

Title of report:	Inclusion and Diversity Annual Monitoring Report – April 2019 to March 2020
Presented to:	Trust Board
On:	27 th January 2021
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Executive summary

There are a number of equality based national laws and guidelines which mandate and guide how NHS organisations should demonstrate equality. These include the Legal Framework, NHS Constitution, NHS Equality Delivery System, Workforce Race Equality Standard and Disability Equality Standard. This report evidences how the Trust has delivered on these requirements during the last 12 months and summaries the priorities for the year ahead. **See Appendix 4 for a summary of our compliance against national standards.**

As an employer and health service provider, WWL NHSFT takes the issues of fairness, rights and equality very seriously. Inclusion and diversity is a key part of our values and runs through everything we stand for and do. By investing in inclusion and diversity we aim to improve services and patient care. We will continue to ensure that our staff and service users are in a safe, inclusive and accessible environment and that our services are accessible to all communities across the borough of Wigan.

Over the past few years we have made substantial progress in embedding inclusion and diversity into our core business activities. We will continue to make progress by ensuring these values are mainstreamed through all aspects of our service provision, and in how we work in partnership with our employees and our local communities.

Link to strategy

Inclusion & Diversity Strategy

Risks associated with this report and proposed mitigations

Challenge from the local community and loss of reputation and public confidence could arise as a subsequence. Non-compliance / failure to address national requirements could impact on our Care Quality Commission Scores. The key risks to the Trust therefore in terms of service delivery are non-completion of equality impact assessments, failure to provide accessible information in a patient's preferred format and the limited availability of equality information against some of the protected characteristics.

The key risks to the Trust in terms of employment practice are: a higher percentage of white applicants continuing to be appointed following shortlisting than those from black and minority groups. Furthermore, improved levels of declared workforce data in respect particularly of sexual orientation and disability status would enable the Trust to more effectively assess whether or not its employment practices are fit for purpose moving forward.

Financial implications

[XXX]

Legal implications

Failure to actively promote equality across all protected characteristics could constitute failure to meet the requirements of Equality Legislation / Statutory Bodies.

People implications

[XXX]

Wider implications

Failure to actively promote equality across all protected characteristics could see the Trust receive challenge from the local community and loss of reputation and public confidence could arise as a subsequence. Non-compliance / failure to address national requirements could impact on our Care Quality Commission Scores. The key risks to the Trust therefore in terms of service delivery are non-completion of equality impact assessments, failure to provide accessible information in a patient's preferred format and the limited availability of equality information against some of the protected characteristics.

Recommendation(s)

WWL Workforce Committee members are invited to receive and approve the Annual Inclusion and Diversity Monitoring Report.

Report

Over the last 12 months, the Trust has seen notable progress in embedding inclusion, diversity and human rights into core business activity. **A number of key outcomes have been achieved over the last 12 months.**

Staff Engagement

Rainbow Badge Initiative launched at Trust Board in July 2019

Staff Story – Living with Dyslexia

Supported National BAME Health & Care Awards

Civility Saves Lives Campaign

Calendar of Events

Awareness of protected characteristics throughout the year:

Disability Awareness Day – July 2019

Launch of LGBT+ Rainbow Scheme -July
Wigan PRIDE - Aug 2019

Black History Month – Oct 2019

Anti-Bullying Week – Nov 2019

World Religion Day – Jan 2020

Governance

EDS 2020 Report produced.

Annual WRES Assessment Published.

Annual WDES Assessment Published

Partnership Working

Wigan Borough E&D Collaborative Group

Key stakeholder in planning of Wigan Pride 2018

E&D North West Forum

GM E&D Leads Forum

Training

- Beginners Sign Language Course for Staff
- Level 3 & 5 Inclusive Leadership Management Training Session
- Executive Board Training Day

Patient Engagement

- Wigan Pride 2019
- Leigh Deaf Club
- BME Cancer Patient Experience Survey 2019
- Wigan Access Committee

Improved Access

Pagers for hearing impaired implemented in A&E.

A&E Booking In Form for hearing impaired patients.

Access to BSL Interpreters now included in Patient Relations practice.

New provider for Face to Face Interpreters & written translations sourced and implemented Jan 20.

Summary of Headline Data:

SERVICE USERS

- Overall picture of patient access reflects broad similarity to local demographics.
- Over last 12 months, 0.3% decrease in total in-patients/out-patients of British White Ethnicity. 0.4% increase in patients of Black and Minority Ethnic Backgrounds. 92% British White / 4.4% BME. No statistical significance reported. 0.1 % decrease in those not stated (3.5%).
- Over last 10 years, steady increase in % of patients of black and minority ethnicity attending A&E. **2010/11: BME 2.5% / 2019/20: BME 6.3% .**
- Higher % of Black and Minority Ethnic Groups using maternity services in comparison with overall out-patient / in-patient activity. Data historical – 0.5% increase in BME maternity activity during last 12 months. British White 87.2% / BME 12.5%. No statistically significant difference noted. Data in line with growth in Wigan Borough migrant worker population and numbers of refugees / asylum seekers.
- As of the 2011 Census, over 95% of the population was White British. This compares to just under 80% in England as a whole. However, Wigan Borough has received a sizeable number of refugees and migrants over the last decade and it is likely that the population will become more diverse over the coming years. Migration has significantly changed the wealth of diversity in Wigan since the last census and there has been significant demographic change within Wigan Borough. Although the numbers are small compared to the size of the total population and some only stay for a short period of time, some will have specific health needs that need to be addressed.
- The top languages interpreted during 2019/20 were: Romanian, Arabic, Kurdish Sorani, Farsi, Polish, Mandarin, Russian, Cantonese. Trends show the same top languages as 2018/19. An increase in the number of interpreter requests for Romanian, Kurdish, Farsi and Polish interpreters during the last 12 months noted.
- As with most healthcare services in the UK, women are more likely to use hospital services than men – 57% of out-patients during the last 12 months were female.
- The latest census reported that the % of the population aged 65 and over in the Wigan Borough was the highest seen in any census. There has been a steady increase in the number of people aged 65+ within Wigan Borough as a result of increasing life expectancy . The proportion of people aged 65+ in 2017 was 18.8%. This is projected to rise to 20.9% by 2025, to 23.0% by 2030, and to 26.2% by 2040. **Maintaining the health and resilience of older people is important both for the individuals themselves and in ensuring the sustainability of local health and adult social care services.** The age of patients accessing hospital services is bias towards the older population, reflecting greater healthcare needs. Trends show a 3% increase in patients aged 65+ years over the last 2 years and 4% decrease in those aged 18-30 years. This needs to be monitored over longer period to establish if any statistical significant difference.
- 21.5% of Wigan residents are living with a limiting long-term illness, health problems or disability – higher than the national average 17.9%. 1 in 6 (16%) of the local population are living with hearing loss (53,000 residents). By end of 2020, 10,500 Wigan Residents estimated to be living with sight loss.
- Estimated 15,000 lesbian, gay and bisexual Wigan residents and 2,500 Trans residents.

