



The Walton Centre
NHS Foundation Trust

Excellence in Neuroscience 

Public Sector Equality Duty

Equality, Diversity and Inclusion Annual Report 2019

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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 2019, 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.

1.1 Our Vision

Our vision is Excellence in Neuroscience. We strive for outstanding patient outcomes and the best patient, family and carer experience. We will continue to cherish the standards we have achieved, whilst exploring how we can enhance these further, shaping neuroscience treatments and care for the future.

1.2 Our Purpose

Dedicated specialist staff leading future treatment and excellent clinical outcomes for brain, spinal and neurological care nationally and internationally.

1.3 Our Ambitions

To deliver our vision and to meet our purpose, we have through consultation with staff, patients and partners agreed a set of ambitions together.

We will:

- Deliver best practice care and treatments in our specialist field.
- Provide more services closer to patients' homes, driven by the needs of our communities, extending partnership working.
- Be financially strong, meeting our targets and investing in our services, facilities and innovations for patients and staff.
- Lead research, education and innovation, pioneering new treatments nationally and internationally.
- Adopt advanced technology and treatments enabling our teams to deliver excellent patient and family centred care.
- Be recognised as excellent in our patient and family centred care, clinical outcomes, innovation and staff wellbeing.

1.4 Our Equality Diversity and Inclusion Vision

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.
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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

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 2018/19 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 recognises that historically certain groups of people with protected characteristics such as race, disability, sex and sexual orientation have experienced discrimination. ... The Equality Act 2010'

2.1 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.

2.2 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

3.1.1 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. In response to feedback from staff the need for additional equality awareness training has been identified in 2018 and the Trust will pilot this training in CRU during July 2019.

3.1.2 Support for Staff with a Disability

In June 2019 the Trust was successful in being reaccredited with DWP Disability Confident Scheme.

Through Disability Confident, the Trust is working with to ensure that disabled people and those with long term health conditions have the opportunities to fulfil their potential and realise their aspirations.

This scheme will help The Trust to recruit and retain from the widest possible pool of talent and help us to keep their valuable skills and experience. The Trust has gained the following:

- A Disability Confident Committed badge, valid for 12 months until 09/06/2020 (for use on your Trust stationery, correspondence and website)
- A Disability Confident Committed certificate to demonstrate our commitment.

The Trust will also be undertaking a Disability Confident Employer self-assessment to assist with the next steps to become a Disability Confident Employer (Level 2) in 2020.

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. In addition, during 2018/19 the Trust has taken steps to include Cultural Ambassadors and the ED&I Lead into the recruitment process for senior managers and NEDs to further ensure fairness in recruitment.

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

3.1.3 Workforce Disability Equality Standard (WDES)

The Trust will hold a launch for the WDES in July 2019 in order to engage staff in activities to advance equality of opportunity for Disabled staff in advance of publication of the Trust's WDES Report in August 2019. The WDES Report will be discussed by the Trust Board and appropriate actions will be implemented to advance equality further in relation to workforce disability.

3.1.4 The NHS Accessible Information Standard

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. As part of a joint piece of work with Clinical Commissioning Groups on Merseyside and local NHS trusts The Walton Centre is currently reviewing our approach to making Reasonable Adjustments to for Disabled staff and patients. The Trust is also carrying out a review of patient information in June 2019 to ensure that it is consistent and up to date with current best practice in terms of accessibility.

3.1.5 ED&I Champions

In 2018 the Trust established 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.

During 2018 there was much learning by the Trust in relation to how to make the most of the skills and enthusiasm that the ED&I Champions bring to the organisation. This has led The Walton Centre to start work with other local NHS trusts and partners from Trades Unions to develop roles and support for ED&I Champions which will strengthen their activity, sustainability and profile into 2020 and beyond.

3.1.6 Cultural Ambassadors Programme

During 2018 The Walton Centre participated in a pilot programme with the RCN around Cultural Ambassadors. The Trust 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. During the period since the Cultural Ambassadors have been active, the Trust has not seen many opportunities for Cultural Ambassadors to help out in Disciplinary, Grievance or Capability processes, primarily because the Trust has been in the fortunate position of not having the many relevant cases relating to BME staff for the Cultural Ambassadors to be called upon. While this is a positive reason for not calling on the Cultural Ambassadors, it does mean that the Trust has started to take steps to ensure that we develop more roles and activities for the Cultural Ambassadors to participate in, thus ensuring that their skills and commitment will be used and not eroded by underuse.

3.1.7 Navajo Chartermark

This Chartermark is a signifier of good practice, commitment and knowledge of the specific needs, issues and barriers facing LGBTIQ people in Cheshire and Merseyside. Navajo looks at employment practices and how services are inclusive for LGBTIQ people. Since the Trust successfully obtained Navajo reaccreditation in March 2018 further steps have been taken to embed this work and spread best practice. The Trust has participated actively in the work of the Navajo Health Sub-Group. The Trust has also supported a staff member to undergo Navajo Assessor training and to participate in assessing another local NHS Organisation to spread of best practice. The Trust is also working with Navajo to increase the adoption of the Chartermark among NHS trusts across Cheshire and Merseyside.

The Trust is also participating in further initiatives to improve equality for LGBTIQ people e.g. The Trust has recently signed up to the Rainbow Badge initiative for people who work in healthcare can to increase awareness of these issues, and to help improve the experiences of healthcare for LBGT+ patients and our staff. The

Trust had more than 70 staff signed up to pledge to help and wear the badges as a visible sign of their support.

The Trust is also participating in Liverpool Pride 2019 as part of a joint effort with other local NHS trusts. The Walton Centre is contributing to having a stand and banner and encouraging staff to participate in the event wearing the Trust logo alongside other NHS organisations.

3.1.8 Gender Pay Gap

The Trust has met its Gender Pay Gap reporting obligations for this year and the results are published on the Trust's website. The results do show a gender pay gap, however there is no indication that this is the result of any current direct discrimination by the Trust. The gap appears to be more connected with more generalised features of gender differences in different professions e.g. most of our nursing staff are female which is a feature of the current demographic of the profession rather than any bias in the recruitment practices of the trust. The Trust board is, however, committed to understanding the data in more detail in order to find the most appropriate actions to close the Gender Pay Gap. To this end, the board will be looking at the figures for 2018 in June 2019 which is one year in advance of the reporting requirements which ask for the figures relating to two years previous to the current one. The Board will take note of the results and will be making use of the data to inform action planning in order to get ahead of the curve in terms of the Trusts response the Gender Pay Gap in 2020.

3.1.9 Reciprocal Mentoring

The Trust is currently implementing the second year of its 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 Black and minority ethnic (BME) groups to further their development whilst also improving the understanding of senior leaders regarding what it means to be a BME employee within the Trust. There are currently 5 BME staff on the programme, matched with 5 senior leaders. The next group of 10 participants is due to start on the scheme after an evaluation event to be held on October 2019.

3.1.10 Equality Impact Analysis

The Improved Equality Impact Assessment/Analysis (EIA) Guidance has now been developed and is being implemented for staff completing EIAs. Staff are also signposted to the Trusts Equality and Inclusion Lead to advise them on the process if needed. The Trusts Equality and Inclusion Lead has also now been included into the system for signing off Cost Improvement Plans (CIPs) before they go to the Trust Board in order to provide an enhanced level of assurance in respect of the equality compliance in relation to these important decisions.

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

The Trust is currently one and a half years into its ED&I 5 Year Vision which it published at the end of 2017. Good progress continues to be made in relation to the commitments made in that vision:

- 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 table immediately below outlines the progress to April 2019. The Trust is tracking progress against 24 goals associated with the ED&I 5 Year Vision. Goals that have been achieved are tagged Green. Goals that are achieved in part or are continuing on track towards achievement are marked in Amber. There are no goals that are in danger of not being achieved which would be marked red.

Goal 1	Goal description: We have an ED&I 5 year strategy developed by staff and launched. Achieved in 2017	
Goal 2	Goal description: We have ED&I champions roles defined and recruited to add value to our efforts to realise the Trust's ED&I 5 Year Vision. Achieved in 2017	
Goal 3	Goal description: We have year on year improvement of our measurements (in National Surveys relating to In-Patients and Staff) Ongoing This goal is only realistically achievable by the end of the 5 Year Vision. As yet reporting is too early to show sustained patterns of either improvement or deterioration. Where the Trust has identified areas that need improvement actions are in place to find out more and address these e.g. regarding the WRES results the Trust has set up meetings with BME staff to encourage them to participate more in the surveys and identify how to improve perceptions.	

<p>Goal 4</p>	<p>Goal description: We are the employer of choice for staff with protected characteristics. Ongoing</p> <p>Trust has maintained a workforce that is more diverse than the local community in terms of race/ethnicity. The distribution of BME staff, however, is much more evident in clinical and in medical roles and there are also comparatively fewer BME non-medical managers. Gender monitoring has shown that we have more females than males at the Trust but male earnings are disproportionately higher because their distribution in higher paid medical posts is different. The next big challenge is to find out more about disability profiles within the Trust. We are awaiting the introduction of the Workforce Disability Equality Standard in 2019 to enable this.</p>
<p>Goal 5</p>	<p>Goal description: We have good engagement and working relationships with 3rd sector expert groups. Achieved/Ongoing,</p> <p>However, this is a goal that requires ongoing action to maintain its effectiveness into the future. 3rd Sector Engagement was a key piece of work done by the Trust to inform the local health economy across Merseyside about health inequalities as part of joint working. The Trust is continuing to work with Local Healthwatch to develop more effective community engagement across Merseyside Trusts.</p>
<p>Goal 6</p>	<p>Goal description: We have an increase in Equality Impact Assessments (EIA) undertaken for planning and projects. Achieved 2018.</p> <p>The Equality and Inclusion Lead now has to sign off all CIPs prior to their implementation. The Chair and the CEO have made themselves aware of the Brown Principles and EIA guidance has undergone further revision and is now comprehensive. The Equality and Improvement Lead provides one on one guidance and support to managers completing EIAs on request..</p>
<p>Goal 7</p>	<p>Goal description: We have set up and established terms of reference for the ED&I Steering Group Achieved 2017.</p>
<p>Goal 8</p>	<p>Goal description: We complete action plans for data and track progress and impact. Ongoing.</p> <p>The Trust has action plans and track data in accordance with the Public Sector Equality Duty (See above). Data monitoring and action planning will increase later in 2019 when the WDES is introduced.</p>
<p>Goal 9</p>	<p>Goal description: We complete action plans for WRES findings and track impact. Achieved/Ongoing</p> <p>The WRES is an annual reporting mechanism, so this work is never fully achieved, however the Trust is fully compliant to this point in time.</p>

