>The Trust has an extensive range of health programmes and initiatives in place to support staff and patients alike in accessing public health, vaccination and screening programmes. The Trust is able to provide evidence to demonstrate that people are accessing services; however, due to the limitations of the patient administration system, this is only possible for 4 of the protected characteristics. Work is underway to enhance the current data collection systems to cover all protected characteristics.</p> <p>Throughout the hospitals wards, outpatients and public areas there is an extensive range of public health information for staff and patients to access, examples being for infection control and smoking cessation. Audits are undertaken by volunteers to ensure sufficient coverage and appropriate placement of information is provided. All patient information is available on request in alternative formats. Interpreters are utilised to ensure communication is most effective.</p> <p>Health, vaccination and screening programmes include: pre-natal advice for epilepsy patients, flu vaccination programmes and smoking and</p>

		<p>alcohol intake screenings. After a positive trial for epilepsy patients a number of Nurse advice lines have also been rolled out to enable patients to get disease specific advice and support between appointments.</p> <p>The Trust believes that a healthy workforce leads to safer and better patient care and is committed to improving the health and wellbeing of all staff. The Trust has also been re-accredited with the Workplace Wellbeing charter and continues to run regular schemes and initiatives including health checks, fitness classes, various mental well-being initiatives, discounted weight loss programmes.</p> <p>For this outcome, the Trust is again able to present data for 4 of the protected characteristics for patients, and all but 1 protected characteristics for staff (although not all staff services are monitored for equality purposes).</p>
Improved patient access and experience	2.1	<p>People, carers and communities can readily access hospital, community health or primary care services and should not be denied access on unreasonable grounds</p> <ul style="list-style-type: none"> • Grade: Developing • Number of protected characteristics that fare well: 4 • Evidence drawn upon for rating: <p>The Trust has chosen to maintain the previous year's grade on all EDS 2 Outcomes except for Outcome 3.4, as the evidence available has not changed significantly since the previous grading. The Trust is currently working with local CCGs and other local hospital trusts on Merseyside to engage collectively across multiple protected characteristics and will form a new high level and diverse EDS 2 grading panel to assure future grading and ensure PSED compliance.</p> <p>All patients, carers and communities can readily access Trust services via referral from GP's and other health care providers and via intra-Trust referrals from service to service. Due to the limitations of the current patient administration system (PAS), the Trust is only able to provide quantitative data for 4 of the protected characteristics: namely, age, ethnicity, religion and belief and sex. Plans are already in place to update PAS to collect additional information regarding disability, sexual orientation and carer status.</p> <p>The Trust recognises that accessing services can be more difficult for some people – such as people with a disability, people with learning difficulties or people whose first language is not English. The Trust is committed to ensuring that reasonable adjustments are made for disabled patients and patients with learning difficulties where required. For example, where a patient is distressed by waiting rooms and bright lighting, staff arrange for the patients appointment to be first on the list and the patient seated in a quiet area to wait for their appointment, thus reducing anxiety for the patient and carer or relatives. Reasonable adjustments are made on a regular ad hoc basis, although the Trust does not record this officially for all disabilities.</p> <p>Pictorial menus have also been developed to support patients to choose their meals and interpreters are in place to support patients who are unable to read or comprehend English. The Trust has implemented the Accessible Information Standard and is working on ensuring this is fully implemented. Since its implementation we have received requests from a number of patients to meet their needs and have been able to accommodate all of these. When patients telephone to make appointments, the access, booking and choice receptionists ask patients whether they have caring responsibilities or any disability in order to ensure that the best appointment possible is provided to suit their needs. Patients are also able to make appointments via email if preferred. Text messages are also sent to patients to remind them of their appointment, and the Trust has a self-check in kiosk, which has been reviewed regarding its accessibility.</p> <p>The Trust has a Learning Disability Steering Group that feeds into the Trust's Safeguarding Group which in turn reports to the Board of Directors via the Patient Safety Group. The Learning Disability Steering Group meets quarterly and has developed good links with the community learning disability teams in the local areas. Members of the Trust's Learning Disability Steering Group also attend the Trust's Safeguarding Group meetings</p> <p>The Trust has an interpreting service that is readily available and covers languages and dialects required, there also a provision for British sign language. Language interpretation is available face to face and by telephone. The Trust has an interpreting policy to ensure that staff understand how to access the interpreting services.