STAFF

- Similar to last year, just over 90.9% of the workforce is of British White Ethnicity. This figure remains slightly higher than the Wigan borough figure of 97.5%. Similar to last year, 8% of the workforce profile is from Black and Minority Ethnic Groups, with 6.25% of Trust Board being BME.
- Whilst the split between under 50 and over 50 has remained fairly static, there has been a further slight increase in the proportion of staff aged over 60 which reflects an ageing workforce.
- There has been slight improvement in the amount of declared data in respect of disability from 2.2% to 2.6%.
- The workforce profile remains predominantly female at 82% whereas the local population is 49.7% female. However, this is in keeping with the gender profile of the healthcare profession in general and the NHS in particular.
- Just over 58% of staff who have disclosed their religion and belief and describe themselves as Christian compared to a Wigan borough figure of 77.8%. However, 25% of Trust staff have not disclosed their religion and belief.
- Similar to last year, nearly 75% of staff describe themselves as heterosexual. However, just 24% of staff have not disclosed their sexual orientation, this is slightly less than last year's rate of 25%.

Having a clear profile of our staff and patients helps to advance equality of opportunity and meet the needs of our patients and staff in designing our services and employment practice.

Workforce

Workforce data is collected routinely by the Trust:

- Age
- Disability
- Ethnicity
- Sex
- Marital Status
- Maternity
- Religion & Belief
- Sexual Orientation

For the purposes of this report, we have reviewed the data which is available to us in terms of the above protected characteristics. The Trust does not hold data on gender reassignment for its workforce profile although it does for statistics in relation to Recruitment and Selection. **See Appendix 3 for Full Details.**

Service Users (Patients)

The Trust has historically only had very limited information on the protected characteristics of the people who use our services. As a consequence, it can be difficult for us to determine the extent to which we are providing services which are responsive to individual needs. The following patient demographics are collected routinely by the Trust:

- Age
- Sex
- Ethnicity
- Religion and Belief

For the purposes of this report, we have reviewed the data which is available to us in terms of age, sex, ethnicity and religion and belief, along with local data and reports. Where we do not have sufficient data in terms of disability, sexual orientation, marriage and civil partnership, trans gender, we have used regional or national data as an estimate. **See Appendix 3 for Full Details.**

Over the last 12 months, we have seen progress in embedding inclusion, diversity and human rights into core business activity.

The table at **Appendix 1** summarises:

- What we did during -2019/20
- Why we did it
- What the outcome was
- Priorities for the year ahead

Information in **Appendix 2** provides a summary of Key Diversity Events celebrated during 2019/20.

Conclusion

Over the past few years, Wrightington, Wigan and Leigh Teaching Hospitals NHS Foundation Trust have made substantial progress in understanding diversity within the local population and ensuring the knowledge, skills and competencies in our staff meet the needs of service users with protected characteristics. We will continue to make progress by ensuring these values are mainstreamed through all aspects of our service provision, and in how we work in partnership with our employees and our local communities.

As this annual report identifies, there have been some notable successes:

- Living with dyslexia staff story.
- Wigan PRIDE returned for a fourth year. WWL were actively involved in the planning and participation on the day.
- Rainbow Badge Initiative launched Trust wide.
- Engaged with specific protected characteristic groups about hospital services (including Leigh Deaf Club and Wigan Access Group)
- Several Patient Experience Surveys carried out including BME Cancer Patient Experience and LGBT Community.
- Beginners British Sign Language Course for staff.
- Easy Read training for staff.
- Inclusive Leadership Management Programme for Level 3 and 5 launched.
- A&E 'Booking In' Form designed for hearing impaired patients.
- Access to BSL Interpreters now included in Patient Relations practice.
- New provider for Face to Face Interpreters and written translations sourced and implemented from January 2020.

Work around the requirements of the Equality Delivery System is enabling the Trust to further develop strong foundations that support the progression and implementation of inclusion and diversity principles into mainstream processes. This report demonstrates the commitment within the Trust to progress work around equality.

WWL has met its statutory obligations to monitor and report on workforce and patient equality and diversity issues and provides assurance that action is being taken to address issues of note.

Under current practice, there continues to be gaps within the Trust's information gathering and analysis of patient data. Only equality information in relation to a patient's ethnicity, age, sex and religion is collected routinely. At present, the Trust does not have the technology in place to capture data on disability, sexual orientation, gender re-assignment

and marriage and civil partnership. The implementation of more robust equality monitoring and data analysis within service delivery continues to be addressed and is being actioned as a key priority within the Trust's Equality Delivery System Action Plan.

For the purposes of this report, we have reviewed the patient data which is available to us in terms of age, sex, ethnicity and religion and belief, along with local data and reports. Where we do not have sufficient data we have used regional or national data as an estimate. The overall picture of access, using the best available data, reflects broad similarity to local demographics.

In terms of workforce data, we have reviewed the data which is available to us with regards to age, disability, ethnicity, sex, marital status, maternity, religion & belief and sexual orientation. Other than in respect of Recruitment and Selection statistics, the Trust does not hold workforce data on gender reassignment.

The Trust recognises the importance of equality and human rights and the value that it adds. We will continue to build on the progress we have made to date.

The Year Ahead

Five years ago, we set a number of equality objectives and each year we report on our progress. This year marks the last year of that strategy and hence in this report we not only consider our performance against the equality objectives but also consider what would be the appropriate objectives for the next five years.

Implementing and Monitoring EDS2

In 2020/21 the Trust will continue to embed and integrate the Equality Delivery System 2 in terms of both service provision for patients and employment practice. In line with the requirements of EDS2, the Trust will aim to continuously improve services for all service users and especially those that are categorised as having protected characteristics and underrepresented groups. This will be done in partnership with staff, service users and local interest groups.

As a Trust, we already have a culture that recognises the equality challenges we face. We capture this within our EDS Action Plan 2019/20.

Maintaining Compliance with the Public Sector Equality Duty

The Trust has and will continue to monitor compliance with the equality agenda and ensure that staff and service users are consulted with and updated on any changes and progress. This will include ensuring that there is equality for all and eliminating discrimination.

WRES and WDES

The Equality Delivery System (EDS2), Workforce Race Equality Standard (WRES) and the Workforce Disability Standard (WDES) are published on our Trust Website and help us to focus, highlight concerns and keep on track with making improvements in what we do and how we do it – for the benefit of all our service users, carers and staff.

Engagement

We recognise the need to continue to work in partnership with staff and patients. For staff, this means continuing to raise awareness of initiatives and engaging with protected groups to ensure that all staff feel valued, respected and able to progress through the organisation. It also means the opportunity to share and build on areas of good practice whilst addressing areas for development. For patients and carers, this means being able to access our services, receive care and support and be treated as individuals with dignity.

Improving Representation and Access

We recognise that people in our community have different needs and qualities. Understanding the diversity and needs of our local population can help us to plan and deliver services better. To achieve this we need to engage with our communities to better understand their needs based on their protected characteristics.

Over the last 10 years there has been a steady increase in the percentage of black and minority ethnic patients attending A&E. By working with Wigan Clinical Commissioning Group we need to ensure asylum seekers and refugees and the migrant population are aware of the role of the GP, NHS 111, A&E and alternatives like the Walk-in-Centre, and pharmacies.

