

Equality, Diversity and Inclusion Annual Monitoring Report – April 2020 to March 2021

This report provides an update on the achievements, progress and developments in relation to the Equality, Diversity and Inclusion (EDI) agenda at WWL.

2020/2021 has been a very challenging year for the Trust. A year which has been dominated by the impact of and response to the Covid-19 global pandemic.

Covid-19 has seen our Trust and staff respond at speed, in order to care for Covid positive patients whilst continuing to provide as many routine services as possible. Many services had to be reconfigured to respond to the significant increase in demand. As a result, our clinical workforce had to adapt to fit to this response and these rapid changes led to significant alterations to the roles of many of our clinical staff.

The period of time covered by this report has been extremely challenging for staff, their families and for our patients. When our last annual report was published we were at the start of the pandemic and 12 months on the importance of equality, diversity and inclusion for our staff and patients has never been more apparent.

The pandemic has intensified the impact of the health inequalities experienced by ethnic minority communities and patients and the devastating impact that Covid-19 has had as a result. We have also seen the impact on older members of our community and those with disabilities and this has been replicated within our workforce. Keeping our staff and patients from diverse backgrounds safe during this difficult period has been our key priority and listening to the experiences and concerns of our staff and patients has never been more important.

We have remained committed to providing an environment where all staff, service users and carers have equality of opportunity. We oppose all forms of unlawful or unfair discrimination. Despite the challenges, we have ensured that equality, diversity and inclusion have continued to be supported at all levels within the Trust.

This report focuses on how we worked to meet our equality and human rights duties for staff and for patients during this period of unprecedented challenge for the NHS and for our Trust.

A number of key outcomes have been achieved over the last 12 months.

Staff Engagement

- Shielding Staff Forum – Sept 20
- COVID19 Risk Assessments for Staff
- FAME (Focus on all Minority Ethnic Groups) Network
- Self-Care Resources
- Delivering NHS COVID Vaccination Programme.

Calendar of Events

Awareness of protected characteristics throughout the year:

- Interfaith Week – Nov 2020
- Transgender Day of Remembrance Nov 20
- Disability History Month – Dec 2020
- Wigan PRIDE Virtual Event – Jun 20
- LGBT History Month - Feb 21

Governance

Equality Objectives & EDS2 Action Plan 2020/21

Annual WRES Assessment Published.

Annual WDES Assessment Published

Gender Pay Gap Report Published

Interpreter & Translation Services Policy & SOP updated

Training

- LGBT Pride in Practice Training – Oct 20
- BME Leadership Module

Partnership Working

Wigan Borough E&D Collaborative Group

E&D North West Forum

GM EDI Network Forum

Patient Engagement

- COVID Patient Experience Survey 2020
- COVID Patient Experience Survey 2021
- New Trust Website Focus Group (Accessibility feedback)
- BME Cancer Patient Experience Survey 2021

Improved Access

- Video remote interpreting in A&E and Maternity Services
- New Accessible Trust Website
- Video and Telephone Appointments for Patients (new remote services)
- Patients who do not speak English can still be contacted by telephone for telephone consultations / appointments (using telephone interpreters).
- Relative Video Calls to patients

Summary of Headline Data:

SERVICE USERS

- Although overall in-patient and out-patient activity dropped sharply during 2020/21 as a result of the Covid-19 Pandemic, the overall picture of patient access continues to reflect broad similarity to local demographics.
- Over last 12 months, 1.1% decrease in total in-patients/out-patients of British White Ethnicity. 0.1% decrease in patients of Black and Minority Ethnic Backgrounds. 91% British White / 4.3% BME. No statistical significance reported. 1.2% increase in those not stated (4.7%).
- Over last 11 years, steady increase in % of patients of black and minority ethnicity attending A&E. **2010/11: BME 2.5% / 2019/20: BME 6.2%.**
- Higher % of Black and Minority Ethnic Groups using maternity services in comparison with overall out-patient / in-patient activity. Data historical – British White 87% / BME 12%. 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 Wigan 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: Polish, Romanian, Arabic, Kurdish

Sorani, Farsi, Russian, Urdu, Spanish. Trends show the same top languages as 2019/20 with Urdu and Spanish added to the list. As predicted, due to the Covid Pandemic, the number of face to face interpreters decreased and the number of telephone interpreters increased during 2020/21.