Goal 10	<p>Goal description: Our Public Sector Equality Duty is met (PSED) Achieved 2018.</p> <p>See; Equality and Inclusion Annual Report 2018.</p> <p>http://www.thewaltoncentre.nhs.uk/uploadedfiles/HR/Equality%20Duty%20Annual%20Report%202018.pdf</p>
Goal 11	<p>Goal description: We are successful in our reaccreditation for Navajo or have an action plan for future accreditation. Achieved 2018</p> <p>Engagement is continuing with Navajo and The Trust remains on target to maintain the Navajo Chartermark in future years. The Trust will shortly participate in assessing other local Trusts for the Chartermark.</p>
Goal 13	<p>Goal description: We have met Accessible information standard Ongoing</p> <p>Evidence from the Trusts intranet</p> <p>http://intranet/intranet_new/586/accessible-information-standard.html</p> <p>and the Interpretation & Translation and Accessible Information Policy, April 2018 indicates that the Accessible Information Standard has been achieved, however, this goal requires ongoing monitoring to ensure that it is maintained.</p>
Goal 14	<p>Goal description: We have an increase in staff with protected characteristics in our workforce over the life of the Vision. Achieved 2018 in regard to race, however this work is ongoing.</p> <p>This measure may need to be refined regarding race/ethnicity as the overall figure of just over 12% is more diverse than the local community we serve. The greater challenge will be to make sure that BME staff are equally represented at all pay bands and areas of the Trust.</p> <p>Disability is the next new major monitoring and reporting exercise that the Trust will be involved in in 2019. The timescale for this is dependent on NHS England and the Trust is still awaiting</p>
Goal 15	<p>Goal description: We have improved experience of patients with learning difficulties, brain injuries & protected characteristics. Achieved 2018</p> <p>The Trust has recently participated in a quite detailed Learning Disability national survey for NHSI 30/11/18. The results from the survey will inform future plans regarding Learning Disabilities. The Trust is continuing to work with The Local CCGs and service providers to improve sign language interpretation provision across the system.</p>

Goal 16	<p>Goal description: We have expanded training in unconscious bias/cultural competency Ongoing.</p> <p>The Trust is currently seeking to procure ED&I training with a particular focus on, unconscious bias and cultural competence. This will be piloted in CRU and evaluated to test the feasibility of rolling it out further across the Trust. A suitable ED&I training consultant has now been identified and the training is scheduled to start in the new financial year April 2019.</p>
Goal 17	<p>Goal description: Our staff feel equipped with skills and knowledge on ED&I Ongoing.</p> <p>The Trust is currently seeking to procure ED&I training with a particular focus on, unconscious bias and cultural competence. This will be piloted in CRU and evaluated to test the feasibility of rolling it out further across the Trust. A suitable ED&I training consultant has now been identified and the training is scheduled to start in the new financial year April 2019.</p>
Goal 18	<p>Goal description: We have a place on a national campaign – e.g. Building Leadership for Inclusion or alternative. Achieved 2018</p> <p>The Trust successfully participated in the NHS Employers Diversity and Inclusion Partners Programme in 2018. The new application for the NHS Employers Diversity and Inclusion Partners Programme was submitted by 1st March 2019 and we are awaiting the result.</p>
Goal 19	<p>Goal description: We have increased/improved patient data monitoring Achieved/Ongoing</p> <p>The Trust is currently in the process of making updates to the PAS System to enable the better recording of patient data in line with national data standards, e.g. on Sexual Orientation Monitoring SOM).</p> <p>https://www.datadictionary.nhs.uk/web_site_content/navigation/main_menu.asp</p> <p>https://www.datadictionary.nhs.uk/web_site_content/supporting_information/contact_details.asp?shownav=1</p>
Goal 20	<p>Goal description: We have increased/improved workforce monitoring (particularly disability) Ongoing</p> <p>The Trust is currently reviewing workforce monitoring in readiness for implementation of the Workforce Disability Equality Standards later in 2019.</p>

Goal 21	<p>Goal description: We have greater awareness of key cultural dates and events.</p> <p>Achieved/Ongoing</p> <p>The Trust has held a successful Ramadan Awareness and has continued to make progress in this area. Black History Month was marked by an exhibition at the Trust in October 2018. The event was held at both the Main Building and at the Sid Watkins Building. The engagement from staff around this was very positive and the exercise will be repeated in future years.</p>
Goal 22	<p>Goal description: We have equivalent to CQC 'Outstanding' and IIP Gold in Equality and Diversity Wellbeing Ongoing</p> <p>This is a goal that we would reasonably anticipate achieving in year 3 of the strategy. We are currently at the start of Year 2 of implementation.</p>
Goal 23	<p>Goal description: Our staff feel happy and confident, supported and not judged by the Trust in relation to ED&I, that inclusion is our everyday practice</p> <p>Ongoing – Though the WRES data is not getting significantly worse, it does indicate that the Trust has much work to do in improving the perceptions of BME staff. In order to innovate a solution in this area, the Trust is in the process of developing a peer support initiative, which will be piloted with our BME staff in 2019.</p>
Goal 24	<p>Goal description: We celebrate diversity and see our strength in inclusion as one of our core strengths Ongoing</p> <p>This is not a goal that we would expect to achieve until the later years of the 5 Year Vision.</p>

3.2.1 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 that dignity, respect and privacy is maintained.

3.2.2 Support for Staff with a Disability.

Access to Work is promoted within the Trust to support staff with disabilities around reasonable adjustments. 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.

3.2.3 Workforce Race Equality Standard (WRES) 2018 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 Trust has met its WRES reporting requirements for 2018 and the results are published on the Trust's website. At the time of publication of this ED&I Annual Report, the Trust is working towards publication of the 2019 WRES report which will be presented to The Trust Board later in 2019. Previous annual WRES reporting has showed slow progress across most of the measures. A particular area of concern picked up from the 2018 reporting, which used data relating to the previous year 2017, was the percentage of BME staff experiencing harassment or bullying from other staff, and a similar finding was made in respect of bullying and harassment of BME staff from patients. New staff training that is being piloted in 2019 is designed to help eliminate staff bullying and work has also started in 2019 to eliminate harassment and bullying of BME staff from patients.

In cooperation with NHS trusts from across Cheshire and Merseyside, a network of Equality and Inclusion Peer Support Volunteers is being established who will be trained, supported and empowered to become expert advisers to our staff and the organisation. They will support staff that are subjected to such behaviours and advise colleagues on how they can support each other to and help prevent or deal with relevant incidents.

3.2.4 Complaints

Complaints data is monitored in respect of discrimination and other prohibited conduct via the Trusts Patient Experience Group (PEG). 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.

After the enthusiastic reception from staff to the Black History Month stand that the Trust set up in October 2018, there are plans to repeat this activity in October 2019.

Black History Month UK aims to address the long standing unfairness and lack of recognition for the contribution made by people of African descent to life, development and history of the UK by celebrating the achievements and contributions of the black community over the years.

3.3.1 ED&I Patient and Engagement

Relationships have been maintained with community organisations e.g. Healthwatch groups, and equality continues to be 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.

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.

A key development in relation to engagement is the Joint working with NHS trusts on Cheshire and Merseyside, which has developed at a fast pace in 2019. The Walton Centre is at the forefront of a piece of work which is being developed to focus on ED&I driven patient and public engagement. Trusts will work with Healthwatch and key Third Sector organisations to hold ED&I themed patient and public engagement events. The events will focus on various health inequalities between people who have Protected Characteristics and those who do not. The Trust's ED&I Champions will attend and help to facilitate the events.

In June 2019 The Walton Centre will meet with ED&I Leads from Local NHS trusts to get approval to start pilot events e.g. Healthwatch Liverpool plans to work with the Trust piloting an event regarding Health Inequalities for patients with learning disabilities and Navajo intend to work with the Trust to develop an event in relation to End of Life Issues for the LGBTIQA community. The Trust is working to ensure that the events will eventually be held monthly and that they will cover all the relevant ED&I Protected characteristics. By 2020 these engagement events will provide ample evidence of compliance in relation to PSED and EDS 2 in respect of: Race, Gender Reassignment, Disability, Sex, Age, Religion/Belief, and Sexual Orientation.

4 The Specific Duty and the Walton Centre

The Trust meets its Specific Duties under the Equality Act 2010 via the publication of this Equality, Diversity and Inclusion Annual Report and the equality objectives stated within it. A further level of PSED assurance is provided by the Trust's participation in Equality Delivery System 2 (EDS 2).

4.1. EDS 2

The Trust's EDS 2 review is currently being undertaken for 2019 in conjunction with Healthwatch and local community groups. The Trust is not seeking to increase its grades on any of the sub-goals in 2019 as the emphasis for this year's EDS2 continues to be 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 to equality, whilst continuing to support the Trust with its duties under the Public Sector Equality Duty. In 2018/2019 joint working has been taking place on the following topics:

- Translation and Interpretation Service
- Reasonable Adjustments for both disabled patients and staff
- Staff Networks.

Once completed the EDS 2 grades will be submitted to NHS England and published on the Trust's webpage.

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 2018/19, the Walton Centre has continued to follow the innovative collaborative approach to delivering the EDS2 established with Merseyside CCGs and other local Trusts.

Together we have initiated a targeted approach to EDS2 engagement which sees us continuing to engaging collectively with national, regional and local organisations

who represent the views of people and communities who share protected characteristics. We have continued to hold a series of one-to-one meetings, workshops, interviews, briefings and research sessions with partner organisations and stakeholders to ensure that we are aware of the needs of the diverse communities that we serve. This engagement continues to be 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. This engagement continues 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 coordinated and 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 our strategic and operational programmes.

Understanding and meeting 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 in 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 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 2018. This coincides with the Trust’s work towards current equality objectives which are to be revised in 2019; which is 1 year 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.

Recent EDS 2 gradings for the vast majority of patient and public related services (Goals 1, 2 & 4) for The Walton Centre have been assessed as **developing**. Once

the local equality 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 currently proposed 2019 EDS2 grades for The Walton Centre can be viewed in the table immediately below and in **Appendix 1**.