During 2019/20, the Trust continued to undertake equality analysis on all policies and practices (to ensure that any new or existing policies and practices do not disadvantage any group or individual). Equality impact assessments are embedded as part of Trust Policy Protocol. We need to review our approach to service redesign, ensuring that inclusion and diversity are central to community engagement, consultation and decision making to ensure the patient voice is heard.

From April 2019, Wigan Community Services from Bridgewater Community Health NHS Foundation Trust transferred to the Trust, to enable hospital services to become fully integrated with and supportive of community services. We need to ensure that there are no barriers (as far as is reasonable), to accessing our services for people with different protected characteristics. We know that access requirements within some community service venues are inadequate. We will therefore undertake the relevant assessments and ensure access and adaptations are routinely considered and services fully accessible to all.

Improving Experience

We know that the borough has a higher proportion of people from Black and Minority Ethnic groups than the 2001 Census indicates. Although Wigan is the least ethnically diverse borough in the county, migration has significantly changed the wealth of diversity in Wigan. Wigan Borough has received a sizeable number of refugees and migrants over the last decade and it is likely that the population will become more diverse over the coming years. Dealing with these population changes will pose some significant challenges in terms of delivering responsive and appropriate services across a range of diverse communities and groups of people. The need for good communication between staff and service users is essential for the delivery of high quality care. To achieve this, we will review the effectiveness of our interpretation and translation services to ensure that patients can be communicated with appropriately and effectively as timely as possible. We are committed to ensuring all service users have equal access to services, taking into account the barriers that may be created due to language or impairment.

The **Accessible Information Standard** stipulates that we have a duty to ensure that people with a disability, impairment or sensory loss are given information in a way that they can understand. Patients must be asked if they have any communication needs. These must be recorded, highlighted and acted upon. WWL is continuing to work towards meeting the core requirements of the Accessible Information Standard. Although an IT solution has now been identified for ensuring all letters which are routed via synertec are printed in the patient's preferred format, further resource is required to ensure full compliance. Next steps include amending A&E registration so patient needs can be collected and implementing a data extract from PAS to HIS System, so patient needs become visible on the electronic patient record.

Promotional Events

To continue to help publicise and promote events that highlight best practice in equality and diversity within the organisation. This will focus on national campaigns that are linked to the protected characteristics as well as all the various initiatives that are being undertaken at a local level.

Employment Practice

We aim to further develop the support available to managers with regard to inclusion and diversity issues and look to develop more local resources, awareness sessions and master classes.

We also aim to further reduce inequalities experienced by staff and applicants from a BME background by means of our BME Listening Events and Forum and development of a BAME Staff Network.

Appendix 1 - Key Developments 2019/20

Governance			
What have we done	Why we did it	What was the outcome	Looking ahead
Equality Delivery System (EDS) 2019 Assessment undertaken and report produced.	<p>NHS Contract and Department of Health requirement.</p> <p>Assessment enables us to assess and score our performance in collaboration with staff and local stakeholders through engagement, equality monitoring and improved patient access and experience.</p>	<p>Evidence used to inform EDS Action Plan 2020/2021.</p> <p>Ensures there is a clear plan to work to.</p>	Data and evidence will be reviewed and updated annually and progress published on Trust Website.
Annual Workforce Race Equality Standard (WRES) assessment compiled and published.	In order to demonstrate through the 9 Point metric how we are addressing race equality issues in a range of staffing areas.	WWL is performing better than many other Trusts in relation to the specific indicator relating to BME representation at Board level which is a problem area nationally.	Work with the requirements of WRES & WDES.
Reviewed requirements of forthcoming Workforce Disability Equality Standard (WDES)	Compliance with WDES requirements. To be mandated via the NHS Standard Contract in England from April 2018. First submission completed on 1 st August 2019.	WDES submission completed.	
Implemented Schedule of Events for 2019/2020 to promote / hold supporting events.	Increased staff and patient engagement.	<p>WWL seen as fully inclusive employer and service provider.</p> <p>Annual Schedule of Events Summary Report.</p>	Continue to be monitored by I&D Operational Group/I&D Champions. Schedule of Events for 2020/21 to be implemented,

Goal 1: Better Health Outcomes for All			
What have we done	Why we did it	What was the outcome	Looking ahead
<p>Rainbow Badge Initiative launched at Trust Board Meeting in July 2019. Presentation delivered to Trust Board. Trust Board Members showed their support by signing up to the initiative.</p> <p>Wigan PRIDE 2019 officially launched in conjunction with Rainbow Badge Initiative.</p>	<p>By wearing the badge, staff sent out a powerful message of support and inclusion to the LGBT+ community. The badge is a visual symbol, identifying staff as someone an LGBT+ person can feel comfortable talking to about issues relating to sexual orientation or gender identity.</p>	<p>WWL became one of the first Trusts in the North West to sign up to the NHS Rainbow Badge initiative.</p> <p>WWL seen as fully inclusive employer and service provider.</p> <p>Staff voluntarily signed up to initiative and wear badge.</p>	<p>To continue to work together with the LGBT community to engage and improve our knowledge and understanding of LGBT service users.</p> <p>To continue as a key stakeholder in the planning and involvement of Wigan Pride 2020</p>
<p>Wigan Pride returned for a fourth year in Wigan Town Centre on 10th August 2019, celebrating community and growth. WWL were delighted to be part of this event, working in partnership with BYOU, Wigan CCG, Wigan Council and other local providers.</p> <p>WWL were actively involved in Wigan PRIDE on 10th August 2019. Hosted information stand / Participated in PRIDE Parade / Undertook Engagement Survey.</p>	<p>To work collaboratively with local providers, promoting equality, diversity and human rights throughout the Trust and wider community to show how proud we are to be an inclusive employer and an organisation that's treats all our patients as individuals.</p> <p>We want to work together with the local LGBT Community to improve and expand the quality of the information, knowledge and understanding we have about our LGBT service users.</p>	<p>WWL seen as fully inclusive employer and service provider.</p> <p>Increased staff and patient engagement and participation.</p> <p>Patient Engagement Survey conducted. 34 completed surveys received. Engagement Report produced. Positive feedback obtained, Services were easily accessible; overall good care was received; they were treated with dignity and respect.</p>	
<p>In support of LGBT History Month in February 2020, WWL raised the Rainbow Flag on the RAEI and WNT Sites.</p>	<p>To show our support for LGBT History Month.</p>	<p>WWL seen as fully inclusive employer and service provider. Increased staff and patient engagement and participation.</p>	