- As with most healthcare services in the UK, women are more likely to use hospital services than men – 58% 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

- 88.5% of the workforce is of White Ethnicity. This figure remains slightly lower than the Wigan borough figure of 97.3%. 10.1% of the workforce profile is from Black and Minority Ethnic Groups, with 11.8% of Trust Board being BAME, this is over representative of the Wigan population.
- The split between staff aged under 50 and over 50 has remained fairly static.
- 2.6% of the workforce declared they have a disability, this is under representative of the Wigan population (21.5%). Trust representation is static compared to the previous year, although undeclared rates have decreased slightly from 29% to 26.6%.
- The workforce profile remains predominantly female at 81% whereas the local population is 50.3% female. However, this is in keeping with the gender profile of the healthcare profession in general and the NHS in particular.
- Almost 57% of staff who have disclosed their religion and belief and describe themselves as Christian compared to a Wigan borough figure of 77.8%. 23.4% of Trust staff have not disclosed their religion and belief, a slight decrease compared to the previous year at 25%.
- Similar to last year, 75% of staff describe themselves as heterosexual. However, 21% of staff have not disclosed their sexual orientation, this is slightly less than last year's rate of 24%.

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 and transgender, we have used regional or national data as an estimate. **See Appendix 3 for Full Details.**

2020/2021 has been a very challenging year for the Trust. In a year like no other, we have remained committed to providing an environment where all staff, service users and carers have equality of opportunity.

The table at **Appendix 1** summarises:

- What we did during -2020/21
- 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 2020/21.

Conclusion

2020-2021 has been an extremely challenging year for WWL and the wider NHS. We have all had to actively respond to the challenges of the Covid-19 pandemic. However, through this, WWL has

continued to make good progress on our equality, diversity and inclusion work and remain focussed on our equality duties

The evidence set out in this report demonstrates that WWL continues to make good progress towards our EDI responsibilities.

Of all the many achievements in 2020-2021, the primary highlights of the year have been:

- Significant equality, diversity and inclusion focused response to the Covid-19 pandemic for patients, service users, our communities and our staff.
- Building on what we have learned during the pandemic to transform the delivery of services, including new remote services.
- Delivering the NHS COVID vaccination programme and continuing to meet the needs of patients with Covid-19.
- High levels of vaccination uptake from Black Asian and Minority Ethnic staff and other staff groups at higher risk from Covid-19 .
- The formal establishment of our new FAME Network, as well as several listening events for staff, including a virtual forum for staff who were shielding.
- Continuing to raise awareness of protected characteristics throughout the year with our calendar of events. Wigan Pride returned for a fifth year in June 2020. A virtual event was streamed on-line. *Wigan Pride gives a fantastic message; “we’re a borough that values equal rights and fairness and we want every resident to feel that they can be who they want to be”.*
- Several Patient Experience Surveys carried out including two Covid-19 Patient experience surveys.
- Engaged with patients and stakeholders on the development of the new Trust website. Patients living with disabilities, invited to have an input with regard to accessibility and design.
- LGBT Pride in Practice Training delivered to staff during October 2020.

At the start of the Covid-19 pandemic, the Equality and Human Rights Commission, confirmed that the specific reporting duties of the Public Sector Equality Duty would be suspended for the financial year 2020-2021. Although the Trust did not produce an EDS Assessment Scores and Equality Objective Annual Review Report for 2020/21, work around the requirements of the Equality Delivery System continues to enable the Trust to further develop strong foundations that support the progression and implementation of equality, diversity and inclusion 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, continues to reflect 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.

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.

The Year Ahead – EDI Strategy

Equality, diversity and inclusion objectives must be set every 4 years and the Trust must regularly monitor and demonstrate progress against these objectives. Our current objectives and EDI Strategy expired at the end of 2020 and due to the Covid Pandemic are yet to be finalised. We felt it was important that we took the time to reflect the learning from the pandemic in our objectives, as national media coverage has demonstrated that Covid-19 has disproportionately affected some protected groups and exacerbated health inequalities.