4.1.1 Current 2018/19 EDS2 Grades

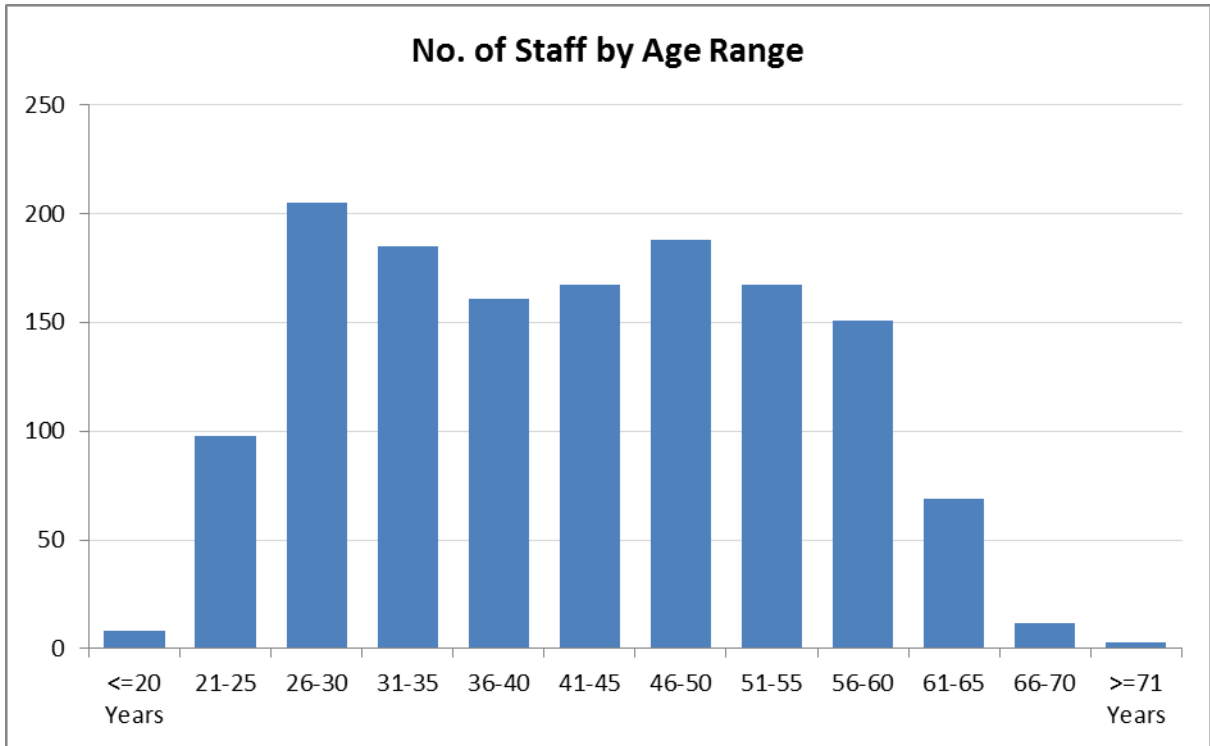
The Walton Centre EDS2: The Goals and Outcomes			Grade Status
Goal	Sub	Description of outcome	
Better health outcomes	1.1	Services are commissioned, procured, designed and delivered to meet the health needs of local communities	Developing
	1.2	Individual people's health needs are assessed and met in 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 ED&I Profile

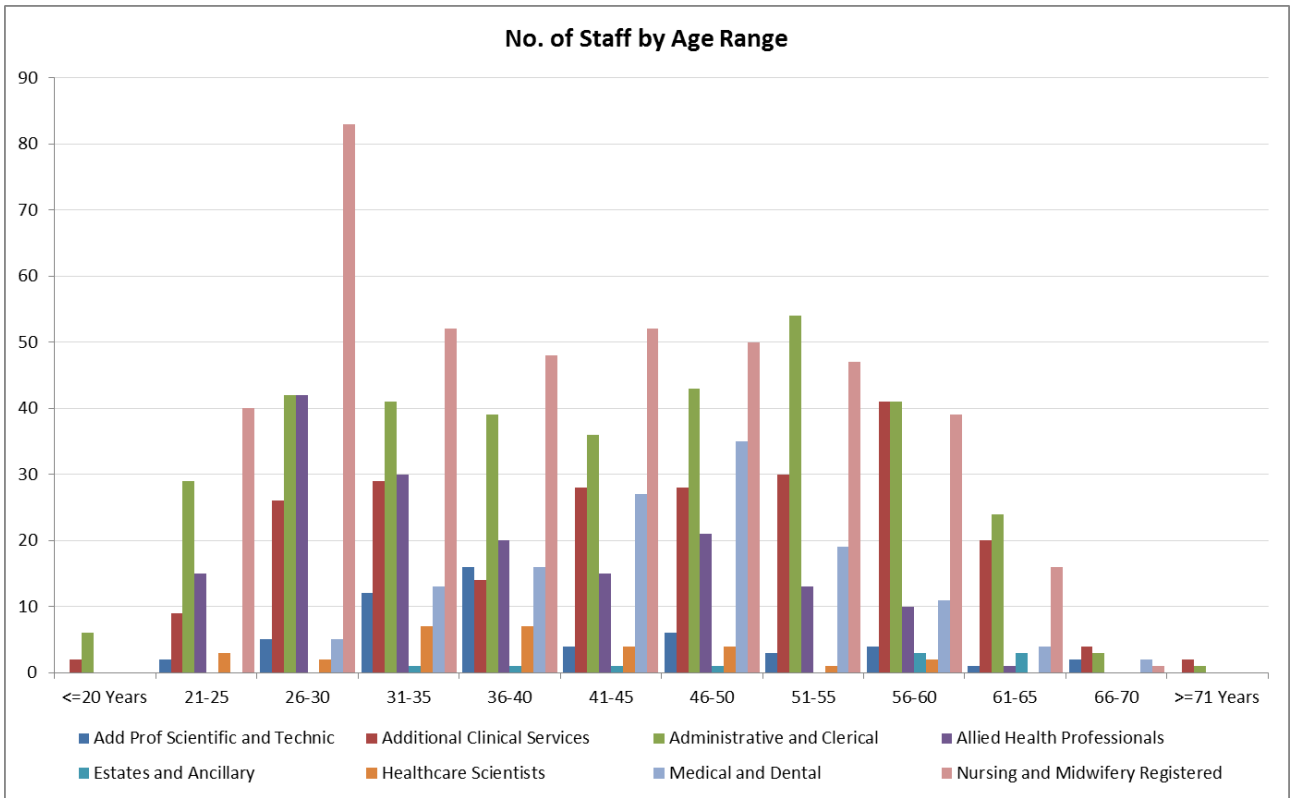
5.1 Workforce by Age

Age Range	No. Of Staff
<=20 Years	8
21-25	98
26-30	205
31-35	185
36-40	161
41-45	167
46-50	188
51-55	167
56-60	151
61-65	69
66-70	12
>=71 Years	3
Grand Total	1414



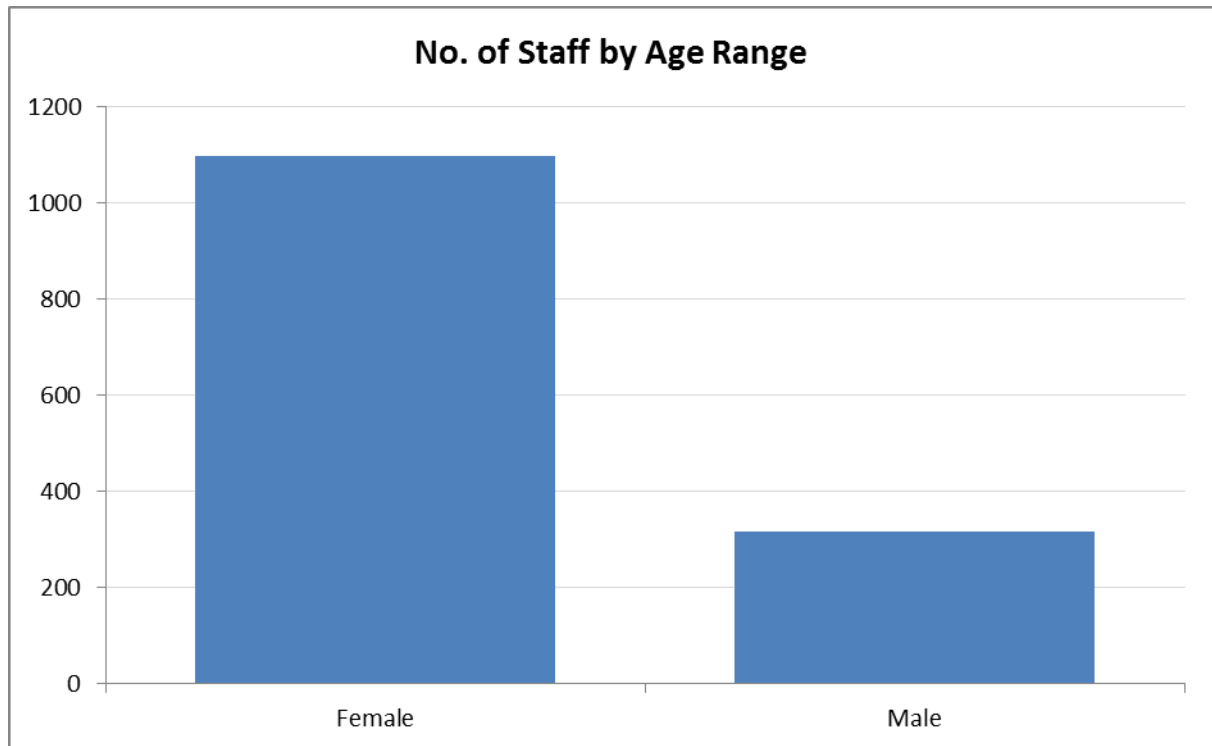
5.1.1 Staff Group by Age

Age Range	Add Prof Scientific and Technic	Additional Clinical Services	Administrative and Clerical	Allied Health Professionals	Estates and Ancillary	Healthcare Scientists	Medical and Dental	Nursing and Midwifery Registered	Grand Total
<=20 Years	0	2	6	0	0	0	0	0	8
21-25	2	9	29	15	0	3	0	40	98
26-30	5	26	42	42	0	2	5	83	205
31-35	12	29	41	30	1	7	13	52	185
36-40	16	14	39	20	1	7	16	48	161
41-45	4	28	36	15	1	4	27	52	167
46-50	6	28	43	21	1	4	35	50	188
51-55	3	30	54	13	0	1	19	47	167
56-60	4	41	41	10	3	2	11	39	151
61-65	1	20	24	1	3	0	4	16	69
66-70	2	4	3	0	0	0	2	1	12
>=71 Years	0	2	1	0	0	0	0	0	3
Grand Total	55	233	359	167	10	30	132	428	1414



