

2015 EDS 2 ASSESSMENT

EMPLOYMENT RELATED GOALS 3 & 4

GOAL 3: A representative and supported workforce

Outcome: Fair NHS recruitment & selection processes lead to a more representative workforce at all levels

Sources of Trust evidence:

- **Recruitment & Selection Policy**
- **Positive about Disability Two ticks employer**
- **Analysis of recruitment statistics by equality groups undertaken in E & D employment monitoring report**
- **Analysis of Trust workforce by equality groups undertaken in E & D employment monitoring report**
- **Focus Groups held in September 2014 (staff living with a disability) and February 2015 (BME)**

What the evidence tells us:

- The feedback from the second BME Focus Group on Trust R & S was positive. Some areas for development were raised around recruitment & selection in relation to internal appointments.
- The Trust remains a Positive about Disability Two Ticks employer and was successfully re-assessed against this standard in Summer 2014. We were this year invited to attend an awards ceremony organised by Job Centre Plus in recognition of our award.
- No specific areas of concern in relation to recruitment were highlighted during the Focus Group for Staff Living with a Disability.
- BME staff are over representative in comparison with the local population (influenced by the significant proportion of the consultant workforce is BME origin - 55%). It is noted that male staff are underrepresented overall within the Trust workforce (19%) compared with the local population. However, this reflects the predominantly female occupations found within an NHS workforce. The exception to this is the M & D Staff Group which is 81% male and the traditionally male staff group of Estates & Works.
- The Trust is under representative of employees within the age range of 16- 24 and 65-75 years. In regards to the 16-24 age bracket it is expected that there would be an under representation of the Trust workforce in comparison with

the Wigan Borough due to 21 years being the minimum age for qualification of professional staff groups in the Trust. In addition, there are also a proportion of the Borough's young people in this age group within full time education. However, the Trust does promote itself to young people through its work experience schemes. In regards to the 65-75 years age bracket, this under representation is likely to be due to the reduced number of people remaining within paid employment within this age category. An analysis of the Trust workforce in comparison with the Wigan Borough highlights that the Wigan Borough has a high % of the population declaring themselves as Christian (77.8%) compared with 49% of the Trust workforce. However, it is noted that 40% of the Trust workforce has an undeclared religion/belief.

- The 2013/14 recruitment stats identified that BME candidates had a lower shortlisted and appointment rates compared with white candidates. Furthermore, an e-learning package has been drafted and is in the process of being formatted for piloting early in 2015-16.
- Several programmes of overseas recruitment took place in 2014/15 and there are plans to carry out further programmes in the future.

Actions to be incorporated into EDS action plan:

- BME Shortlisted & Appointment ratios- further analysis/on line survey required.
- Online recruitment pilot to be finalised and rolled out within an identified Division of the Trust.
- Look into the feasibility of ensuring BME representation on interview panels.

Trust grading: ACHIEVING

GOAL 3: A representative and supported workforce

Outcome: Training and development opportunities are taken up and positively evaluated by all staff

Sources of Trust evidence:

- **Analysis of training statistics by equality groups**
- **Focus Group for staff living with a disability held in September 2014**
- **BME Staff Focus Group session held in February 2015**
- **2014 staff survey feedback**
- **Equality Delivery System internal staff survey 2014**

What the evidence tells us:

The analysis of T & D by 8 of the protected characteristics (age/gender/age/disability/marital status/sexual orientation/religion & belief and ethnicity) highlighted that generally the training take up rates were consistent across the protected characteristics with the exception of age. Older employees training activity was identified as an area for further analysis as workers over 55+ years had lower rates of training than other equality groups.

The 2014 Staff Opinion Survey showed a 5% increase in the percentage of staff having inclusion and diversity training in the last 12 months, at 79%.

BME Focus group feedback suggested that imagery within e-mandatory training modules needs to be more representative. Feedback from the Focus Group for staff living with a disability highlighted some improvement areas such as availability of headphones for online training and subtitles for podcasts.