A paper was submitted to Trust Board and it was agreed that a new strategy would be developed for submission to Trust Board for approval later in 2021. This allows time for meaningful engagement and consultation with our WWL colleagues, patients and stakeholder groups across the Borough. Crucially, we also propose to take a more system focussed approach in this new strategy, recognising that there are many actions that can be taken by WWL in isolation, but if we are truly to address health inequalities and support social mobility across the local population, we must work collaboratively with partners through Healthy Wigan Partnership.

In light of this, members of the Executive Team are in the process of reviewing our strategic approach to EDI, how we monitor and provide assurance and how we can work not only within our organisation, but across the local system to develop objectives and an EDI strategy that effectively addresses these crucial issues.

Our strategy will focus on three key themes:

- To increase and value diversity, ensuring that we can effectively understand and meet the needs of our people and the local population
- To reduce and ultimately eliminate inequality
- To improve the experience of work and using our services for people from protected groups

Implementing and Monitoring EDS2

At the start of the Covid-19 pandemic, the Equality and Human Rights Commission, the regulatory body in England for equality, confirmed that due to the pandemic the specific reporting duties of the Public Sector Equality Duty would be suspended for the financial year 2020-2021. It is important to note, however, that the general duties of the Public Sector Equality Duty remained in place throughout the pandemic, as the importance of paying due regard to the general duties throughout the pandemic was recognised.

Although the Trust did not produce an EDS Assessment Scores and Equality Objective Annual Review Report for 2020/21, we believe it is important that the great work undertaken in that year is not overlooked. Hence the reason for this I&D Annual Report.

In 2021/22 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 2021/22

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

The pandemic has also impacted on our equality, diversity and inclusion work, making engagement and some of the other activities we would normally celebrate in our annual report much more difficult to deliver.

The last year has been like no other in NHS history and the impact of the Covid-19 pandemic has demonstrated the critical role our local communities have in responding to major health challenges and in helping to shape how services are delivered. The voices and views of local people help to influence the way services are designed and improve the range of local health and care services in Wigan.

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.

It is felt necessary that we work with our WWL staff and key local partners to fully understand the position in the Borough aligned to the Covid-19 Pandemic before publishing our new objectives. This way, we can ensure that we can take action both in the Trust and across the Healthier Wigan Partnership to respond to current situation and inequalities that have been exposed.

Census day was on 21st March 2021. Results will be available within 12 months. After a year of living with the coronavirus, there has never been a more important time to have a census. This data

will be essential to our long-term understanding of the health, social and economic impacts on the people and households of England and Wales. The census will highlight the needs of different groups and communities, and the inequalities people are experiencing.

During 2020/21, 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 equality, diversity and inclusion are central to community engagement, consultation and decision making to ensure the patient voice is heard.

The **Accessible Information Standard** came into force for all NHS organisations in July 2016. It 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 make progress in relation to meeting the core requirements of the Accessible Information Standard. Although an IT solution has been identified for ensuring all letters which are printed externally (via synertec) are printed in the patient's preferred format, further resource is still required to ensure full compliance. Currently there is no consistent approach Trust wide. Patients could have their information and communication needs met for some services, but not for others.

Further resource is required to ensure full compliance. Funding to be sourced for contracted Business Analyst to investigate the scope of the capability of all other standalone systems managed within the Trust.

As we enter 2021-2022, we look forward to continued integration of the AIS in the Trust's IT systems to support patients and service users in accessing care services appropriate to their communication requirements.

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.

We will continue to improve patient and staff experience by using methodologies such as Experience Based Design. The EBD approach is a method of designing better experiences for patients, carers and staff. The approach enables healthcare providers to understand the experience of healthcare from the patients, carers and staff perspective. It is through these stories that we can begin to understand not just the care journey, but the emotional journey people experience when they come into contact with a particular pathway or service. Once we can understand this, we can improve care in ways that matter most to people who use it and the people who deliver it.

Promotional Events

We will 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 equality, diversity and inclusion 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 protected groups by means of Listening Events and Forums, and development of Staff Networks.