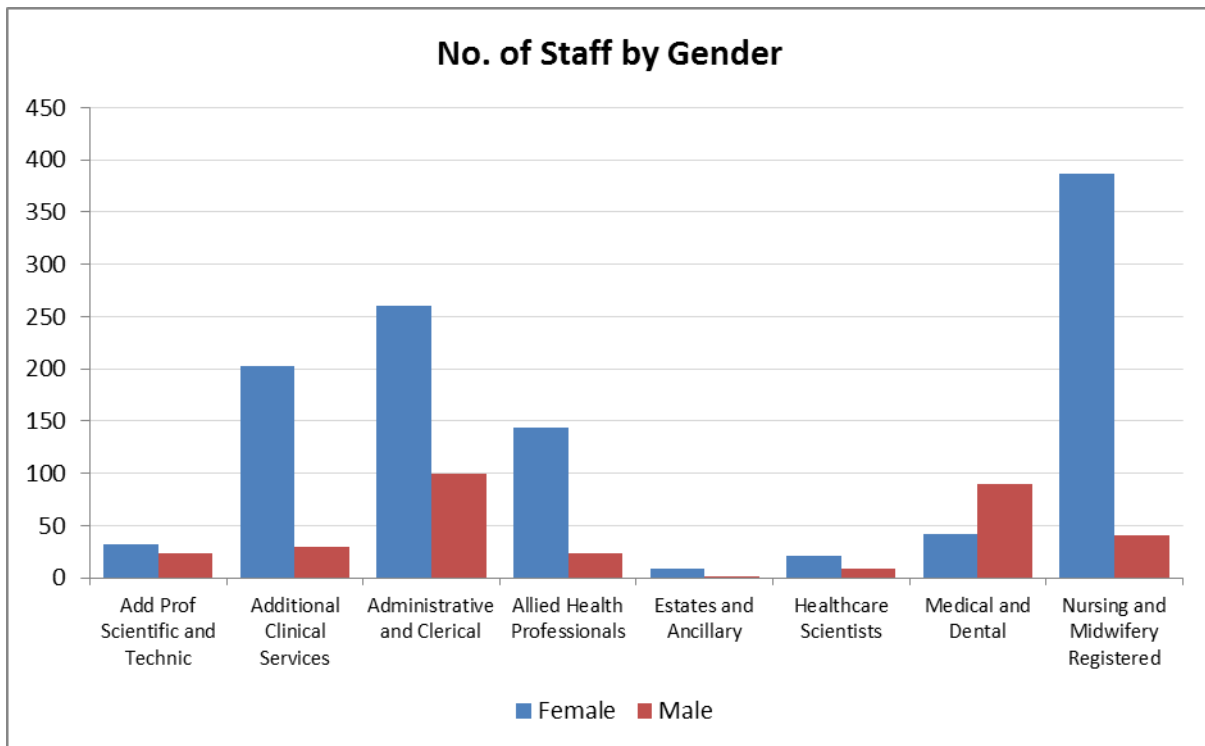
5.2 Workforce by Gender

Gender	No. Of Staff
Female	1098
Male	316
Grand Total	1414



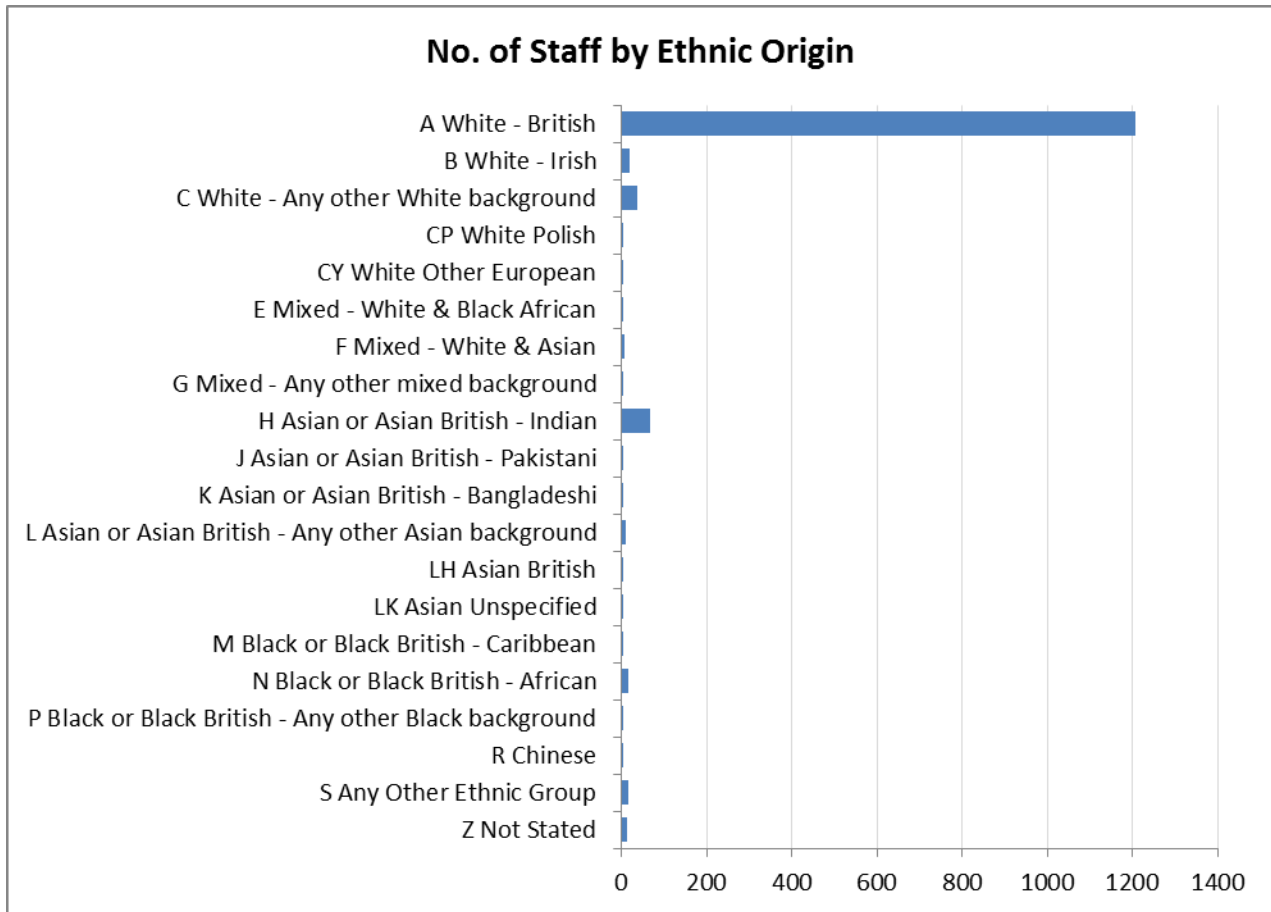
5.2.1 Staff Group by Gender

Staff Group	Female	Male	Grand Total
Add Prof Scientific and Technic	32	23	55
Additional Clinical Services	203	30	233
Administrative and Clerical	260	99	359
Allied Health Professionals	144	23	167
Estates and Ancillary	9	1	10
Healthcare Scientists	21	9	30
Medical and Dental	42	90	132
Nursing and Midwifery Registered	387	41	428
Grand Total	1098	316	1414



5.3 Workforce by Ethnic Origin

Ethnic Origin	No. Of Staff
A White - British	1207
B White - Irish	19
C White - Any other White background	37
CP White Polish	2
CY White Other European	2
E Mixed - White & Black African	2
F Mixed - White & Asian	7
G Mixed - Any other mixed background	4
H Asian or Asian British - Indian	66
J Asian or Asian British - Pakistani	2
K Asian or Asian British - Bangladeshi	1
L Asian or Asian British - Any other Asian background	11
LH Asian British	1
LK Asian Unspecified	1
M Black or Black British - Caribbean	1
N Black or Black British - African	16
P Black or Black British - Any other Black background	2
R Chinese	2
S Any Other Ethnic Group	17
Z Not Stated	14
Grand Total	1414