</p> <p>'Pathfinder' volunteers have been recruited to support patients to navigate around the hospital and the Trust is working with local communities and charities to ensure training is appropriate regarding peoples cultural and disability requirements, i.e. patients with vision impairment being guided appropriately.</p> <p>For this outcome, the Trust is able to demonstrate that patients, carers and communities from 4 of the protected characteristics readily access services and there are no obvious concerns as demonstrated in the patient data report.</p>
	2.2	<p>People are informed and supported to be as involved as they wish to be in decisions about their care</p> <ul style="list-style-type: none"> • Grade: Achieving • Number of protected characteristics that fare well: 6 • Evidence drawn upon for rating: <p>The Trust has chosen to maintain the previous year's grade on all EDS 2 Outcomes except for Outcome 3.4, as the evidence available has not changed significantly since the previous grading. The Trust is currently working with local CCGs and other local hospital trusts on Merseyside to engage collectively across multiple protected characteristics and will form a new high level and diverse EDS 2 grading panel to assure future</p>

	<p>grading and ensure PSED compliance.</p> <p>The Trust is committed to ensure that all patients, irrespective of protected characteristics, are informed, supported and involved in their diagnosis and decisions about their care where appropriate.</p> <p>The National Inpatient Survey is the main source of reporting the perceptions of patients across the NHS and is used in comparative performance tables and quality indicators. Action plans have been developed and targeted work undertaken where patient perception has been less than anticipated. Improvements were made over the last few years with the result that when asked, the majority of patients felt they had been involved in decisions about their care, had been kept informed about medication side effects and were provided with information in a way that was easy to understand. Local real-time surveys and the regular patient listening events undertaken across the Trust support the findings of the national survey.</p> <p>The Trust implemented a Ticket Home scheme on all wards. The aim of the scheme is to improve discharge planning through a focus on the predicted date of discharge, and recognizing as good practice to inform patients and their carers of their predicted discharge date and so improve patient experience by allowing patients to feel involved in decisions about their discharge. It also allows patients and their families to plan accordingly.</p> <p>All patients give consent to treatment in line with Trust and national consent policies. The Trust policy has recently been reviewed and reflects discussions with local communities.</p> <p>The Trust has an active Patient Information Group which includes patients and the public and supports patient information developed across the Trust. Standard, easy read and talking leaflets are being developed continually. The Trust strives to meet the communication needs of all patients with pictorial menus to support patients to make choices and the roll out of the Accessible Information Standard.</p> <p>Staff are able to access the interpreting services to ensure that patients whose first language is not English, or those patients who use British Sign Language, are fully able to understand their diagnoses and treatment. Indeed, where patients are to be given 'bad news' interpreting provision takes place face to face and not by telephone.</p> <p>For this outcome, the Trust is again able to demonstrate that patients from 4 of the protected characteristics are informed and supported to be as involved as they wish to be in decisions about their care. However, changes are underway to improve the data monitoring information collected at a local level. The national inpatient survey is limited to 6 protected characteristics at the present time.</p>
2.3	<p>People report positive experiences of the NHS</p> <ul style="list-style-type: none"> • Grade: Achieving • Number of protected characteristics that fare well: 6 • Evidence drawn upon for rating: <p>The Trust has chosen to maintain the previous year's grade on all EDS 2 Outcomes except for Outcome 3.4, as the evidence available has not changed significantly since the previous grading. The Trust is currently working with local CCGs and other local hospital trusts on Merseyside to engage collectively across multiple protected characteristics and will form a new high level and diverse EDS 2 grading panel to assure future grading and ensure PSED compliance.</p> <p>The Trust was assessed as Outstanding by the CQC in April 2016. As part of this assessment NHS England reviewed and assessed the delivery of care to patients and their experiences when accessing services. They also undertook a review of equality and diversity provision and compliance within the Trust and found the outcome to be good.