The 2015EDS staff survey highlighted that 43.16% of staff indicated that they had a positive experience of T & D in the Trust with 34.74% disagreeing, and the remaining 21.11% could not comment. The evaluation aspect is a gap area as we cannot assess and grade by protected groups their evaluation of T & D opportunities.

In response to previous comments made, training events were offered on a range of dates and times so as to allow flexibility. As stated above, IT Training solutions were offered which also increases flexibility. Whilst some comments from this year's EDS survey indicated that more flexibility is needed, others indicated that the training provision is to a very high standard.

The following are identified areas for action:

Actions to be incorporated into EDS action plan:

- Ensure that imagery within e-mandatory training modules is representative.

Trust grading: ACHIEVING

GOAL 3: A representative and supported workforce

Outcome: 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

Sources of evidence:

- **Analysis of agenda for change bands by equality group**
- **Analysis of IVIEW equal pay audit reports (still to be sourced)**
- **Equality Delivery System internal staff survey 2014**

What the evidence tells us:

The Trust operates AfC job evaluation system for non-medical staff and has nationally agreed T & C for medical staff. AfC Job evaluation system is embedded in the organisation with consistency checking in place. Evaluation and consistency checking is carried out in partnership with staff side colleagues. Appeal procedures are also made available.

29.31% of staff responding to the EDS staff survey agreed that staff enjoy equal levels of pay and related terms & conditions for undertaking work that is rated as equal value. 69.56% disagreed and 6.52% could not comment.

There is a requirement for the Trust to undertake an analysis of pay band by equality group and identify key themes to enable an action plan to be developed. This is an outstanding action and will be incorporated into the 2015-16 EDS action plan.

Actions to be incorporated into EDS action plan:

- **Analyse results from the planned equal pay audit.**

Trust grading: UNDEVELOPED

GOAL 3: A representative and supported workforce

Outcome: When at work, staff are free from abuse, harassment, bullying and violence from any source

Sources of evidence:

- **Analysis of the 2014 National Staff Survey results by equality group**
- **Analysis of 2015EDS local staff survey**
- **Review of dignity at work employee relations cases by equality group**

What the evidence tells us:

- The 2014 staff survey results remained static and highlight that overall the Trust scored worse than average on the number of staff experiencing physical violence from patients/relatives/public and the number of staff experiencing physical violence from other staff. The Trust remains an outlier on this factor.
- The 2014 staff survey results highlight that the Trust scored better than average on the number of staff experiencing harassment, bullying or abuse from patients/relatives/public and the number of staff experiencing harassment, bullying or abuse from staff.
- White staff report higher rates of physical violence from patients/relatives/public than Black & Minority Ethnic staff but lower rates of physical violence from staff.

Actions to be incorporated into EDS action plan:

- Staff experiences of violence & harassment- the 2014 staff survey results do not correlate with internally reported incidents of staff on staff violence- this suggests that there is an undercurrent that we are not aware of. Need to further promote a culture of staff feeling safe to raise concerns as part of the Operations Group's agenda.
- In particular unpick the issues around disabled staff experience of violence & harassment and bullying and harassment.
- Dignity at work policy review is currently being undertaken.
- Incorporate new process into the new mediation service being launched in 2015.

Trust grading: DEVELOPING

GOAL 3: A representative and supported workforce

Outcome: Flexible working options are available to all staff consistent with the needs of the service and the way people lead their lives

Sources of evidence:

- **Analysis of local flexible working requests by equality groups**
- **Analysis of EDS local staff survey**
- **Flexible Working Policy**

What the evidence tells us:

The Trust has a flexible working policy in place. In the 2015 EDS Staff Survey 90.82% responded that they were aware that the Trust had a flexible working policy and 74.49% were aware of the types of flexible working that are available to request. Currently 42% of the workforce work part time (a slight decrease from last year's 43%) but we do not have any figures of total staff working under some form of flexible working arrangement as this is not recorded centrally.

In 2013 we introduced monitoring of flexible working applications by equality group. Overall approval rates were high for the period April 2014- March 2015 (95%) from the applications monitored and the approval rates are generally consistent across the protected characteristics. However, it is noted that this data may not represent all applications that are made as not all managers may be sending the tracking forms back to HR.