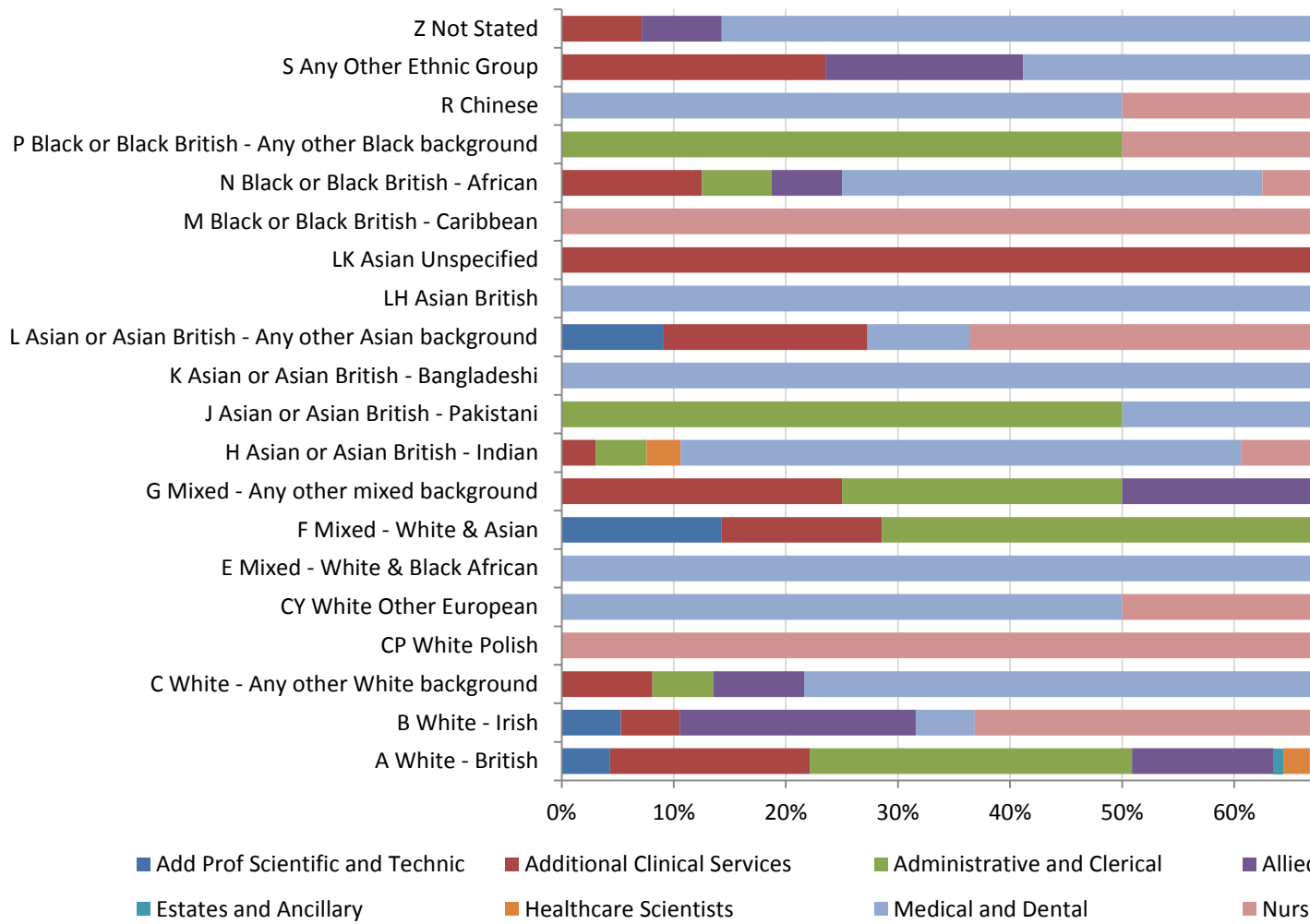


5.3.1 Staff Group by Ethnic Origin

Ethnic Origin	Add Prof Scientific and Technic	Additi onal Clinical Services	Adminis trative and Clerical	Allied Health Professionals	Estate s and Ancilla ry	Health care Scientists	Medic al and Dental	Nursin g and Midwi fery Registered	Grand Total
A White - British	52	215	347	153	10	28	44	358	1207
B White - Irish	1	1	0	4	0	0	1	12	19
C White - Any other White background	0	3	2	3	0	0	22	7	37
CP White Polish	0	0	0	0	0	0	0	2	2
CY White Other European	0	0	0	0	0	0	1	1	2
E Mixed - White & Black African	0	0	0	0	0	0	2	0	2
F Mixed - White & Asian	1	1	3	1	0	0	1	0	7
G Mixed - Any other mixed background	0	1	1	1	0	0	1	0	4

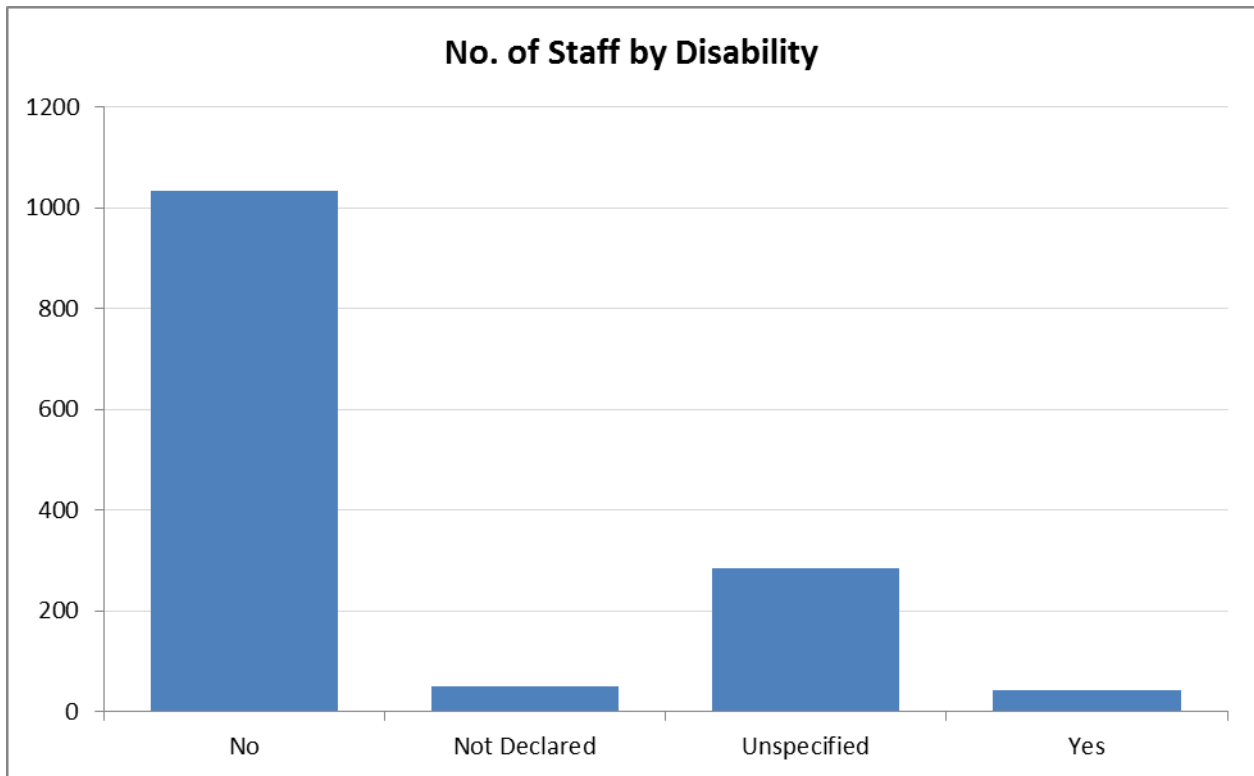
H Asian or Asian British - Indian	0	2	3	0	0	2	33	26	66
J Asian or Asian British - Pakistani	0	0	1	0	0	0	1	0	2
K Asian or Asian British - Bangladeshi	0	0	0	0	0	0	1	0	1
L Asian or Asian British - Any other Asian background	1	2	0	0	0	0	1	7	11
LH Asian British	0	0	0	0	0	0	1	0	1
LK Asian Unspecified	0	1	0	0	0	0	0	0	1
M Black or Black British - Caribbean	0	0	0	0	0	0	0	1	1
N Black or Black British - African	0	2	1	1	0	0	6	6	16
P Black or Black British - Any other Black background	0	0	1	0	0	0	0	1	2
R Chinese	0	0	0	0	0	0	1	1	2
S Any Other Ethnic Group	0	4	0	3	0	0	5	5	17
Z Not Stated	0	1	0	1	0	0	11	1	14
Grand Total	55	233	359	167	10	30	132	428	1414

No. of Staff by Ethnic Origin



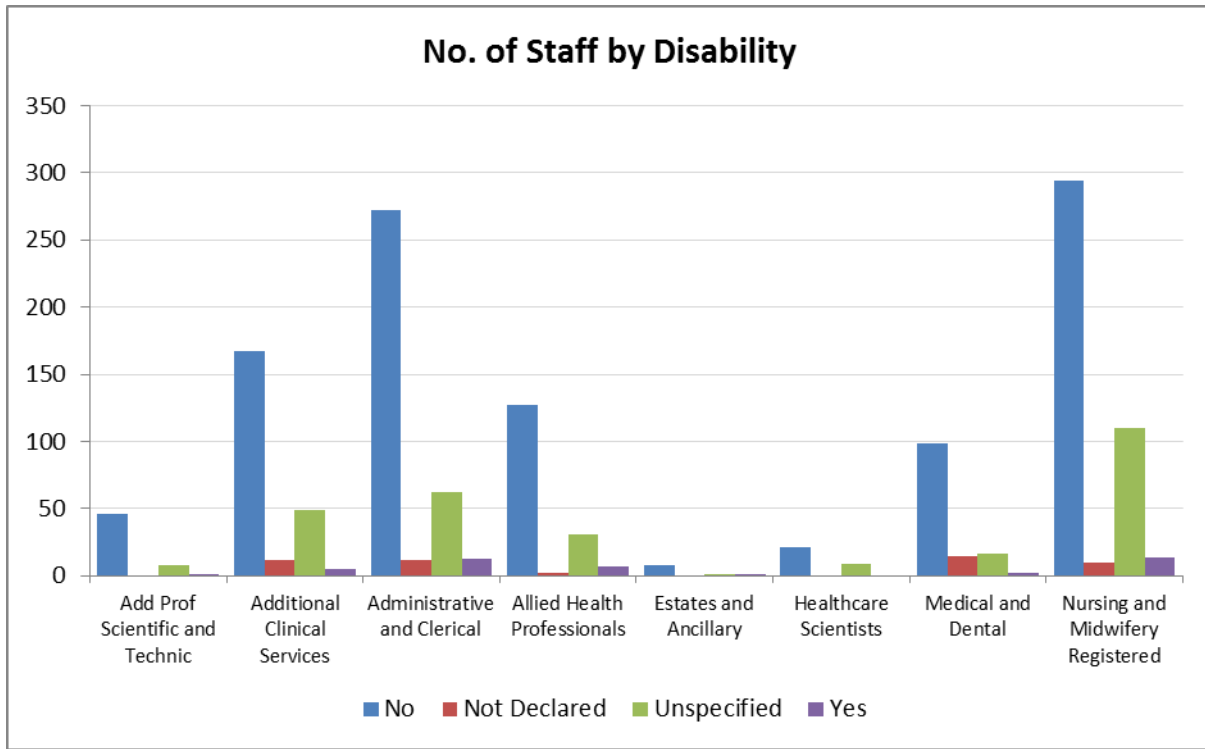
5.4 Workforce by Disability

Disability	No. Of Staff
No	1034
Not Declared	51
Unspecified	286
Yes	43
Grand Total	1414