</p> <p>Feedback through surveys and social media indicate a very good patient experience of services at the Walton Centre. In CQC National Surveys results do not indicate any discrimination due to a particular characteristic. Scheduled quarterly reports on all patient experience and dignity and respect activities are presented to the Trust Board and to the specialist CCG. In addition, the complaints department publishes a regular report to the Trust Board on the experiences of patients and how issues have been resolved. This information also goes to Patient Experience Group which has representatives from the Governing Body, Healthwatch and local charitable organisations.</p> <p>Local surveys are performed by Trust volunteers routinely on our wards with patients. Patients are asked to complete a questionnaire directly onto a tablet computer with the assistance of the volunteer if this is needed. Ad hoc surveys are also undertaken across the Trust using the real – time electronic capture devices to enable service reviews, benchmarking and development of services to be achieved. Listening weeks are held quarterly across the organisation to listen to inpatients experiences of care and life on a ward. Results from the Listening weeks have been consistently good to excellent, and feedback informs the Trust Patient Experience Action Plan.</p> <p>The Trust has Dignity Champions across the organisation with each ward having at least one Dignity Champion. The Champions act as role models, identifying breaches of dignity in care, addressing and challenging issues as they arise and promoting dignity in care for every patient.</p> <p>The Trust has already identified gaps in engagement with some seldom heard groups, such as gypsy, traveller and Roma communities, homeless people or lesbian, gay and bisexual communities. Work will continue to forge better relationships with all community groups to ensure that their voices are heard through partnership working with local communities and interest groups, CCGs and Local Authorities and the Health watch.</p> <p>For this outcome, the Trust is firmly committed to listening to the views of patients, carers and other local interest groups and communities and</p>

		<p>ensuring positive patient experience. Evidence from all of the above leads us to suggest that we are Achieving with regards to this sub-goal.</p>
<p style="writing-mode: vertical-rl; transform: rotate(180deg);">A representative and supported workforce</p>	<p>2.4</p>	<p>People’s complaints about services are handled respectfully and efficiently</p> <ul style="list-style-type: none"> • Grade: Developing • Number of protected characteristics that fare well: 4 • Evidence drawn upon for rating: <p>The Trust has chosen to maintain the previous year’s grade on all EDS 2 Outcomes except for Outcome 3.4, as the evidence available has not changed significantly since the previous grading. The Trust is currently working with local CCGs and other local hospital trusts on Merseyside to engage collectively across multiple protected characteristics and will form a new high level and diverse EDS 2 grading panel to assure future grading and ensure PSED compliance.</p> <p>Complaints about our services are taken very seriously and all concerns and complaints are investigated by Patient Experience Team, which incorporate the Patient Advice and Liaison Service and are recorded on the Trust’s electronic database. Statistical information and lessons learnt are reported to the Patient Experience Group and the Quality Committee and Trust Board on a quarterly basis. This report also highlights actions taken as a result of complaints.</p> <p>A patient experience and engagement strategy has been developed and ratified in partnership with patients, carers, staff and other local interest groups to ensure that the Trust engages, involves and informs people from all backgrounds in the best ways possible.</p> <p>The Trust Board continues to recognise the importance of hearing the patients’ voice directly through a patient story which is provided to the Trust Board at the start of the meeting.</p> <p>The Trust records only 3 protected characteristics when patients complain. This is an area we have identified as needing further work and will be included in the Trust Equality Action Plan. This will enable further detailed analysis to ensure there are no patterns or themes.</p> <p>The Trust has set itself targets for responding to formal complaints, based on an initial assessment and in discussion with the complainant. In most cases this target is within 25 working days of receipt but can be extended in consultation with the complainant. This is monitored and reported quarterly to Trust Board members and monthly to the Chief Executive and Executive Directors. Trends over the last few years indicate an increased level of efficiency in the complaints process for patients of most groups.</p> <p>For this outcome, whilst the Trust feels it has strong processes in place to respond to all complaints due to the lack of data capture we are unable to evidence this for many of the individual protected characteristics.</p>