17.35% of the EDS survey respondents had made a request for flexible working within the last 12 months. Whilst there were some who responded that they were happy with the way in which their application was handled and others who were unhappy, due to inconsistencies within the responses submitted, it is not possible to determine percentages in this regard.

Actions to be incorporated into EDS action plan:

- Send further reminder out via Trust News that the flexible working tracking form needs to be completed for every request that is made
- Continuing to monitor flexible working applications as part of I& D employment monitoring report
- Use of flexible working support pack to be encouraged via Trust News

Trust grading: ACHIEVING
GOAL 3: A representative and supported workforce
Outcome: Staff report positive experiences of their membership of the workforce
<p>Sources of evidence:</p> <ul style="list-style-type: none"> • National Staff Survey Results • Local Pulse Check surveys • Targeted Focus Groups
<p>What the evidence tells us:</p> <ul style="list-style-type: none"> • The 2014 National Staff Survey staff engagement indicator overall places us above average in comparison with other acute Trusts and this reflects that overall staff are reporting positive experiences of their membership of the workforce • The 2014 National Staff Survey showed a 2% increase in the percentage of staff believing that the Trust provides equal opportunities for career progression or promotion at 93%. • The 2014 National Staff Survey indicated a 3% decrease in the percentage of staff experiencing discrimination at work in the last 12 months at 6%. • Analysis of the staff engagement indicator highlights that the results do not vary significantly by Age & Gender. However, it is noted that BME staff have the highest levels of engagement across the equality groups with Disabled staff an outlier with the lowest levels of engagement. • The Focus Group for Staff Living with a Disability has allowed a network to be developed. Staff stories around this have been published on the Trust intranet to raise awareness. <p>Actions to be incorporated into EDS action plan:</p> <ul style="list-style-type: none"> • Planned participation in Pride during 2015-16. • Events planned for 2015 to raise awareness of Hate Crime Reporting, in conjunction with Greater Manchester Police. • Programme of general engagement activities and calendar of events planned for 2015-16. • Consider a further Focus Group for staff living with a disability.
Trust grading: ACHIEVING

GOAL 4: Inclusive Leadership

Outcome: Boards and senior leaders routinely demonstrate their commitment to promoting equality within and beyond their organisations

Sources of evidence:

- **Leadership Master classes**
- **Chief Executive & Director Listening Events with staff**
- **E & D Steering Group Executive membership**
- **E & D training delivered to Trust Board**
- **Medical Director is a BME Pioneer**
- **Adult Learners Awards**
- **Trust values & behaviours and OD Strategy**
- **Supported Employment & Internship Programme for individuals learning Disabilities**
- **Pre-employment programme for long term unemployed**
- **Skills Club for young people**
- **BME Focus Group**
- **Focus Group for Staff Living With a Disability**
- **Social Responsibilities Group**
- **Health Service Journal Award for “Improving Environmental and Social Sustainability”**
- **Cultural awareness campaign**
- **World Cup 5 A Side Event**
- **Champion Training Programme with Trust Board as leaders**

What the evidence tells us:

There is clear evidence that Board members and senior leaders have demonstrated their commitment to promoting equality within and beyond the Trust in a variety of ways. Key examples are referenced below and formal minutes, action plans and action logs support meetings and focus groups etc.

The HR Director & Operations Director are joint chairs of the Inclusion and Diversity Steering Group and they actively lead and promote the Equality, Diversity & Human Rights Agenda within the Trust.

The Trust’s Medical Director has been named one of the Top 50 UK Pioneers in a list created to recognise the outstanding contributions of healthcare professionals from Black, Minority and Ethnic (BME) backgrounds. He is a champion for equality & diversity within & outside the organisation and once again attended the Trust’s BME

Focus Group session- supporting staff and helping feedback key messages to the Executive Team.

There is Senior level support for a further Supported Internship programme aimed at young people with Learning Disabilities within the Wigan Borough. This was due to commence in September 2014 but was delayed by Wigan Council and is now planned for Summer 2015.