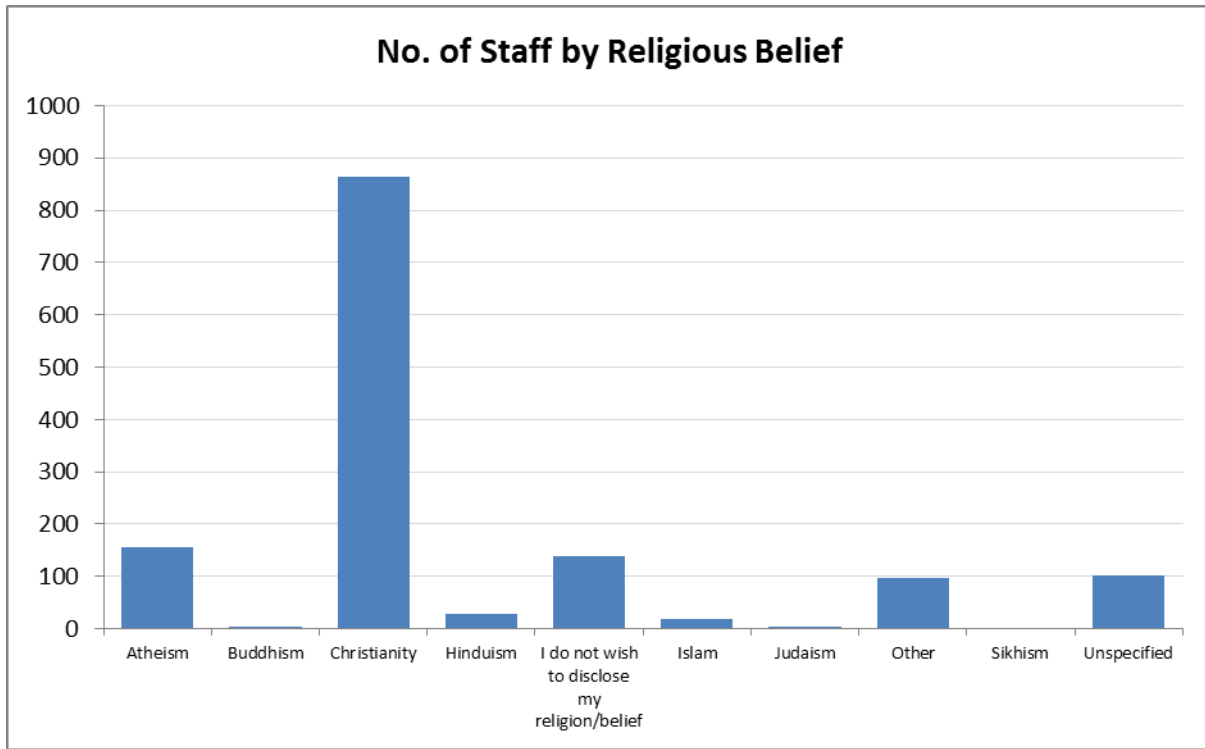
5.4.1 Staff Group by Disability

Staff Group	No	Not Declared	Unspecified	Yes	Grand Total
Add Prof Scientific and Technic	46	0	8	1	55
Additional Clinical Services	167	12	49	5	233
Administrative and Clerical	272	12	62	13	359
Allied Health Professionals	127	2	31	7	167
Estates and Ancillary	8	0	1	1	10
Healthcare Scientists	21	0	9	0	30
Medical and Dental	99	15	16	2	132
Nursing and Midwifery Registered	294	10	110	14	428
Grand Total	1034	51	286	43	1414



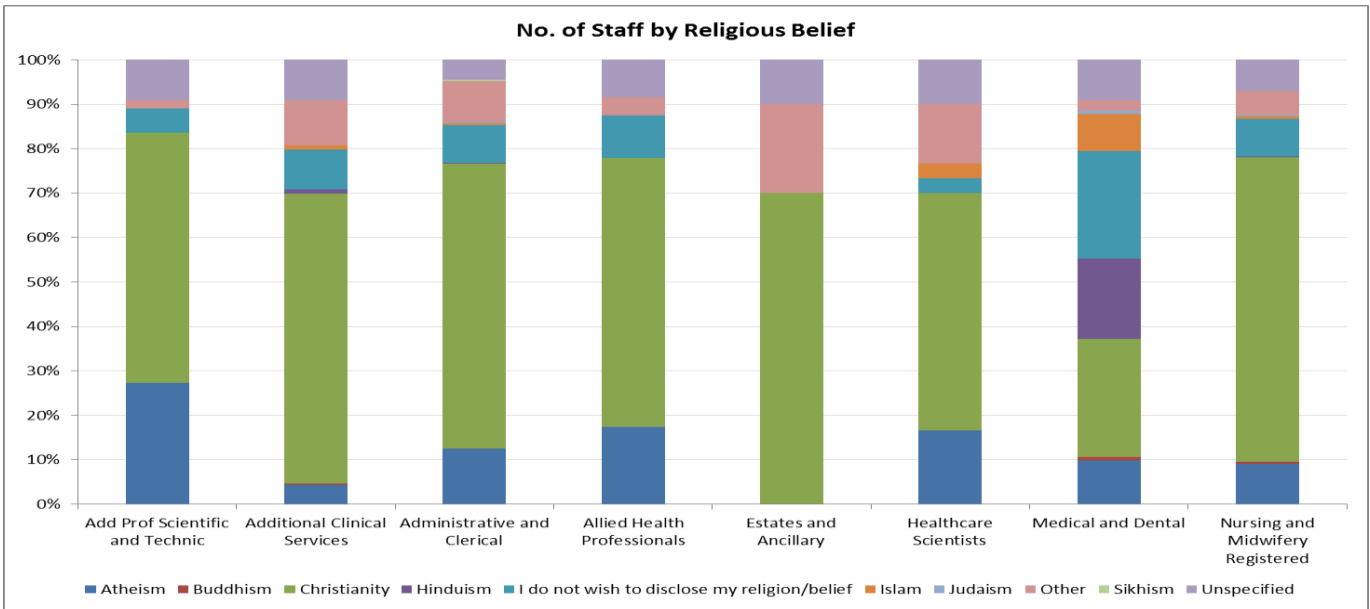
5.5 Workforce by Religion or Belief

Row Labels	No. Of Staff
Atheism	156
Buddhism	4
Christianity	865
Hinduism	28
I do not wish to disclose my religion/belief	139
Islam	19
Judaism	3
Other	97
Sikhism	1
Unspecified	102
Grand Total	1414



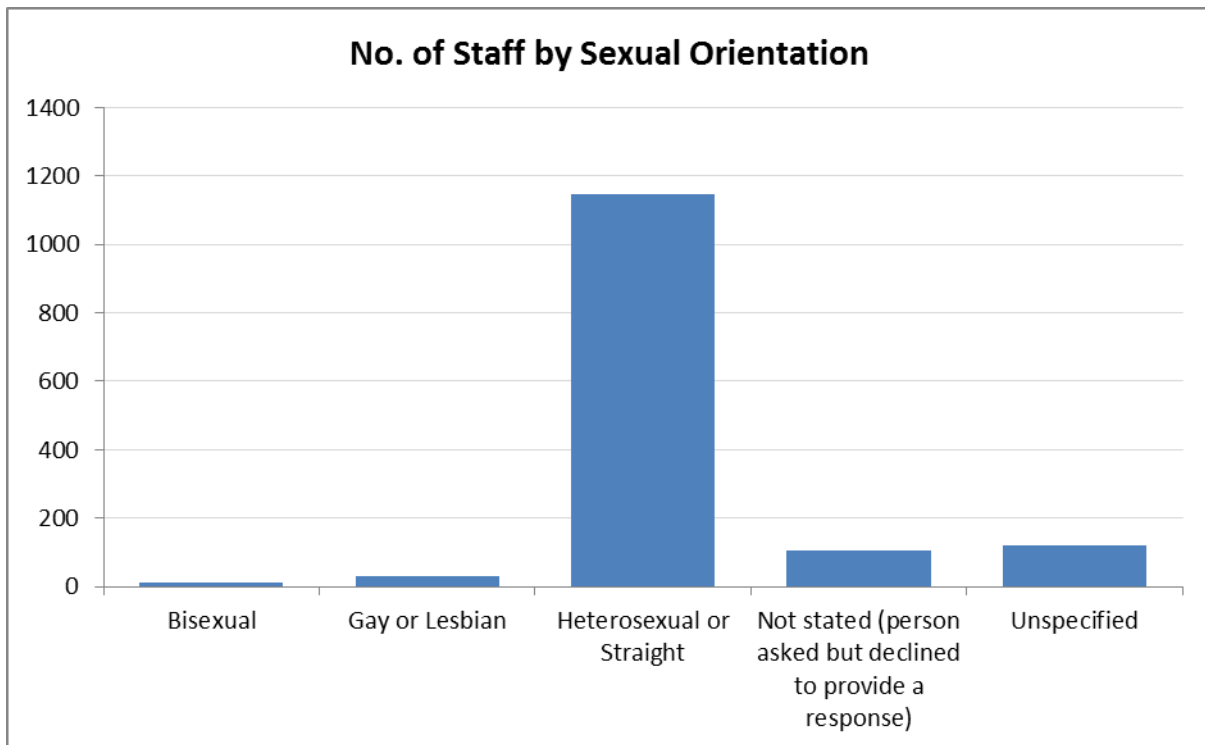
5.5.1 Staff Group by Religion or Belief

Staff Group	Atheism	Buddhism	Christianity	Hinduism	I do not wish to disclose my religion/belief	Islam	Judaism	Other	Sikhism	Unspecified	Grand Total
Add Prof Scientific and Technic	15	0	31	0	3	0	0	1	0	5	55
Additional Clinical Services	10	1	152	2	21	2	0	24	0	21	233
Administrative and Clerical	45	0	230	1	30	2	1	33	1	16	359
Allied Health Professionals	29	0	101	0	16	0	0	7	0	14	167
Estates and Ancillary	0	0	7	0	0	0	0	2	0	1	10
Healthcare Scientists	5	0	16	0	1	1	0	4	0	3	30
Medical and Dental	13	1	35	24	32	11	1	3	0	12	132
Nursing and Midwifery Registered	39	2	293	1	36	3	1	23	0	30	428
Grand Total	156	4	865	28	139	19	3	97	1	102	1414