Goal 2: Improved Patient Access & Experience

What have we done	Why we did it	What was the outcome	Looking ahead
Attended Leigh Deaf Club on 24 th September 2019 and engaged with the local hearing impaired community.	To ascertain views and experiences of local deaf community. Historically people with disabilities report poorer access to healthcare.	<p>Engagement summary paper produced.</p> <p>Pagers for hearing impaired implemented in A&E.</p> <p>A&E Booking In Form for hearing impaired patients implemented. On arrival at A&E Reception, hearing impaired patients may have difficulty answering the receptionist's 'booking in' questions. An 'A&E Form' has been designed in collaboration with the local deaf community. Copies have been distributed and the local deaf community encouraged to complete, retain, then bring with them, when they attend A&E</p> <p>Access to BSL Interpreters now included in Patient Relations practice.</p> <p>New provider for Face to Face Interpreters & written translations sourced and implemented Jan 20</p>	To continue to engage with service users. To ensure services are accessible to all.
A complaint received by a hearing impaired patient in 2018 identified that although departmental literature states that complaints can be taken face to face, there was no provision for patients who use British Sign Language (BSL) to communicate this way. British Sign Language Interpreters were not provided for face to face meetings. Current practice was therefore reviewed and the service provided revised. BSL users are now provided with access to a British Sign Language Interpreter for pre-arranged face to face meetings.	To further improve access to services.	<p>Patient Relations Protocol reviewed to ensure access to British Sign Language Interpreters if required.</p> <p>Acknowledged that BSL is a totally different language than English, with its own grammar and sentence construction. BSL users have difficulty reading and understanding written English. The Trust's current protocol is to provide the patient with a full written response once an investigation into a complaint has been undertaken. Current practice has now been reviewed and if required, a British Sign Language Interpreter is now provided to interpret the formal written response.</p>	To continue to engage with patients living with disabilities, to ensure that services are fully accessible.

What have we done	Why we did it	What was the outcome	Looking ahead
<p>During November/December 2019, 8 members of staff signed up to learn Beginners British Sign Language to help provide a better experience for deaf patients.</p> <p>The bespoke sign language course was delivered one evening a week over a 7 week period to give staff a basic ability to communicate with deaf people using BSL.</p>	<p>The course provided staff with an introduction to British Sign Language which provides basic skills such as learning the alphabet, how to greet deaf patients, and learning how to give directions.</p>	<p>Enables staff to have a basic general conversation with the patient, encourage social interaction and interpretation of basic requests.</p> <p>Improved patient experience – reduce patient's anxiety / feelings of isolation.</p>	<p>Dual Sensory Awareness Training to be relaunched.</p>
<p>On 10th March 2020, 9 members of staff undertook a one day training course to enable them to produce good quality easy read materials using words, images and formats effectively. Staff really enjoyed attending the course and really embraced the learning.</p>	<p>To train staff to produce good quality easy read materials using words, images and formats effectively.</p>	<p>Staff now trained to produce easy read patient information.</p>	<p>To expand the Trust's portfolio of easy read patient information.</p>
<p>BME Cancer Patient Experience Survey 2019 undertaken.</p>	<p>National cancer patient experience surveys report that BME cancer patient have poorer experiences of cancer services than their white counterparts. We engaged with the local BME community to ascertain their experience of WWL Cancer Services.</p>	<p>Questionnaire designed and forwarded to the 20 BME patients identified. 35% response rate. Report produced. Overall positive feedback obtained. Recommendations proposed.</p>	<p>To continue to engage with service users. To ensure services are accessible to all.</p>
<p>Interpreter Services protocol reviewed to incorporate Community services.</p>	<p>Bridgewater Community Services merged with WWL from April 2019. There was a need to raise staff awareness within the community of the Trust's protocol for accessing interpreter and translation services.</p>	<p>Community Services now incorporated within Interpreter and translation practice.</p>	<p>To continue to review interpreter service practice and how this can be further improved upon (i.e. video remote interpreting).</p>
<p>Reviewed feasibility of implementing video remote interpreting in A&E.</p>	<p>To ensure access to BSL Signers in emergencies / unplanned hospital attendances.</p>	<p>Providers reviewed. Project Mandate and Privacy Impact Assessment completed. Business Case produced.</p> <p>Access to video remote BSL Interpreters in A&E Implemented during COVID-19. Dedicated IPAD sourced.</p>	<p>Video remote interpreting for BSL to be implemented in maternity and community services.</p>

<p>IT Solution identified for one aspect of Accessible Information Standard (AIS) - Ensuring all letters which are routed via Syntertec are printed in patient's preferred format. Funding secured from Patient & Public Engagement. IT Solution being progressed.</p> <p>See Appendix 1 for update with regard to compliance with national standards.</p>	<p>To further improve patient experience.</p> <p>Compliance with Accessible Information Standard.</p>	<p>Patient letters which are routed via Syntertec will be printed in the patient's preferred format.</p> <p>Further resource will be required to ensure full compliance with AIS.</p>	<p>On-going implementation / continuing to work in collaboration with CCG. Increased staff and patient awareness. Provides evidence that WWL is working towards</p> <ul style="list-style-type: none"> • A&E registration to be amended to provide ability to collect patient's needs. • Data needs to be extracted from PAS to HIS to ensure visible in HIS Patient Header (majority of staff have access to HIS. Alert on HIS would ensure that patient needs are acted upon).
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Goal 3: Empowered, Engaged and Included Staff

What have we done	Why we did it	What was the outcome	Looking ahead
ILM Level 3 & 5 I & D Training Course	To provide staff with knowledge and awareness around Trust's, Manager's and employees responsibilities in relation to I & D	Awareness raised	Planned course dates through 2020/21.
Worked in partnership with Wigan Borough Clinical Commissioning Group on the 4th Wigan PRIDE.	To demonstrate the Trust's support of LGBT as an inclusive employer and in terms of service delivery to the patients within the community.	Awareness was raised via all internal communication methodologies as well as social media such as Facebook and Twitter.	Work in collaboration with partners within the local area on plans for the Wigan Pride 2021. Identify and participate in other collaborative initiatives.
Programme of staff awareness / engagement activities was planned for 2019-20 as part of the WWL Way.	To schedule further engagement activities for staff to support Trust values and behaviours and the WWL way.	Awareness was raised via all internal communication methodologies.	Build further events into the forthcoming year's schedule.
Launched the LGBT Rainbow Badge Initiative	To demonstrate the Trust's support of LGBT as both an inclusive employer and in terms of service delivery to patients within the community.	Awareness raised both by internal communications and press releases	LGBT Pride in Practice Training Day

Goal 4: Inclusive Leadership at all levels			
What have we done	Why we did it	What was the outcome	Looking ahead
Planned regular focus groups and listening events. Visible and effective support of Chief Executive, Workforce Director and other Board members at Inclusion and Diversity events as part of the annual schedule.	To enable senior leaders to demonstrate commitment to equality, deal with feedback and embed values into core business activities.	Targeted participation in Inclusion and Diversity values at leadership level.	Annual programme of events to continue to take place.
I&D Steering Group continued to be chaired at Executive level. Members of the group continue to be senior leaders from within the Trust's management team.	To allow agenda items to be given a high priority and items escalated from the underpinning Operations Group to receive appropriate support.	Items were progressed in a timely and appropriate manner furthering the I&D agenda effectively.	Ensure that this practice remains in place moving forward.
Demonstrated senior support as follows: <ul style="list-style-type: none"> • Senior attendance at the targeted Focus Groups referred to above. • Visible involvement in initiatives such as Wigan PRIDE 2018. 	To demonstrate senior level commitment to equality and embed values into core business activities.	Evidence was fed into the EDS assessment and fed back to Trust staff.	Continue to evidence senior level support within all I&D initiatives on an ongoing basis.
A number of further staff stories were obtained during 2019-20.	To demonstrate the level of support staff feel is in place and evidence this to the Trust as a whole as well as to key stake holders.	Stories indicate that staff appreciate the support received from the Trust in relation to I&D matters and are happy to share experiences.	Obtain and publish further Staff Stories and share these at Workforce Committee meetings whenever possible.