The Trust has a Social Responsibilities Group chaired by the Director of Finance / Deputy Chief Executive and has membership from senior leaders across a diverse range of areas. The group has undertaken a wide range of activities around Corporate Social Responsibility which include the donation of breast cancer pillows, a brabank for the recycling of bras. The group is currently planning a music festival to celebrate the 25th anniversary of the cancer care unit, and a volunteer programme as well as “precious pennies” scheme to enable staff to donate to the WWL Three Wishes Charity via salaries.

A Health Service Journal Award was also won by the Trust in relation to Social Responsibility work. In addition to being awarded Provider Trust of the Year award, the Trust was also successful in the Improving Environmental and Social Sustainability category.

There has been Executive & Senior level commitment to the development and launch of the Trust values and behaviours framework which includes Dignity & Respect as one of the core values.

Within 2014-15 a programme of cultural awareness was proposed by the Director of HR& Deputy Director of HR to raise the profile of Inclusion& Diversity within the Trust. This is another excellent example of the active promotion of equality based initiatives by Senior Leadership within the Trust.

68% of staff members surveyed were aware of the ID Champions in place within the Trust. There is now a plan to carry out more training commencing with Trust Board so as to further embed this good practice.

Trust grading: ACHIEVING

GOAL 4 : Inclusive Leadership

Outcome: 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

Sources of evidence:

- **All Board papers pre March 2014 asked whether I& D implications have been taken into account.**
- **I& D service & employment monitoring reports**
- **I& D Equality Objectives update**
- **I& D Steering Group papers**

What the evidence tells us:

The Trust Board minutes template has been revised by Helen Hand & Debbie Jones. All Trust Board meeting minutes are in the new format and have been uploaded onto the Trust internet website.

ID service and employment monitoring reports cover all protected groups and are available on the Trust internet website.

EDS actions make reference to the above to ensure that reviews take place on an ongoing basis.

Actions to be incorporated into EDS action plan:

Continue to ensure ongoing compliance.

Trust grading: ACHIEVING

GOAL 4: Inclusive Leadership

Outcome: Middle managers and other line managers support their staff to work in culturally competent ways within a work environment free from discrimination

Sources of evidence:

- **National Staff Survey data**
- **Inclusion and Diversity Training for Managers and Leaders**
- **Staff Stories published on the Trust Intranet website**
- **Cultural Awareness campaign and World Cup events**
- **Local EDS 2014 Staff Survey data**

What the evidence tells us:

National Staff Survey data confirms that 93 % of staff believe that the Trust provides equal opportunities for career progression and promotion and 9% of staff indicate that they have experienced discrimination in the last 12 months. Both of these elements are an improvement on last year's findings. Although data also indicates that 23% of staff have experienced harassment, bullying or abuse from patients, relatives or the public in the last 12 months, this is an improvement on last year's 27% and lower than the national average for acute trusts which is 29%.

A further four Inclusion and Diversity Leadership training events were delivered. Feedback continues to be excellent as delegates appreciate not only the course content but also the opportunity to share good practice and discuss approaches to dealing with operational challenges.

Staff stories obtained to date indicate that staff appreciate the support received from the Trust in relation to ID matters. These will be developed as initiatives are rolled out and Champions take on specific areas of responsibility moving forward.

Cultural awareness campaign was carried out on all Trust sites in the summer of 2014 and linked to the World Cup 5 A side event – there was 51.52 % awareness according to the local EDS Staff Survey carried out. Post event publicity has included photographs and articles in the Trust magazine which is distributed to all staff and patient areas and is also available online. The Trust calendar featured photographs as well as key Inclusion and Diversity dates across the year so as to raise further awareness on an ongoing basis. Members of staff submitted comments showing their appreciation of the events which were also shortlisted as part of the 2014 Recognising Excellence Awards. Positive feedback was received as part of the assessment process.

Actions to be incorporated into EDS action plan:

- Equality Impact Assessment – further training planned for 2015-16.
- Another four sessions of Inclusion and Diversity Leadership have been commissioned for 2015-16.
- Review the management and leadership programme with a view to including E and D modules.
- Review the method of communicating initiatives so as to further increase take up and awareness.

Trust grading: DEVELOPING