	<p>3.1</p>	<p>Fair NHS recruitment and selection processes lead to a more representative workforce at all levels</p> <ul style="list-style-type: none"> • Grade: Achieving • Number of protected characteristics that fare well: 6 • Evidence drawn upon for rating: <p>The Trust has chosen to maintain the previous year’s grade on all EDS 2 Outcomes except for Outcome 3.4, as the evidence available has not changed significantly since the previous grading. The Trust is currently working with local CCGs and other local hospital trusts on Merseyside to engage collectively across multiple protected characteristics and will form a new high level and diverse EDS 2 grading panel to assure future grading and ensure PSED compliance.</p> <p>The Trust uses NHS Jobs2 which collects data on 7 of the 9 protected characteristics (gender reassignment and pregnancy/maternity are currently not recorded). Recruiting managers are unable to see any of the monitoring information at any point and are also unable to see the applicants name or right to work status until after the shortlisting process has been completed either. All figures and demographics can be found in the E&D Workforce Annual Report 2017 however the following outlines a brief overview and some additional actions taken to support a fairer recruitment process.</p> <p>The Trust remains a Disability Confident employer (previously referred to as Two Ticks), and therefore continues to guarantee an interview to all applicants who declare that they have a disability and would like to be considered under this scheme, providing they meet the essential criteria for the vacancy. The data shows that an equal percentage of applicants with a disability (30.3%) were shortlisted compared to those stating they do not have a disability (29.7%).</p> <p>Although NHS Jobs2 is a web-based system hard copy application forms are also available in other formats upon request. All candidates are also asked in their invite to interview if they require any reasonable adjustments to be made for their interview and these are always accommodated. Once appointed, and throughout an employee’s employment, where necessary the Trust’s occupational health department will be consulted to advise on any reasonable adjustments which need to be made.</p> <p>Various initiatives to encourage and enable younger individuals to gain employment and experience within the NHS.</p> <p>Although not recorded via NHS Jobs2 work has been done to support applicants from ‘trans’ individuals. Guidance is provided on all adverts advising that if any trans applicants require a DBS there is a process they can use to protect any previous identity being disclosed. A transgender staff support policy has also been developed for any employees who are considering undergoing, currently undergoing or have undergone gender</p>

	<p>reassignment. The Trust was awarded the Navajo Chartermark recognising this and other initiatives to support LGBT applicants and staff.</p> <p>The Trust is aware that there is a notable difference in the percentage of BME applicants appointed compared to White applicants. Changes to resident labour market test restrictions and changes to immigration rules may have in part affected this but this is an area we are investigating further in line with the WRES. There were no other significant differences to the protected characteristics captured.</p>
3.2	<p>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</p> <ul style="list-style-type: none"> • Grade: Developing • Number of protected characteristics that fare well: <p>Evidence drawn upon for rating:</p> <p>The Trust has chosen to maintain the previous year's grade on all EDS 2 Outcomes except for Outcome 3.4, as the evidence available has not changed significantly since the previous grading. The Trust is currently working with local CCGs and other local hospital trusts on Merseyside to engage collectively across multiple protected characteristics and will form a new high level and diverse EDS 2 grading panel to assure future grading and ensure PSED compliance.</p> <p>Gender Pay Gap</p> <p>The Trust has met its Gender Pay Gap reporting obligations and the results are published on the Trust's website. The Trust has taken note of the results and will be making use of the data to inform action planning for the coming year.</p>
3.3	<p>Training and development opportunities are taken up and positively evaluated by all staff</p> <ul style="list-style-type: none"> • Grade: Achieving • Number of protected characteristics that fare well: 7 • Evidence drawn upon for rating: <p>The Trust has chosen to maintain the previous year's grade on all EDS 2 Outcomes except for Outcome 3.4, as the evidence available has not changed significantly since the previous grading. The Trust is currently working with local CCGs and other local hospital trusts on Merseyside to engage collectively across multiple protected characteristics and will form a new high level and diverse EDS 2 grading panel to assure future grading and ensure PSED compliance.</p> <p>The Trust has done a lot of work around improving access to training and development over the last 12 months; this has been to support all protected characteristics but in particular to support BME staff. The Trust has also reviewed all mandatory training and has now made equality, diversity & human rights training mandatory on a 3 yearly basis, as opposed to a one off session. Furthermore, the Trust's OLM e-Learning allows employees to complete parts of their mandatory training at a time and place convenient to them. Adjustments have been accounted for to support individuals as needed including 1:1 support sessions.