Appendix 2 - Summary of Key Diversity Events celebrated 2019/20

AccessAble – July 2019

Funding was secured for a further 3 year agreement with AccessAble from July 2019. AccessAble previously known as DisabledGo provides an on-line accessibility checker for patients for all hospital sites and departments. Promotion has been raised throughout the year, including key diversity events such as **Disability Awareness Day in July 2019**, engagement with **Wigan Access Committee**



Rainbow Badge Initiative – July 2019



WWL became one of the first Trusts in the North West to sign up to the NHS Rainbow Badge initiative. By wearing the badge, staff sent out a powerful message of support and inclusion to the LGBT+ community. The badge is a visual symbol, identifying staff as someone an LGBT+ person can feel comfortable talking to about issues relating to sexual orientation or gender identity.



The badge initiative was launched at the Trust's Board Meeting in July 2019, at which Trust Board Members

showed their support by signing up to the initiative.

606 members of staff have signed up to the Rainbow Badge Initiative.

Wigan Pride – August 2019

Wigan Pride returned for a fourth year in Wigan Town Centre on 10th August 2019, celebrating 50 years since the Stonewall Riots. WWL were delighted to be part of this event, working in partnership with BYOU, Wigan CCG, Wigan Council and other local providers. WWL actively got involved on the day, by hosting an information stall and actively engaging with the local community about hospital services. Many staff also joined in with the festivities of Wigan Pride, promoting and celebrating equality and diversity by bringing together arts, music and positive messages.

The Trust waved rainbow flags with pride at Wrightington Hospital and Royal Albert Edward Infirmary (RAEI) in Wigan – as well as a Pride Tree, taking pride of place outside RAEI's main entrance.



Patient Engagement - Leigh Deaf Club – September 2019



Historically people with disabilities report poorer access to healthcare. On 24th September 2020, The Trust's Head of Engagement and Inclusion and Diversity Service Lead attended Leigh Deaf Club to engage with the local hearing impaired community, to ascertain their views about hospital services and to provide an update on what initiatives have recently been implemented within the Trust. Recent improvements include, long range pagers in A&E, deaf awareness training for staff,

and access to video remote British Sign Language Interpreters in A&E. Feedback highlighted that on arrival at A&E Reception, hearing impaired patients have difficulty answering the receptionist's 'booking in' questions. An '**A&E Booking In Form**' has therefore been designed in collaboration with the local deaf community. Copies have been distributed and the local deaf community encouraged to complete, retain, and bring with them when they attend A&E

Black History Month – October 2019

October marks Black History Month, the annual commemoration of the history, achievements and contributions of black people in the UK. For the whole month until October 31, events celebrating African and Caribbean cultures and histories take place up and down the country. The Trust continued to promote via internal staff communications.



Beginners British Sign Language Course for Staff – Nov/Dec 2019

During November/December 2019, 8 members of staff signed up to learn Beginners British Sign Language to help provide a better experience for deaf patients.

The bespoke sign language course was delivered one evening a week over a 7 week period to give staff a basic ability to communicate with deaf people using BSL. The course provided staff with an introduction to British Sign Language which provides basic skills such as learning the alphabet, how to greet deaf patients, and learning how to give directions.



World Religion Day – 19th January 2020



The aim of World Religion Day, held on the third Sunday in January every year, is to promote inter-faith understanding and harmony. Through a variety of events held around the globe, followers of every religion are encouraged to acknowledge the similarities that different faiths have. Our Chaplaincy & Spiritual Care Team promoted this by hosting display stands across all hospital sites.

Easy Read Training – March 2020



On 10th March 2020, 9 members of staff undertook a one day training course to enable them to produce good quality easy read materials using words, images and formats effectively. Staff really enjoyed attending the course and really

embraced the learning. The Trust is going to use this learning to further expand the Trust's portfolio of easy read patient information.



WWL flies Rainbow Flag to commemorate LGBT History Month – February 2020



Lesbian, Gay, Bisexual and Transgender History Month is celebrated in February each year. It celebrates the lives and achievements of the LGBT community in the UK. LGBT History Month also aims to promote tolerance and raise awareness of the prejudices faced by lesbian, gay, bisexual and transgender people. Each year has a different theme. This year's theme, Catalyst, looks at the

Appendix 3 – Headline Data

Our People (Workforce)

Age



As at 31 March 2020 WWL Trust staff breakdown was:

61% Aged Under 50

37% Aged over 50

(There has been a significant increase in employees over age of 50, from 2019 which was 40% - Fairly Static Year on Year)

The proportion of staff aged 60+ years has stayed relatively static this year compared to 2019 (9.46%).
This Year **9%**.

Disability



As at 31 March 2020

2.5% of the Workforce have declared that they are living with a disability.

Although this is slightly more than the 2019 figure, there is still a large amount of undeclared data and this remains relatively static since 2019. The 2020 figure is **29.09%**, 2019 figure was 29.03%, 32.45% in 2018)

Within **Recruitment**, 4.13% of applicants declared that they were living with a disability. This figure increased to 5.20% of those who were shortlisted; reducing to those being appointment from shortlisting to 2.89%.

Marriage and Civil Partnership



As at 31 March 2020

57% of staff were **Married**

1% were in a **Civil Partnership**

30% single, 9% divorced / legally separated, 14% widowed, 3% unknown.

Figure has remained relatively static over a period of several years.

Pregnancy and Maternity



As at 31 March 2020, a snap shot from the Electronic Staff Record indicated that:

1.82% of female staff were on **Maternity Leave**

This is a slight increase from last year which was 1.69% from last year.

Religion and Belief

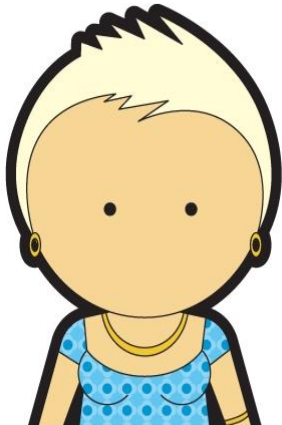


58% Christian **5.29%** Unknown

Remaining staff split across a range of religions and beliefs with the highest number being in Atheism category (4%).

A significant proportion of staff have not declared their religion and belief. (25%)
(The Wigan borough figure for Christianity is 77.8%)

Sexual Orientation and Gender Reassignment



Workforce as at 31 March 2020:

75% Heterosexual

1% Gay or Lesbian

24% did not wish to disclose.

Wigan population 8.5% Lesbian,
Gay or Bisexual.

0 Job Applicants were from individuals identifying as Transgender which is less than the 0.02% Wigan population profile.

Transgender information for current staff is not recorded on ESR so we cannot therefore undertake workforce profile monitoring at present.

Ethnicity



As at 31 March 2019:

90.9% of Staff of
British White Ethnicity
(Wigan Borough White
representation is 97%)

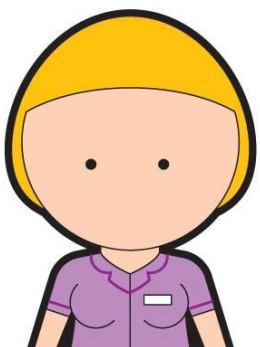
8% of Staff from
Black & Minority Ethnic
Groups

1.20% Not Stated

6.25% of the Trust
Board membership is BME.