Appendix 1 - Key Developments 2020/21

Governance			
What have we done	Why we did it	What was the outcome	Looking ahead
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.	WRES submission completed and published.	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 and published. The Trust has a low disability declaration rate.	We will work to improve disability declaration rates for the next submission.
Implemented Schedule of Events for 2020/2021 to promote / hold supporting events.	Increased staff and patient engagement.	WWL seen as fully inclusive employer and service provider. Annual Schedule of Events Summary Report.	Continue to be monitored by I&D Operational Group/I&D Champions. Schedule of Events for 2021/22 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>Wigan Pride returned for a fifth year on 26th June 2020. Due to Covid 19, the original planned celebration in August had to be postponed. A virtual event was streamed on-line in June 2020.</p> <p>WWL promoted this event to all staff, working in partnership with BYOU, Wigan CCG, Wigan Council and other local providers.</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>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>In support of LGBT History Month in February 2021, WWL raised the Rainbow Flag on the RAEI and WNT Sites and lit WWL's Tree of Hope with rainbow coloured lights.</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>	
<p>Trans Patient Guidance for Staff reviewed and updated.</p>	<p>To update current Guidance incorporating views of local LGBT community.</p>	<p>Updated guidance for staff on treating transgender patients.</p>	<p>No formal robust process in place for patients changing gender identity and updating patient records. Formal SOP to be reviewed and implemented.</p>

Goal 2: Improved Patient Access & Experience

What have we done	Why we did it	What was the outcome	Looking ahead
<p>Set up a focus group on-line to involve patients living with disabilities in the design and implementation of the new Trust Website. Accessibility functionality reviewed, stakeholders involved in the tender process and design.</p>	<p>To engage and involve the local community in the development of the new trust website.</p>	<p>Accessible Trust website launched January 2021.</p>	<p>To continue to engage with service users. To ensure services are accessible to all.</p>
<p>Interpreter and Translation Policy and SOP reviewed and updated.</p>	<p>To ensure current policies and procedures were accurate and up-to-date.</p>	<p>Updated guidance for staff on accessing interpreter and translation services.</p>	<p>To continue to review interpreter service practice and how this can be further improved upon (i.e. video remote interpreting).</p>
<p>During Covid, Video remote access to British Sign Language Interpreters in A&E and Maternity Services was implemented. A dedicated IPAD could be accessed from Reception Staff. The service was available 7 days a week, 24 hours a day.</p> <p>SignHealth (Deaf Health Charity) and InterpreterNow worked together to launch BSL Health Access. It delivers immediate, on demand access to British Sign Language (BSL) interpreters. Anyone who needs to communicate using British Sign Language (BSL), in a health situation, can use this service. Deaf and hearing people can both use the service free of charge.</p>	<p>At a time, when there was less access to face to face interpreting and staff wearing PPE makes communication and lip reading impossible, deaf people are being left frustrated and isolated. Deaf people often rely on asking family and friends to help them communicate, but they cannot do that with the current social distancing and stay at home policies.</p> <p>To ensure access to BSL Signers in emergencies / unplanned hospital attendances.</p>	<p>During Covid access to BSL video remote interpreting 24 hours a day, 7 days per week in A&E and Maternity Services.</p>	<p>To implement BSLvideo remote interpreting with current interpreter service provider.</p>

What have we done	Why we did it	What was the outcome	Looking ahead
<p>Increased progress in working towards meeting the requirements of the Accessible Information Standard (AIS)</p> <ul style="list-style-type: none"> • IT Solution identified for one aspect of AIS - Ensuring all letters which are printed externally (routed via Synertec) are printed in the patient's preferred format. • Appointment Centre staff ask patients if they have any communication needs and record accordingly. • On-line Appointment Booking webpage amended to include reference to communication / information needs. • Communication difficulties / impairments captured within nursing admission documentation. Recorded on HIS System under 'activities of daily living assessment'. Visible to clinical staff during in-patient stay. • The latest update for AIS is that a change was made to incorporate the capture of accessible information requirements in PAS for elective inpatients and out-patients.. 	<p>To further improve patient experience.</p> <p>Compliance with Accessible Information Standard.</p>	<p>Increased progress in working towards meeting the requirements of the Accessible Information Standard (AIS)</p> <p>No consistent approach Trust wide. Patients could have their information and communication needs met for some services, but not for others.</p>	<p>On-going implementation / continuing to work in collaboration with CCG. Increased staff and patient awareness.</p> <p>Further resource will be required to ensure full compliance with AIS. Risk Assessment updated.</p> <ul style="list-style-type: none"> • Funding to be sourced for contracted Business Analyst to investigate the scope of the capability of all other standalone systems managed within the Trust. • A&E registration to be amended to provide ability to collect patient's needs.