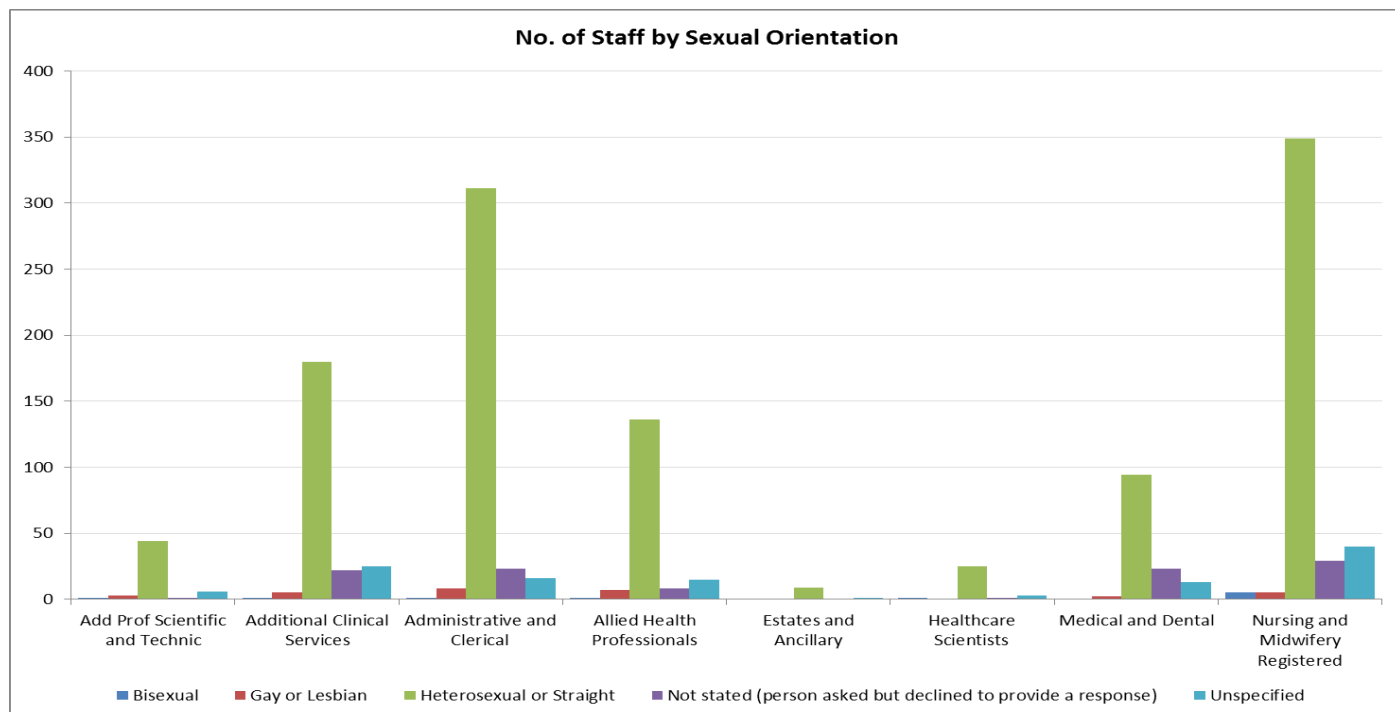
5.6 Workforce by Sexual Orientation

Sexual Orientation	No. Of Staff
Bisexual	10
Gay or Lesbian	30
Heterosexual or Straight	1148
Not stated (person asked but declined to provide a response)	107
Unspecified	119
Grand Total	1414



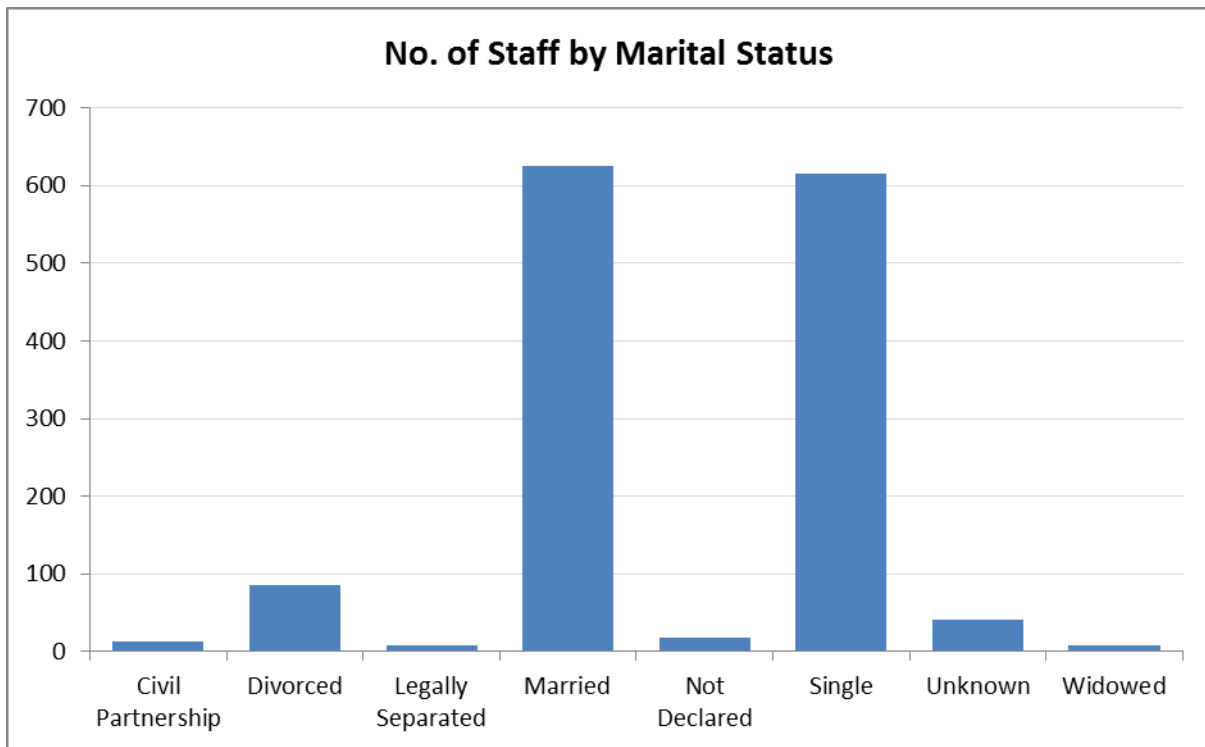
5.6.1 Staff Group by Sexual Orientation

Staff Group	Bisexual	Gay or Lesbian	Heterosexual or Straight	Not stated (person asked but declined to provide a response)	Unspecified	Grand Total
Add Prof Scientific and Technic	1	3	44	1	6	55
Additional Clinical Services	1	5	180	22	25	233
Administrative and Clerical	1	8	311	23	16	359
Allied Health Professionals	1	7	136	8	15	167
Estates and Ancillary	0	0	9	0	1	10
Healthcare Scientists	1	0	25	1	3	30
Medical and Dental	0	2	94	23	13	132
Nursing and Midwifery Registered	5	5	349	29	40	428
Grand Total	10	30	1148	107	119	1414



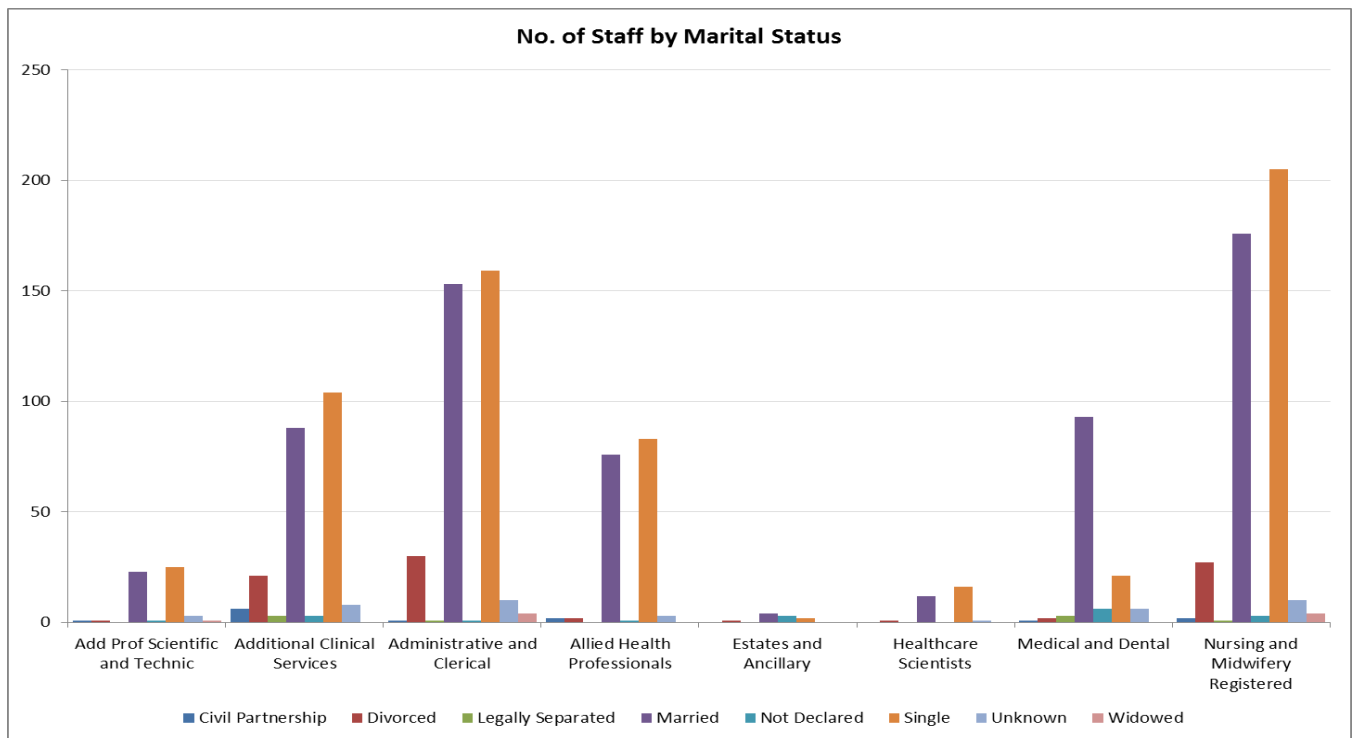
5.7 Workforce by Marital Status

Status	No. Of Staff
Civil Partnership	13
Divorced	85
Legally Separated	8
Married	625
Not Declared	18
Single	615
Unknown	41
Widowed	9
Grand Total	1414



5.7.1 Staff Group by Marital Status

Staff Group	Civil Partnership	Divorced	Legally Separated	Married	Not Declared	Single	Unknown	Widowed	Grand Total
Add Prof Scientific and Technic	1	1	0	23	1	25	3	1	55
Additional Clinical Services	6	21	3	88	3	104	8	0	233
Administrative and Clerical	1	30	1	153	1	159	10	4	359
Allied Health Professionals	2	2	0	76	1	83	3	0	167
Estates and Ancillary	0	1	0	4	3	2	0	0	10
Healthcare Scientists	0	1	0	12	0	16	1	0	30
Medical and Dental	1	2	3	93	6	21	6	0	132
Nursing and Midwifery Registered	2	27	1	176	3	205	10	4	428
Grand Total	13	85	8	625	18	615	41	9	1414