Within **Recruitment**, White candidates shortlisted and appointed are still over representative in comparison with BME applicants, this is still a key area that requires monitoring.

Sex



Workforce as at
31 March 2020

82% Female

18% Male

(49.7 female / 50.9% male
within Wigan population)

Figure has
remained
relatively static
over a period of
several years.

35% of **Disciplinary** cases were
in respect of male staff members
which is not representative of the
18% male workforce profile. This
is a significant decrease from
previous years data at 47% of
disciplinary cases in respect of
male staff members.

Our Service Users (Patients)

Ethnicity (Out-Patients & In-Patients)



During 2019/20
92.1% of Patients
of British White
Ethnicity

4.4% of Patients
from
Black & Minority
Ethnic Groups (BME)

During last 12 months, 0.3% decrease in patients of British White Ethnicity. 0.4% increase in patients of BME Origin. 0.5 % decrease in those not stated.

Over last 10 years steady increase in BME activity
2010/11: 2.9% / 2019/20: 4.4%.

Ethnicity (Accident & Emergency)

During 2019/20
91.7% of Patients of
British White Ethnicity

6.3% of Patients from
Black & Minority Ethnic
Groups (BME)

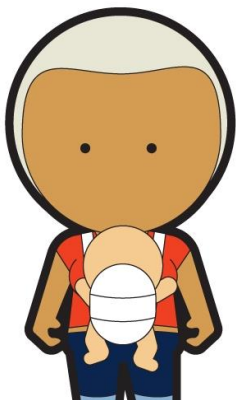
2.0% Not Known

During last 12 months, 0.4% decrease in patients of British White Ethnicity. 0.3% increase in patients of BME Origin.

Over last 10 years steady increase in BME activity in A&E. 2010/11: 3.5% / 2019/20: 6.3%

Ethnicity overall reflective of local population – Latest census (2011) reported that 95% of the local population were of British White Ethnicity. In 2001 it was estimated that 97.6% of Wigan's Population was "White: British". However, since 2001 the number of residents from Black, Asian and other Minority Ethnicities has more than doubled to 7,062 (2.2% of the population).

Ethnicity (Maternity Admissions)



During 2019/20
87.2% of Patients of
British White Ethnicity

12.5% of Patients from
Black & Minority Ethnic
Groups

0.3% Not Known

During last 12 months:0.2% decrease in patients of British White Ethnicity. 0.5% increase in patients of Black and Minority Ethnic Backgrounds. During last 5 years:2.8% decrease in patients of British White Ethnicity. 3% increase in patients of Black and Minority Ethnic Backgrounds

Higher % of Black and Minority Ethnic Groups using maternity services than overall out-patient / in-patient activity. No statistically significant difference noted – data historical. Data in line with significant growth in Wigan Borough migrant worker population and numbers of refugees / asylum seekers.

Interpreter & Translation Services



During 2019/20 Top Languages Requested

Romanian, Arabic, Kurdish Sorani, Farsi, Polish, Mandarin, Russian, Cantonese

Trends show the same top languages as 2018/19. An increase in the number of interpreter requests for Kurdish, Romanian, Polish, Arabic and Farsi interpreters during the last 12 months.

During 2019/20:

28 Translations into other languages

36 Other formats - 7 Braille / 20 Large Print / 9 Audio Translations requested

This will continue to increase with the implementation of the Accessible Information Standard,

Ethnic Population in Greater Manchester

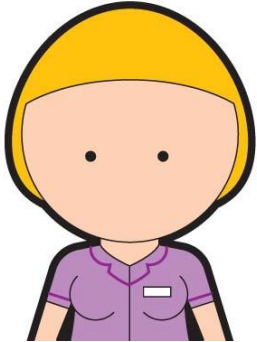
As of the 2011 Census, over 95% of the population was White British. This compares to just under 80% in England as a whole. However, Wigan Borough has received a sizeable number of refugees and migrants over the last decade and it is likely that the population will become more diverse over the coming years.

Migration has significantly changed the wealth of diversity in Wigan since the last census and there has been significant demographic change within Wigan Borough.

Ethnic minority populations living in Wigan are: Long-term resident ethnic minority population and asylum seekers And refugees, migrants, Gypsies and Travellers, European Roma and Overseas students. Although the numbers are small compared to the size of the total population and some only stay for a short period of time, some will have specific health needs that need to be addressed.

Local Authority	White British	Mixed	Asian or Asian British	Black or Black British	Chinese
Wigan	95%	0.8%	1.3%	0.7%	0.3%
Bolton	84%	1.4%	9.6%	1.2%	0.5%
Salford	86%	1.6%	3.3%	1.7%	0.6%

Sex (Out-Patients)



During 2019/20

57% Female

43% Male

Latest census reported that 50.3% of the local population is female

As with most healthcare services in the UK, women are more likely to use hospital services than men.

Age



During 2019/20
% of patients accessing hospitals services

9% Under 18 **11%** 18-30 Years

42% 31-64 Years **38%** 65+ Years

1 in 6 residents in Wigan are now aged over 65 years.

Set to increase by 30,000 over the next 20 years

Age overall reflective of local population – Latest census reported that the % of the population aged 65 and over in the Wigan Borough was the highest seen in any census. **There has been a steady increase in the number of people aged 65+ within Wigan Borough as a result of increasing life expectancy . The proportion of people aged 65+ in 2017 was 18.8%. This is projected to rise to 20.9% by 2025, to 23.0% by 2030, and to 26.2% by 2040.**

Maintaining the health and resilience of older people is important both for the individuals themselves and in ensuring the sustainability of local health and adult social care services.

The age of patients accessing hospital services is bias towards the older population, reflecting greater healthcare needs. Trends show a 3% increase in patients aged 65+ years over the last 2 years and 4% decrease in those aged 18-30 years. This needs to be monitored over longer period to establish if any statistical significant difference.

Religion and Belief



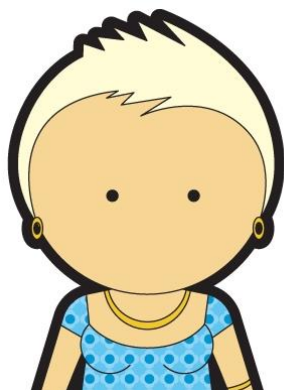
During 2019/20 % of patients accessing out-patient services

69% Christian	16% Unknown
14% None	0.2% Hindu
0.6% Muslim	0.2% Atheist
0.1% Buddhist	0.2% Islam
0.1% Jewish	0.1% Unitarian
0.1% Spiritualist	

Religion overall reflective of local population – Latest census reported that 78% of the population were of Christian Belief

Trust Data affected by the high proportion of religion not known (103,422 patients). 74,708 not known in 2018/19

Sexual Orientation and Transgender



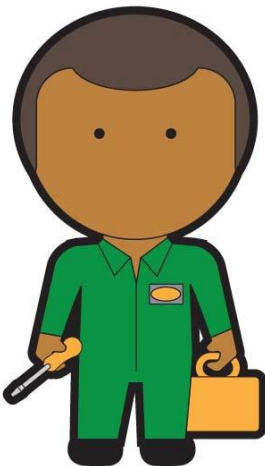
Based on recent research and LGBT inequalities data it is estimated that there are

15,000 Lesbian, Gay or Bisexual Wigan Residents
2,500 People who identify as trans in Wigan

Despite the relatively small numbers, the impact that gender re-assignment can have on people's outcomes is extreme.