</p> <p>Following the findings from the WRES a BME Staff Network was established. Feedback from this group suggested BME staff were not always aware of opportunities available to them. In response to this targeted communications are sent to BME staff to increase awareness around certain courses and opportunities. This has included ensuring BME representation on a recent accredited Coaching Course, gaining representation for a regional BME group, circulating information about the Stepping Up Programme aimed at developing black, Asian and minority ethnic (BAME) colleagues in bands 5 – 7 and the Ready Now Programme for bands 8a and above. A Reciprocal Mentoring Scheme has also been continued this year to support the development of BME staff and support senior leaders in enhancing their awareness and understanding.</p> <p>All training opportunities are well publicised, through weekly communications and the monthly team brief. Data is collected on 7 of the protected characteristics (gender reassignment and pregnancy/maternity are not captured, although questions are asked around pregnancy where appropriate to ensure training can be adjusted where necessary). Analysis for all data can be found within the E&D Annual Report however the general findings show no concerning aspects. In comparison to last year there is no over-representation of females applying for training. There is however still an under-representation of BME staff, compared to the overall workforce demographics however the steps discussed above should hopefully address any differences observed. The percentages of applications by age group, sexual orientation and religion or belief are all comparable with the workforce demographics with the percentage by disability also being broadly in line.</p> <p>The national staff survey results show no differences in the quality of non-mandatory training, learning or development with regards to age, or gender. There is a slightly lower response from individuals who have a disability but a much higher response from BME staff. There is now some differences with regards to MBE staff believing the organisation provides equal opportunities for career progression / promotion White – 90.15%, BME – 68.18%. There is an action plan in place to identify and rectify the causes of this gap in perceptions.</p>
3.4	<p>When at work, staff are free from abuse, harassment, bullying and violence from any source</p> <ul style="list-style-type: none"> • Grade: Developing • Number of protected characteristics that fare well: 6 • Evidence drawn upon for rating: <p>The Trust has chosen to maintain the previous year's grade on all EDS 2 Outcomes except for Outcome 3.4, as the evidence available has not changed significantly since the previous grading. The Trust is currently working with local CCGs and other local hospital trusts on Merseyside to engage collectively across multiple protected characteristics and will form a new high level and diverse EDS 2 grading panel to assure future grading and ensure PSED compliance.</p> <p>Data in respect of all employee relation cases (grievances, disciplinaries, and dignity at work) is monitored against the 7 protected characteristics</p>

	<p>currently recorded in ESR. The E&D Annual Report includes analysis of this.</p> <p>In relation to race, monitoring is also conducted via the Workforce Race Equality Standard (WRES). The data shows some negative trends or anomalies relating to the percentage of staff experiencing harassment, bullying or abuse from patients, relatives or the public in last 12 months: White – 26.43%, BME – 37.84%. Feedback from the BME staff network acknowledged that the Walton Centre is a good place to work and staff did not have many concerns regarding discrimination. This upward trend is also reflected in the percentage of staff experiencing harassment, bullying or abuse from staff in last 12 months; White – 17.88%, BME – 28.95%. The Trust is exploration further to understand and reverse this trend. In 2016 the relative likelihood of BME staff entering the formal disciplinary processes compared to White staff = 1.98 times greater. In 2017 Relative likelihood of BME staff entering the formal disciplinary processes compared to White staff = 2.26 times greater. These percentages relate to quite small numbers of cases, further analysis of these BME cases has shown that there are comparison cases for White staff for each, with the same outcome being given. So, there is no indication that the formal disciplinary process is unfair once triggered, rather, it would indicate that there is a need for the Trust to gain a better understanding of the reasons for the differential in the rates of BME staff entering the formal disciplinary process. The further actions to address this difference have been identified.</p> <p>The figures for disability are in line with the overall workforce demographics which is positive as there has been a higher percentage compared to the workforce statistics for the last two years.</p> <p>Due to the nature of the patients treated by the Walton Centre aggression is quite common and is often a symptom of their illness. Whilst any patient behaving inappropriately will be spoken to it is often the case that they are either unable to help their actions or they forget the warning given, this makes it very difficult to eradicate this behaviour completely, however, the Trust does try to offer staff additional support in these case.</p> <p>Initiatives undertaken to try and ensure staff feel able to raise any concerns and to enable the Trust to address these issues include:</p> <ul style="list-style-type: none"> ○ Staff listening weeks ○ CQC internal visits ○ Friends and family tests ○ Dignity at Work Policy ○ Raising Concerns Policy ○ Violence and Aggression Training ○ A number of trained mediators who can support in resolving conflict without escalation where necessary ○ The use of exit questionnaires and interviews