5.8 New Starters

Disability	No. of Staff
No	222
Unspecified	9
Yes	7
Grand Total	238

Gender	No. of Staff
Female	176
Male	62
Grand Total	238

Marital Status	No. of Staff
Civil Partnership	5
Divorced	12
Married	66
Single	153
Unknown	2
Grand Total	238

Age Band	No. of Staff
<=20 Years	8
21-25	48
26-30	62
31-35	27
36-40	19
41-45	18
46-50	21
51-55	12
56-60	15
61-65	6
66-70	1
>=71 Years	1
Grand Total	238

Ethnic Origin	No. of Staff
A White - British	187
B White - Irish	3
C White - Any other White background	11
D Mixed - White & Black Caribbean	1
E Mixed - White & Black African	1
F Mixed - White & Asian	3
G Mixed - Any other mixed background	2
H Asian or Asian British - Indian	15
J Asian or Asian British - Pakistani	2
L Asian or Asian British - Any other Asian background	1
N Black or Black British - African	11
S Any Other Ethnic Group	1
Grand Total	238

Nationality	No. of Staff
British	211
Dutch	1
Egyptian	1
German	2
Indian	5
Irish	3
Italian	1
Maltese	1
Nigerian	3
Pakistani	1
Polish	1
Portuguese	2
Romanian	3
Spanish	1
Sudanese	2
Grand Total	238

Sexual Orientation	No. of Staff
Bisexual	3
Gay or Lesbian	10
Heterosexual or Straight	215
Not stated (person asked but declined to provide a response)	10
Grand Total	238

Religious Belief	No. of Staff
Atheism	49
Christianity	138
Hinduism	6
I do not wish to disclose my religion/belief	19
Islam	8
Other	17
Sikhism	1
Grand Total	238

6 Patient ED&I Profile

6.1 Gender

Sex	Total
Male	64457
Female	90665
Indeterminate	4
Unknown	20
Grand Total	155146

6.2 Ethnicity

Ethnicity	Inpatient	Outpatient	Grand Total
Unknown	222	22001	22223
ASIAN - ANY OTHER BACKGROUND	32	206	238
ASIAN - BANGLADESHI	5	68	73
ASIAN - INDIAN	31	289	320
ASIAN - PAKISTANI	27	134	161
BLACK - AFRICAN	13	165	178
BLACK - ANY OTHER BACKGROUND	45	214	259
BLACK - CARIBBEAN	13	87	100
MIXED - ANY OTHER	20	177	197
MIXED - WHITE AND ASIAN	11	233	244
MIXED - WHITE/BLACK AFRICAN	8	135	143
MIXED - WHITE/BLACK CARIBBEAN	25	160	185
NOT STATED	649	2788	3437
OTHER - ANY OTHER	84	648	732
OTHER - CHINESE	15	168	183
WHITE - ANY OTHER BACKGROUND	213	1276	1489
WHITE - BRITISH	16519	107877	124396
WHITE - IRISH	99	489	588
TOTAL	18031	137115	155146

6.3 Religion

Religion	Inpatient	Outpatient	Grand Total
AGNOSTIC	14	91	105
ANGLICAN	24	148	172
ATHEIST	115	628	743
BAPTIST	19	254	273
BUDDHIST	20	117	137
CHRISTIAN	559	3240	3799
CHURCH OF ENGLAND	4716	32671	37387
CHURCH OF SCOTLAND	30	144	174
CHURCH OF WALES	35	346	381
CONGREGATIONAL	6	27	33
GREEK ORTHODOX	8	51	59
HINDU	25	163	188
JEHOVAH'S WITNESS	29	316	345
JEWISH	34	218	252
METHODIST	220	1371	1591
MORMON	6	32	38
MUSLIM	103	634	737
NO RELIGIOUS PREFERENCE	3656	23001	26657
OTHER CHRISTIAN	132	1398	1530
OTHER NON CHRISTIAN	44	100	144
PATIENT REFUSED TO GIVE INFO	13	24	37
PRESBYTERIAN	1	65	66
QUAKER	1	12	13
RASTAFARIAN		3	3
ROMAN CATHOLIC	3477	21748	25225
RUSSIAN ORTHODOX		2	2
SALVATION ARMY	4	44	48
SEIKH	7	34	41
SPIRITUALIST	19	64	83
UNKNOWN	950	6353	7303
WESLEYAN		3	3
WHITE WITCHCRAFT	1	9	10
Unknown	3763	43804	47567
Grand Total	18031	137115	155146

6.4 Age Band

Age Band	Inpatient	Outpatient	Grand Total
Under 18	65	989	1054
18-24	842	7897	8739
25-34	2057	15996	18053
35-44	3177	19866	23043
45-54	4516	28365	32881
55-64	3667	27638	31305
65-74	2672	22429	25101
75+	1035	13935	14970
Grand Total	18031	137115	155146

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:

Andrew Lynch
Equality and Inclusion Lead
HR Department
The Walton Centre NHS Foundation Trust
Sid Watkins Building
Lower Lane
Liverpool
L9 7BB

Email: Andrew.Lynch2@thewaltoncentre.nhs.uk

Telephone: 0151 556 3396

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:

Organisation’s

EDS2 lead (name/email):

Lisa Salter (Director of Nursing & Governance)

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: 17/06/2019) DRAFT Pending Submission to NHS England		
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, 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, 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, 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 • 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, 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, 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 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, 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, 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 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, 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 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 –</p>

		<p>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. For this outcome, the Trust is firmly committed to listening to the views of patients, carers and other local interest groups and communities and 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>
2.4		<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, 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>
A representative and supported workforce	3.1	<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, 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</p>

	<p>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.</p> <p>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 reassignment. The Trust was reaccredited with 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.</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, 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, 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.</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, 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, disciplinarys, and dignity at work) is monitored against the 7 protected characteristics 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).</p> <p>In relation to Disability, I monitoring is also conducted via the Workforce Disability Equality Standard (WDES).</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, 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>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, 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</p>

		<p>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>
	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, 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 board review and approve the Equality and Diversity Annual Report; which covers 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>The Director of Nursing and Governance is the Executive Lead for Equality within the Trust. 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 form 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>
Inclusive leadership	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, 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 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</p>

		<p>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, 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</p> <p>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>Cultural Ambassadors Programme</p> <p>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 1 April 2018 to 31 March 2019 Pending Availability

Category	Description	Applications	%	Shortlisted	% shortlisted
Gender	Male	1,693	30.8%	402	24.4%
	Female	3,787	68.8%	1234	74.8%
	Undisclosed	24	0.4%	13	0.8%
Disability	Yes	303	5.5%	97	5.9%
	No	5,101	92.7%	1522	92.3%
	Undisclosed	100	1.8%	30	1.8%
Criminal Conviction	Yes	34	0.6%	10	0.6%
	No	5,424	99.4%	1594	99.4%
Ethnicity	WHITE - British	3,882	70.5%	1291	78.3%
	WHITE - Irish	61	1.1%	21	1.3%
	WHITE - Any other white background	281	5.1%	67	4.1%
	ASIAN or ASIAN BRITISH - Indian	284	5.2%	70	4.2%
	ASIAN or ASIAN BRITISH - Pakistani	166	3.0%	25	1.5%
	ASIAN or ASIAN BRITISH - Bangladeshi	27	0.5%	7	0.4%
	ASIAN or ASIAN BRITISH - Any other Asian background	67	1.2%	10	0.6%
	MIXED - White & Black Caribbean	24	0.4%	4	0.2%
	MIXED - White & Black African	48	0.9%	6	0.4%
	MIXED - White & Asian	20	0.4%	10	0.6%
MIXED - any other mixed background	30	0.5%	9	0.5%	

Category	Description	Applications	%	Shortlisted	% shortlisted
	BLACK or BLACK BRITISH - Caribbean	19	0.3%	5	0.3%
	BLACK or BLACK BRITISH - African	306	5.6%	38	2.3%
	BLACK or BLACK BRITISH - Any other black background	12	0.2%	2	0.1%
	OTHER ETHNIC GROUP - Chinese	16	0.3%	6	0.4%
	OTHER ETHNIC GROUP - Any other ethnic group	143	2.6%	25	1.5%
	Undisclosed	118	2.1%	53	3.2%
Age Band	Under 18	3	0.1%	2	0.1%
	18 to 19	46	0.8%	9	0.5%
	20 to 24	730	13.3%	171	10.4%
	25 to 29	1,187	21.6%	301	18.3%
	30 to 34	995	18.1%	263	15.9%
	35 to 39	647	11.8%	210	12.7%
	40 to 44	525	9.5%	176	10.7%
	45 to 49	481	8.7%	186	11.3%
	50 to 54	454	8.2%	173	10.5%
	55 to 59	302	5.5%	113	6.9%
	60 to 64	116	2.1%	39	2.4%
	65 to 69	9	0.2%	3	0.2%
	70 and over	4	0.1%	2	0.1%
	Undisclosed	5	0.1%	1	0.1%
Religion	Atheism	672	12.2%	239	14.5%
	Buddhism	30	0.5%	7	0.4%
	Christianity	3,206	58.2%	976	59.2%
	Hinduism	155	2.8%	33	2.0%
	Islam	410	7.4%	78	4.7%

Category	Description	Applications	%	Shortlisted	% shortlisted
	Jainism	2	0.0%	0	0.0%
	Judaism	19	0.3%	3	0.2%
	Sikhism	9	0.2%	4	0.2%
	Other	535	9.7%	139	8.4%
	Undisclosed	466	8.5%	170	10.3%
Sexual Orientation	Heterosexual	5,087	92.4%	1500	91.0%
	Gay/Lesbian	150	2.7%	40	2.4%
	Bisexual	59	1.1%	17	1.0%
	Other	7	0.1%	4	0.2%
	Undecided	8	0.1%	2	0.1%
	Undisclosed	193	3.5%	86	5.2%
Marital Status	Married	1,848	33.6%	600	36.4%
	Single	3,136	57.0%	855	51.8%
	Civil partnership	97	1.8%	21	1.3%
	Legally separated	30	0.5%	11	0.7%
	Divorced	205	3.7%	81	4.9%
	Widowed	30	0.5%	11	0.7%
	Undisclosed	158	2.9%	70	4.2%
Impairment	Physical Impairment	79	22.1%	21	18.6%
	Sensory Impairment	56	15.6%	23	20.4%
	Mental Health Condition	40	11.2%	16	14.2%
	Learning Disability/Difficulty	62	17.3%	24	21.2%
	Long-Standing Illness	90	25.1%	23	20.4%
	Other	31	8.7%	6	5.3%
Total	Total	5,504	100.0%	1649	100.0%