In response to national research, NHS England is spearheading a collective drive to improve the experience of trans and non-binary people when accessing health and care services.

Disability



Latest Census reported

21.5% of Wigan Residents living with a limiting long-term illness, health problems or disability which limits daily activities at work.

Higher than national average 17.9%

The 5 most common conditions which account for 54% of DLA Claims

Arthritis; Learning Disabilities; Heart Disease; Disease of muscles, bones & joints; Hyperkinetic syndromes

Action on Hearing Loss estimate that

1 in 6 (16%) of the population are living with hearing loss.

53,000 of Wigan Residents.

Royal National Institute for Blind People estimates that

8,680 of Wigan Residents are living with sight loss (**990** are living with severe sight loss)

By 2020, figures are expected to rise to

10,500 of Wigan Residents living with sight loss (**1,250** living with severe sight loss)

1 in 4 people experience a mental health problem during their life. Having a long-term condition increases the risk that an individual will have a mental health.

The number of people who are at risk of having poor mental wellbeing in Wigan is high because of the high levels of deprivation.

Improving Health & Lives (IHAL) estimate that **1.9% (6,170 residents)** have learning disabilities.

The Accessible Information Standard

A law to ensure that people who have a disability, impairment or sensory loss are given information they can easily read or understand. Making information easier to understand for people living with communication and information needs.

WWL is committed to working towards meeting the core requirements of the Standard for everyone we serve.

Patients with disabilities often report barriers to using health services, in terms of transport difficulties, distance and needing someone to accompany them. Poor communication leads to non-attendance for appointments. These are issues currently being reviewed within Wigan Borough Locality Plan.

Marriage and Civil Partnership



Latest Census reported

47.4% Wigan Residents are **Married**

0.2% (482) Wigan Residents in a Registered **Same-Sex Civil Partnership**

Complaints



477 Complaints Received during 2019/20

293 Female **184** Male

448 British White Ethnicity

13 Black & Minority Ethnic Background

16 Not Stated

62% Aged 50 years or above

5 Main Subject Complaints

- Clinical treatment
- Communications
- Patient Care
- Admissions and Discharges
- Value and Behaviour

No trends in relation to protected characteristics noted

Health Inequalities – Wigan Local Authority Health Profile - 2019

Population

Wigan Borough has the second highest population of the ten Boroughs in Greater Manchester.

Its population is 324,650
(Mid-2017 ONS Population Estimates, revised in March 2018).

Deprivation

Of the 200 Lower Super Output Areas (LSOAs) in the Borough 57 are in the 20% most deprived LSOAs in England. 28.6% (91,773) of the Borough's population live in these areas.

Wigan is ranked 85th out of 326 Local Authorities for deprivation (1 is most deprived).

Health in summary

The good news is that the health of the people in the Borough is improving. Life expectancy is increasing and mortality from cardiovascular disease in people aged under 75 has halved over the last decade. However, despite this improvement there remains a gap between the Borough and England as a whole. In addition, there is wide inequality in health within the Borough. Much of this can be explained by historically high levels of smoking (around 30% in 2000, now 15.6%), poor diet and lack of exercise. The health effects due of the Borough's industrial past are still present but are receding

Life Expectancy

Life expectancy is 12.0 years lower for men and 9.8 years lower for women in the most deprived areas of Wigan than in the least deprived areas.

Appendix 4 - Compliance against National Standards - Dashboard

Equality National Standards	Requirements	Update	RAG Rating
Equality Act 2010: Public Sector Equality Duty - General Duty	<p>Must provide evidence that we have given 'due regard' to the three aims of the General Duty across all 9 protected characteristics:</p> <ul style="list-style-type: none"> • Eliminate unlawful discrimination, harassment & victimisation • Advance equality of opportunity • Foster good relations 	<p>Equality Impact Assessments provide evidence-based assurance of how the Trust is identifying and addressing any existing or potential inequalities across all 9 protected characteristics.</p> <p>I&D Strategy 2016-2020 reviewed. Consultation undertaken May/June 2016. Approved by I&D Steering Group Meeting on 27/09/16. Approved by Trust Board Dec 2016. Evidenced within Annual EDS Action Plan. Published on Trust Website.</p>	
Equality Act 2010: Public Sector Equality Duty - Specific Duties	<p>Must publish relevant, proportionate information demonstrating compliance with the Equality Duty by 31st January of each year.</p> <p>Must set four-year equality objectives, based on key local equality priorities.</p> <p>Must analyse the effect of policies and practices on equality.</p>	<p>I&D Annual Monitoring Report 2018/19 tabled for information at Workforce Committee and Trust Board in Dec 19/Jan 20. Published on Trust Website. Trust website updated regularly.</p> <p>Equality Objectives for 2016-2020 reviewed. Proposed Objectives approved by E&D Executive Leads. Consultation undertaken May/June 2016. Proposed Strategy & Objectives approved by I&D Steering Group on 27/09/16. Approved by Trust Board Dec 2016.</p> <p>Equality Impact Assessments provide evidence based assurance of how policies and practice impact on protected groups.</p>	
Equality Delivery System (EDS2) NHS Standard Contract Requirement Embedded within CCG Assurance Framework & CQC Inspection regime.	<p>Must comply with the Mandatory Equalities Reporting Framework for the NHS.</p> <p>Must undertake in partnership with local stakeholders, to review and improve performance for people from protected groups.</p>	<p>When assessing and grading performance against 18 EDS Outcomes, guidance now stipulates that NHS organisations can choose to look at just one or a few aspects of their work, rather than looking across the entirety of all they do. Given the number of services provided by the Trust and the 18 outcomes within EDS2, a phased implementation of EDS2 was agreed. 4 outcomes reviewed each year. One for each of the four goals.</p> <p>Equality Objectives Review & EDS Assessment 2019 published on Trust Website. Annual EDS 2019/20 Assessment currently being reviewed. Proposed evidence and scores for Goals 1 & 2 (Service Delivery) reviewed by Healthwatch & local stakeholders.</p>	
Work Force Race Equality Standard (WRES)	<p>Must demonstrate through the 9 Point Work Force Race Equality Standard (WRES) metric how we are addressing race equality issues in a range of staffing areas.</p> <p>Must demonstrate progress against a number of indicators of workforce equality, including a specific indicator to address the low levels of BME Board representation.</p>	<p>At present, WWL is performing better than a number of other Trusts in respect of the BME Board representation.</p> <p>The updated WRES return was submitted to the Department of Health at the end of August 2020, submitted to CCG and uploaded onto the Trust's internet web page. Indications are fewer BME staff reporting harassment, bullying and abuse when compared to their white colleagues. There appears to be deterioration in the percentage of BME staff who believe that WWL provides equal opportunities. 2020 WRES data appears to indicate a deterioration so this will need to form a key part of the 2020-2021.</p>	