Goal 3: A Representative and Supported Workforce			
What have we done	Why we did it	What was the outcome	Looking ahead
Worked in partnership with BYOU, Wigan CCG, Wigan Council and other local providers to support The Wigan Pride event.	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 2022. Identify and participate in other collaborative initiatives.
Programme of staff awareness / engagement activities was planned for 2020-21 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.
Developed the FAME (Focus on All Minority Ethnic) Staff Network.	To actively promote and support equality of opportunity for all BAME staff within WWL.	Networking and supporting one another, influencing change and improvement, and education.	Ongoing quarterly events
LGBT Pride in Practice On-Line Training Session held on 22 nd October 2020	We know that many LGBT people worry about accessing services for fear of experiencing discrimination or even hostility on the grounds of their sexual orientation, gender identity or trans status.	Increased staff awareness about health inequalities and ensuring LGBT patients have access to inclusive healthcare that understands and meets the needs of our communities.	Build further events into the forthcoming year's schedule.
Held forums during January 2021 and workshops during September 2020 for Shielding staff.	To understand experiences and provide support for a return to the workplace.	Gained an understanding of the staff's experience of shielding to identify improvements.	Continue to support staff that were shielding during the pandemic e.g. by facilitating booster vaccinations and reviewing risk assessments.

Goal 4: Inclusive Leadership at all levels			
What have we done	Why we did it	What was the outcome	Looking ahead
Audit and review Board Committee Papers.	To ensure Board Papers have been adequately assessed in order to identify equality related impacts including risks.	Board papers coversheet updated to capture any equality related impacts / risks.	Ensure that this practice remains in place moving forward.
Ensured our FAME Staff Network has an executive sponsor.	To demonstrate commitment and engagement to inclusivity at senior level.	Broadened the influence of the Staff Network	Apply this principle to any other staff networks that are set up.
Visible and effective support of Chief Executive, Workforce Director and other Board members at Equality, Diversity and Inclusion 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 Equality, Diversity and Inclusion values at leadership level.	Annual programme of events to continue to take place.
Changes to the Annual Route Planner template including highlighting the responsibility for Leaders to ensure that they promote equality, diversity and inclusion, in their teams, treating staff equitably, and encouraging conversations about health and wellbeing.	The Annual Route Planner has been refreshed following feedback from the National Staff Survey.	Improved quality of appraisal conversations.	Explore differences in Annual Route Planner compliance among protected groups.

Appendix 2 - Summary of Key Diversity Events celebrated 2020/21



Wigan Pride – June 2020

The borough usually holds an annual event with a parade, performances across two main stages and market stalls dotted throughout the town. But as fears grew over the coronavirus and the lockdown escalated, organisers decided they would have to cancel their original plans. Instead, Pride was held virtually, with the public able to tune in through Wigan Pride's Facebook and YouTube channels on 26th June 2020.



WWL were delighted to be part of this event, working in partnership with BYOU, Wigan CCG, Wigan Council and other local providers. WWL 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. *Wigan Pride gives a fantastic message; "we're a borough that values equal rights and fairness and we want every resident to feel that they can be who they want to be".*

Listening Events – June 2020



In order to support staff, who as a result of Covid were advised to shield by the government, a Virtual Forum was held on the 19th June 2020 in order to hear first hand some of the challenges faced by this group of staff and to answer any questions or concerns shielding staff may have had. The event was hosted by Alison Balson, Director of Workforce and Helen Richardson, Chief Nurse and Director of Infection Prevention & Control. The event was a great success with further Listening Events planned for the future, including

Listening Event for BAME Staff Members on the 15th July 2020, hosted by Sanjay Arya, Medical Director.