3.5	<p>Flexible working options are available to all staff consistent with the needs of the service and the way people lead their lives</p> <ul style="list-style-type: none"> ● Grade: Developing ● Number of protected characteristics that fare well: 3 ● Evidence drawn upon for rating: <p>The Trust has chosen to maintain the previous year’s grade on all EDS 2 Outcomes except for Outcome 3.4, as the evidence available has not changed significantly since the previous grading. The Trust is currently working with local CCGs and other local hospital trusts on Merseyside to engage collectively across multiple protected characteristics and will form a new high level and diverse EDS 2 grading panel to assure future grading and ensure PSED compliance.</p> <p>The Trust’s Flexible Working Policy enables all employees from the point at which they join the Trust to request a flexible working arrangement. In addition to part-time working, flexible working options also include compressed or adjusted hours, job-sharing, flexi-time, term-time working, home working (where possible) and career breaks.</p> <p>As detailed in the E&D Workforce Annual Report 2017 the profile for flexible working shows that 75% of employees work full time (37 hours per week or more) whilst a quarter (350 staff) work part time hours. This remains consistent with previous year’s figures (74.9% in 2015). Of this number 91.4% are female; this is a slight reduction from 93% last year but remains in line with national figures. This is likely to reflect the fact that females are more likely to be carers and/or have primary responsibility for childcare, therefore requiring more flexible working arrangements to support this, although flexible working is open to all employees regardless of any protected characteristic, service provision permitting. It is important to note that this figure only includes part time workers and not individuals who may work compressed or adjusted hours etc. of which we know there are many, nor does it include informal arrangements which are accommodated in areas working rota’s (this has been highlighted through work on rolling out E-roster).</p> <p>The Trust has tried over recent years to centralise the recording of all flexible working requests however, this has proved impossible to ensure. No grievances or appeals have been received in regards to flexible working requests however the Trust is aware that under-represented groups are sometimes less likely to complain.</p> <p>Further data can be drawn from the National Staff Survey. The most recent findings show that in relation to age the percentage of staff satisfied with the opportunities for flexible working patterns range from 58% to 67%. There were also no differences for ethnic origin. However, there were some identifiable differences for gender with males only reporting 49% compared to 66% for women; this may reflect the percentages identified above. There were smaller differences for staff with a disability compared to not at 57% compared to 62%. This is a little disappointing given recent work around tailored reasonable adjustments however; this survey is perhaps before these changes could have had an effect. The most recent staff survey, for which we only have summary information, has reported that 62% of employees are satisfied or extremely satisfied with flexible working opportunities.</p>

		<p>The Trust also offers flexible retirement options, as detailed in the Trust's Flexible Retirement policy. This aims to support older employees in their retirement plans and therefore demonstrates our commitment, and appreciation of, a diversity workforce. Take up of flexible retirement has been at an all-time high over the last 12 months, more than doubling the previous year.</p>
	3.6	<p>Staff report positive experiences of their membership of the workforce</p> <ul style="list-style-type: none"> • Grade: Developing • Number of protected characteristics that fare well: 4 • Evidence drawn upon for rating: <p>The Trust has chosen to maintain the previous year's grade on all EDS 2 Outcomes except for Outcome 3.4, as the evidence available has not changed significantly since the previous grading. The Trust is currently working with local CCGs and other local hospital trusts on Merseyside to engage collectively across multiple protected characteristics and will form a new high level and diverse EDS 2 grading panel to assure future grading and ensure PSED compliance.</p> <p>Evidence can be taken from the National Staff Survey which reports against 4 of the protected characteristics, this can also be collaborated by local data collected from the Trust Friends and Family Tests and Staff Listening weeks although these do not currently capture any protected characteristics.