Equality National Standards	Requirements	Update	RAG Rating
Disability Work Force Equality Standard (WDES)	<ul style="list-style-type: none"> • A set of specific measures to enable us to compare the experiences of disabled and non-disabled staff. • Research shows that a motivated, included and valued workforce helps to deliver high quality patient care, increased patient satisfaction and improved patient safety. • Will form part of NHS Standard Contract. • WDES will enable us to better understand the experiences of disabled staff. It will support positive change for existing employees, and enable a more inclusive environment for disabled people working in the NHS. • August 2019 publication date for Trusts. • April / May 2020 publication of first national annual WDES report. 	<p>Completed – to be submitted August 2020</p> <p>The data highlights that Disabled staff experienced higher levels of bullying , harassment and abuse from the Public/Service Users, Staff and Managers. There was an overall improvement in these figures from 2019 with the exception of disabled staff experiencing bullying, harassment and abuse from colleagues.</p> <p>Data shows that staff believing that the Trust provides equal opportunities for career progression or promotion was lower for disabled (83.7%) staff than non-disabled staff (85.8%), however this is an improving picture from 2019.</p> <p>Figures show that 56% of Disabled staff stated that their employer had made adequate adjustment(s) to enable them to carry out their work, however this is a deterioration in figures compared to last year's at 60.5%.</p> <p>The data shows that the likelihood of Disabled staff member entering a formal capability process is 9.2% times more likely than non- disabled staff (this does not include ill health capability)</p> <p>2020 WRES data appears to indicate a deterioration to previous year's reporting so this will need to form a key part of the 2020-2021 action plan.</p>	
Accessible Information Standard (SCC1605) (for people with a disability, impairment or sensory loss)	<p>The standard tells organisations how to make information accessible to patients, service users and their carers and parents. The standard directs and defines a specific, consistent approach to identifying, recording, flagging, sharing and meeting the information and communication needs of patients, service users, carers and parents, where those needs relate to a disability, impairment or sensory loss.</p> <p>Trust non- compliant from 31/07/16. Risk Assessment undertaken by IG. Registered on Corporate Risk Register April 2016 with Risk Rating of 15. Raised at relevant committees. IT Systems currently unable to facilitate requirements of standard (record / alert & share patient needs).</p>	<p>The standard requires appropriate capture / update / visibility of patient needs for all patients throughout the entire patient journey within all areas. Currently no consistent approach Trust wide. Patients could have their information and communication needs met for some services, but not for others – no consistency.</p> <p>Functionality identified on PAS to enable the recording of patient's needs (RPN). AIS Codes developed and added to RPN. Noted not all staff / departments have access to PAS.</p> <p>IT Solution identified for one aspect of AIS - Ensuring all letters which are routed via Synertec are printed in the patient's preferred format. WWL worked with Synertec to implement 'capture and share' system which facilitates the capture and acting upon information needs for all letters that are routed through synertec. Funding sourced via PPE for 15 days of IM&T development support £4,800. Action Plan being progressed. Appointment Centre staff ask patients if they have any communication needs and record accordingly.</p>	

		<p>On-line Appointment Booking webpage amended to include reference to communication / information needs. Further resource of £48,000 required to ensure full compliance with AIS: Resource estimate provided by Business Analysis:</p> <p>£12,000: Requirement for 'Patient Needs' data to be extracted from PAS to HIS. 'Patient Needs' Alert to be visible in HIS (Patient Header). Alert on HIS will alert staff to patient's needs and ensure that patient needs are acted upon. Majority of hospital staff have access to HIS.</p> <p>A&E registration to be amended to provide ability to collect patient's needs. Contracted resource to back fill Developer BAU work to allow time to be allocated to Reg tool amendment work & PAS look up set up.</p> <p>£36,000: Investigation required to scope the capability of other standalone systems, including Community Services (SystmOne). Funding needed to contract a Business Analyst (£1,500 per week x 6 months). Not all patient letters are routed via synertec for printing. The Trust has a number of standalone systems which need to be identified and reviewed to ensure compliance with the standard.</p> <p>Raised with I&D steering Group and Rob Forster in Nov 19. Agreed the focus at present should be on progressing the £12,000 actions identified. Agreed Charitable Funds should be explored. Charitable Funds Application submitted Sept 19. Declined. AB agreed should be IT prioritisation. SW confirmed cannot be reviewed until April 2020 – IM&T HIS Development New request Form required for consideration along with other priorities. Form completed and submitted Nov 19.</p> <p>QSSG Update requested August 2020. DJ chased SW for update. Delayed due to COVID-19. Put on agenda for HIS Advisory Board Meeting on 20th Aug 20. Not discussed due to technical issues. Discussed at September HIS Board Meeting. Updated Risk Assessment requested.</p>	
Gender Pay Gap Reporting	<p>In line with the Gender Pay Gap regulations, the Trust published its gender pay gap data by the 31st March 2018. The information is published on the Government website and on the Trust's own website so that it is openly available for review. All organisations with 250+ employees are required to publish their data and there has been national press interest in the gender pay gap issue as the deadline approaches.</p>	<p>The Trust data has highlighted there is a gender pay gap within the Trust with women across the average, median and bonus gap being paid less than males. The Trust has analysed its data and produced a supporting report which outlines the factors which contribute to the gender pay gap and this was discussed at Workforce Committee in March 2020. Actions to be included in 2020-2021 Action Plan</p>	

<p>Sexual Orientation Monitoring Standard</p> <p>Published 5th October 2017.</p>	<p>The Sexual Orientation Monitoring Information Standard provides the mechanism for recording the sexual orientation of all patients/ service users aged 16 years and over across all health services and Local Authorities with responsibilities for Adult social care in England in all service areas where it may be relevant to collect this data.</p> <p>The standard acts as an enabler for the Equality Act 2010, supporting good practice and reducing the mitigation risk for organisations required to comply with the Act. All public sector bodies have a legal obligation to pay due regard to the needs of (LGB) people in the design and delivery of services, and to ensure that people are not discriminated against based upon their sexual orientation. Health and Care Organisations must review the impact of this information standard and make appropriate changes to local health IT Systems from 5/10/17 and before 31/03/19.</p>	<p>This standard provides the categories for recording sexual orientation but does not mandate a collection. All new data sets with a business requirement to collect sexual orientation data will be expected to adopt this sexual orientation monitoring (SOM) fundamental standard, and existing data sets already reporting SEXUAL ORIENTATION CODE will be required to change to the new values at their next iteration. This Change Request adds the supporting definitions and values for Person Stated Sexual Orientation to the NHS Data Model and Dictionary to support the Sexual Orientation Monitoring Information Standard.</p> <p>PAS Update (Patient Centre) includes a field in which sexual orientation can be recorded. As data not already recorded routinely within the Trust, guidance stipulates not a mandatory requirement. Standard requirements to be embedded within any changes to future operational protocol.</p>	
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**A detailed account of all Trust Equality Monitoring Data for 2019/20
can be accessed via our Trust Website**

https://www.wvl.nhs.uk/Equality/equality_information.aspx