LGBT Pride in Practice Training – October 2020

Lesbian, gay, bisexual and trans (LGBT) people have told LGBT Foundation that it is important for them to be able to be open and honest about their sexual orientation and gender identity with their health professionals. They want to have access to services that recognise, understand and act upon their individual needs in a holistic and person-centred way. **Pride in Practice** training is tailored to support the needs of staff and services.



An on-line Training Course was held on 22nd October 2020 for WWL Staff. Key training outcomes included:

- Increased awareness of LGBT terminology, experiences and barriers which may affect an equity of outcomes within healthcare services
- Development of knowledge around relevant legislative framework and application within the service setting
- Support around Gender Identity, Trans Status and Sexual Orientation Monitoring, myth busting, and confidence building with staff around terminology and appropriate language

Interfaith Week – 8th to 15th November 2020

Each year, Inter Faith Week begins on Remembrance Sunday, and runs until the following Sunday. It is hoped that the additional Sunday provides the opportunity for other weekend events to take place as well as those linked to Remembrance Sunday. Remembrance Sunday was chosen as a start day to encourage people to remember together the contributions of all faiths and none, and to consider how best to create a just, peaceful, and harmonious world.

During this week, our Chaplaincy and Spiritual Care Team hosted a display in the Chapel / Multi Faith Prayer Rooms at RAEI, Leigh and Wrightington.

Inter Faith
Week



Disability History Month (18th November to 20th December 2020)

Celebrated each year, UK Disability History Month (UKDHM) is an annual event that is designed to celebrate the lives and achievements of people living with a disability. In the UK it has been 25 years since the Disability Discrimination Act, later replaced by the Equality Act 2010. As such, the 2020 theme for UK Disability Month is '**Access: How far have we come? How far have we to go?**'. The month also focused on access. In the UK, there are more than 14 million disabled people including 8% of whom are children, 19% of working age, and 44% who are of pension age. Therefore it's important that disabled people are able to enjoy a fair and equal place in society.

During the COVID-19 pandemic, isolation, disconnect, disrupted routines both at home and in the workplace and diminished services have greatly impacted the lives and mental wellbeing of people with disabilities. At a time, when there is less access to face to face interpreting and staff wearing PPE makes communication and lip reading impossible, deaf people are being left frustrated and isolated. Deaf people often rely on asking family and friends to help them communicate, but they cannot do that with the current social distancing and stay at home policies.



During Covid, Video remote access to British Sign Language Interpreters in A&E and Maternity Services was implemented. A dedicated IPAD could be accessed from Reception Staff. The service was available 7 days a week, 24 hours a day.

SignHealth (Deaf Health Charity) and InterpreterNow worked together to launch **BSL Health Access**. It delivers immediate, on demand access to British Sign Language (BSL) interpreters. Anyone who needed to communicate using British Sign Language (BSL), in a health situation, can use this service. Deaf and hearing people could both use the service free of charge.

New Trust Website – Patient Focus Group

A focus group was held virtually in January 2021 to involve patients living with disabilities in the design and implementation of the new Trust Website. Accessibility functionality was reviewed and stakeholders involved in the tender process and design. WWL has a variety of accessible services within the Trust and are dedicated to developing and improving our facilities so that we are accessible to everyone in the community.



WWL flies Rainbow Flag to commemorate LGBT History Month – February 2021



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. . It takes place every February in the UK, and aims to promote and celebrate equality and diversity.

Each year has a different theme and the theme for 2021 was '**Body, Mind and Spirit**'.

Appendix 3 – Headline Data

Our People (Workforce)

Age



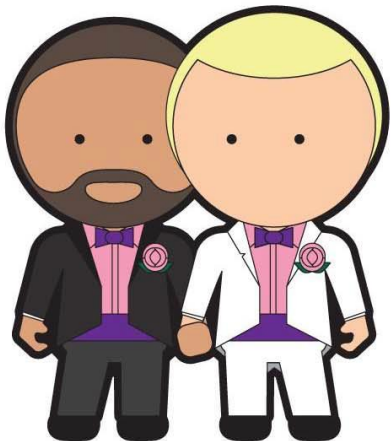
As at 31 March 2021 WWL Trust staff breakdown was:

62% Aged Under 50 **38%** Aged over 50

The proportion of staff in each age bracket has stayed relatively static compared to 2020.