</p> <p>Data from the National Staff Survey shows that the percentage of staff who would recommend the organisation as a place to work or receive treatment is very positive, at over 4 / 5 for all age groups, both genders and regardless of ethnic origin or disability. BME staff are actually most likely as a group to recommend the Trust and also view recognition and value of staff by managers and the organisation the highest. There is very little difference with regards to the other 3 groups captured. The percentage of staff agreeing that their role makes a difference to patients / service users is also extremely positive, being above 89% for all groups and the only notable difference being BME staff reporting 100% compared to 90% for White staff.</p> <p>Although the detailed results are not available for the most recent staff survey the initial results (not broken down by protected characteristics) have shown that 78% of staff have reported they often or always feel enthusiastic about their job; this remains consistent to last year, and a further 81% reported often or always to time passing quickly when they are working. Even more positively, 92% agree or strongly agree that feel that their role makes a difference to patients / service users.</p> <p>In Quarter 1, the Friends and Family Test was issued to 400 staff using an online survey, 80 surveys were returned. The results showed that 99% of staff were extremely likely or likely to recommend the Walton Centre to friends and family if they needed care or treatment and 79% of staff said they were extremely likely or likely to recommend the Walton Centre to friends and family as a place to work. In Quarter 2, the Friends and Family Test was issued to a further 400 staff with 109 being returned. The results showed that 99% of staff were extremely likely or likely to recommend the Walton Centre to friends and family if they needed care or treatment and 81% of staff said they were extremely likely or likely to recommend the Walton Centre to friends and family as a place to work.</p> <p>Whilst the data is very positive for this sub-goal, because equality information is not captured during listen weeks or CQC visits and the staff survey only captures 4 characteristics, the Trust only feels able to rate themselves as Developing.</p>
Inclusive leadership	4.1	<p>Boards and senior leaders routinely demonstrate their commitment to promoting equality within and beyond their organisations</p> <ul style="list-style-type: none"> • Grade: Developing • Number of protected characteristics that fare well: 4 • Evidence drawn upon for rating: <p>The Trust has chosen to maintain the previous year's grade on all EDS 2 Outcomes except for Outcome 3.4, as the evidence available has not changed significantly since the previous grading. The Trust is currently working with local CCGs and other local hospital trusts on Merseyside to engage collectively across multiple protected characteristics and will form a new high level and diverse EDS 2 grading panel to assure future grading and ensure PSED compliance.</p> <p>The Trust has created a new post of Equality and Inclusion Lead to ensure the Board are kept up to date and aware of any development, changes to legislation etc. All Trust board members receive Equality, Diversity and Human Rights training on an annual basis, they also review and approve the Equality and Diversity Annual Report; both of these cover all the protected characteristics. All papers presented to the Trust Board and to other senior committees ask the author to confirm whether an Equality Impact Assessment (EIA) has been completed.</p> <p>Examples of when Board members and senior leaders have demonstrated their commitment to equality include; clear statements of the Trusts commitment to ED&I by the Chief Executive both in policy documents and in personal statements and online blogs, the creation of a designated Executive Lead for ED&I on the Board, an ongoing commitment from Board members to participate in reciprocal mentoring for BME staff, as well as becoming involved in the BME Staff Network; promotion of services for people with disability through the Vanguard Programme and National Rehab Conference held at the Trust; and the Trust has maintained its Navajo Chartermark which is also supported by the Executive Team.</p>
	4.2	<p>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</p>

	<ul style="list-style-type: none"> • Grade: Developing • Number of protected characteristics that fare well: 9 (however not always completed, see below) • Evidence drawn upon for rating: <p>The Trust has chosen to maintain the previous year’s grade on all EDS 2 Outcomes except for Outcome 3.4, as the evidence available has not changed significantly since the previous grading. The Trust is currently working with local CCGs and other local hospital trusts on Merseyside to engage collectively across multiple protected characteristics and will form a new high level and diverse EDS 2 grading panel to assure future grading and ensure PSED compliance.</p> <p>The Director of Nursing has also been appointed as the Executive Lead for Equality within the Trust. All papers presented to the Trust Board and to other senior committees ask the author to confirm whether an Equality Impact Assessment (EIA) has been completed, unfortunately however this is not always done robustly and only a small number fulfil this requirement. EIA’s are also expected to be completed before all policies are ratified by the appropriate committee. To support this, the EIA screening tool has been added to the policy template.</p> <p>Cost Improvement Plans (CIP’s) and service changes should also complete an EIA before being presented to the appropriate committee. In order to increase compliance the EIA, along with Quality Impact Assessment (QIA), an electronic form has been developed to ensure that this is completed before the individual can continue with the submission.</p>
4.3	<p>Middle managers and other line managers support their staff to work in culturally competent ways within a work environment free from discrimination</p> <ul style="list-style-type: none"> • Grade: Developing • Number of protected characteristics that fare well: 3 • Evidence drawn upon for rating: <p>The Trust has chosen to maintain the previous year’s grade on all EDS 2 Outcomes except for Outcome 3.4, as the evidence available has not changed significantly since the previous grading. The Trust is currently working with local CCGs and other local hospital trusts on Merseyside to engage collectively across multiple protected characteristics and will form a new high level and diverse EDS 2 grading panel to assure future grading and ensure PSED compliance.</p> <p>ED&I Champions The Trust has created new ED&I Champions recruited from staff to create a higher profile for ED&I and to drive positive culture change towards the Trust’s equality commitments:</p> <ul style="list-style-type: none"> • 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. <p>One example were the ED&I Champions are already making a positive difference is in their work to foster a greater awareness of key cultural dates and events. One of the important actions for this in 2018 is the Trust’s Ramadan Awareness Event. Further initiatives will be identified and implemented throughout this and coming years. The Trust has conducted extra ED&I training for the ED&I Champions to enable them to work more effectively in their new roles.</p> <p>Cultural Ambassadors Programme The Walton Centre is also part of a pilot programme with the RCN around Cultural Ambassadors. The Trust has recruited some of our Black and Minority Ethnic (BME) staff to receive training to be able to support colleagues through various Human Resources (HR) Processes to ensure fairness e.g. Disciplinary, Grievance and Capability processes. There is also potential to widen their programme out into supporting fairness in recruitment processes.</p>

Recruitment Data

The data shown here lists: Applications numbers and %, Shortlisted numbers and %, Appointed % by Protected Characteristics			
Gender Male	187"	25.00%	349 29.40% 23.70%
Female	551"	74.70%	1113 31.30% 75.60%
Undisclosed	15	0.30%	10 66.70% 0.70%
Disability Yes	226	4.80%	82 36.30% 5.60%
No	442"	93.50%	1361 30.60% 92.50%
Undisclosed	85	1.80%	29 34.10% 2.00%
Criminal Conviction Yes	20	0.40%	10 50.00% 0.70%
No	704"	99.60%	1436 30.50% 99.30%
Ethnicity WHITE - British	618"	76.10%	1125 31.10% 76.40%
WHITE - Irish	48	1.00%	25 52.10% 1.70%
WHITE - Any other white background	266	5.60%	83 31.20% 5.60%
ASIAN or ASIAN BRITISH - Indian	220	4.60%	62 28.20% 4.20%
ASIAN or ASIAN BRITISH - Pakistani	82	1.70%	17 20.70% 1.20%
ASIAN or ASIAN BRITISH - Bangladeshi	14	0.30%	6 42.90% 0.40%
ASIAN or ASIAN BRITISH - Any other Asian background	49	1.00%	14 28.60% 1.00%
MIXED - White & Black Caribbean	25	0.50%	3 12.00% 0.20%
MIXED - White & Black African	32	0.70%	5 15.60% 0.30%
MIXED - White & Asian	16	0.30%	5 31.30% 0.30%
MIXED - any other mixed background	35	0.70%	15 42.90% 1.00%
BLACK or BLACK BRITISH - Caribbean	12	0.30%	2 16.70% 0.10%
BLACK or BLACK BRITISH - African	155	3.30%	43 27.70% 2.90%
BLACK or BLACK BRITISH - Any other black background	8	0.20%	4 50.00% 0.30%
OTHER ETHNIC GROUP - Chinese	22	0.50%	7 31.80% 0.50%
OTHER ETHNIC GROUP - Any other ethnic group	61	1.30%	13 21.30% 0.90%

Undisclosed		90	1.90%	43	47.80%	2.90%		
Age Band Under 18		1	0.00%	0	0.00%	0.00%		
18 to 19		42	0.90%	10	23.80%	0.70%		
20 to 24		805	16.90%	190	23.60%	12.90%		
25 to 29		1000	21.00%	271	27.10%	18.40%		
30 to 34		700	14.70%	216	30.90%	14.70%		
35 to 39		558	11.70%	208	37.30%	14.10%		
40 to 44		441	9.30%	162	36.70%	11.00%		
45 to 49		416	8.80%	141	33.90%	9.60%		
50 to 54		410	8.60%	141	34.40%	9.60%		
55 to 59		258	5.40%	88	34.10%	6.00%		
60 to 64		112	2.40%	40	35.70%	2.70%		
65 to 69		5	0.10%	3	60.00%	0.20%		
70 and over		0	0.00%	0	0.00%	0.00%		
Undisclosed		5	0.10%	2	40.00%	0.10%		
Religion Atheism		600	12.60%	210	35.00%	14.30%		
Buddhism		19	0.40%	6	31.60%	0.40%		
Christianity		860	60.20%	894	31.30%	60.70%		
Hinduism		113	2.40%	24	21.20%	1.60%		
Islam		198	4.20%	46	23.20%	3.10%		
Jainism		3	0.10%	0	0.00%	0.00%		
Judaism		10	0.20%	3	30.00%	0.20%		
Sikhism		9	0.20%	3	33.30%	0.20%		
Other		525	11.00%	160	30.50%	10.90%		
Undisclosed		416	8.80%	126	30.30%	8.60%		
Sexual Orientation Lesbian		37	0.80%	10	27.00%	0.70%		
Gay		61	1.30%	20	32.80%	1.40%		
Bisexual		56	1.20%	10	17.90%	0.70%		

Heterosexual	367" 91.90%	1350 30.90%	91.70%		
Undisclosed	232 4.90%	82 35.30%	5.60%		
Marital Status Married	466" 30.80%	486 33.20%	33.00%		
Single	791" 58.70%	785 28.10%	53.30%		
Civil partnership	93 2.00%	33 35.50%	2.20%		
Legally separated	40 0.80%	12 30.00%	0.80%		
Divorced	217 4.60%	81 37.30%	5.50%		
Widowed	22 0.50%	10 45.50%	0.70%		
Undisclosed	124 2.60%	65 52.40%	4.40%		
Impairment Physical Impairment	53 19.90%	14 26.40%	14.70%		
Sensory Impairment	49 18.40%	15 30.60%	15.80%		
Mental Health Condition	24 9.00%	7 29.20%	7.40%		
Learning Disability/Difficulty	51 19.10%	23 45.10%	24.20%		
Long-Standing Illness	58 21.70%	23 39.70%	24.20%		
Other	32 12.00%	13 40.60%	13.70%		
Total Total	753" 100.00%	1472 31.00%	100.00%		