Performance management cases split by age were at 40% for under 50 and 60% for over 50 which is not in proportion to the workforce representation.

Marriage and Civil Partnership



As at 31 March 2021

54% of staff were **Married**
1% were in a **Civil Partnership**
32% single, **8%** divorced / legally separated, **1%** widowed, **3%** unknown.

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

Disability



As at 31 March 2021

2.6% of the Workforce have declared that they are living with a disability.

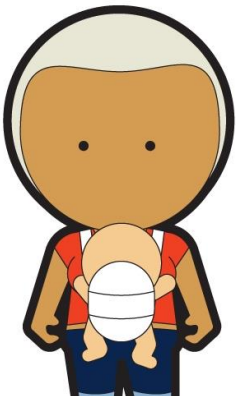
This is static compared to the 2020 figure although there is still a large amount of undeclared data. Undeclared data in 2021 was **26.6%** which is a decrease compared to previous years: 2020 & 2019 was 29% & 2018 was 32%)



For Non-Clinical Staff there is an under representation of disabled staff in Band 7 and 8b and above.

For Clinical Staff there is an under representation of disabled staff particularly in Bands 8b, 8c, Very Senior Management and in Medical & Dental.

Pregnancy and Maternity



As at 31 March 2021, a snap shot from the Electronic Staff Record indicated that:

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

This is comparable to the previous two years.

Religion and Belief



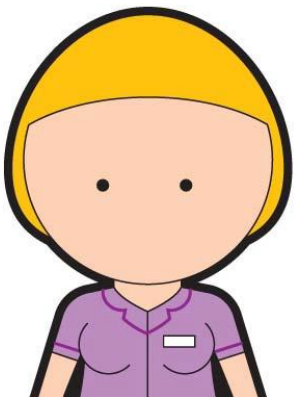
As at 31 March 2021

56.9% Christian **8.6%** Unknown

Remaining staff split across a range of religions and beliefs with the highest number being in Atheism category (6.9%).

A significant proportion of staff have not declared their religion and belief. (23.4%)
(The Wigan borough figure for Christianity is 77.8%)

Sexual Orientation



Workforce as at 31 March 2021:

75% Heterosexual

1% Gay or Lesbian

1% Bisexual

21% did not wish to disclose.

Wigan population 8.5% Lesbian,
Gay or Bisexual.

There is comparable representation of gay, lesbian or bisexual staff across AFC bands except 8c and 9.

Ethnicity



As at 31 March 2021:

88.5% of Staff of White Ethnicity
(2011 Census, Wigan Borough White representation is 97.3%)

10.1% of Staff from Black & Minority Ethnic Groups

1.4% Not Stated

11.8% of the Trust Board membership is BME.

13% of **Disciplinary** cases were in respect of BME staff members which slightly above the workforce profile.

Gender Reassignment

Sex



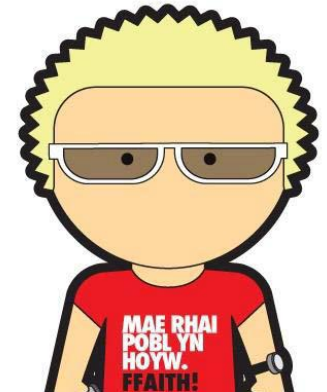
Workforce as at 31 March 2021:

81% Female

19% Male

(2011 Census, 50.3% female / 49.7% male within Wigan population)

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



47% of **Disciplinary** cases were in respect of male staff members which is over representative of the male workforce profile. This is an increase from the previous year's data at 35% of disciplinary cases in respect of male staff members.

Our Service Users (Patients)

Ethnicity (Out-Patients & In-Patients)



During 2020/21

91% of Patients of British White Ethnicity

4.3% of Patients from Black & Minority Ethnic Groups (BME)

During last 12 months, 1.1% decrease in patients of British White Ethnicity. 0.1% decrease in patients of BME Origin. 1.2% increase in those not stated.

Over last 11 years steady increase in BME activity
2010/11: 2.9% / 2020/21: 4.3%.

Ethnicity (Accident & Emergency)

During 2020/21

91.3% of Patients of British White Ethnicity

6.2% of Patients from Black & Minority Ethnic Groups (BME)

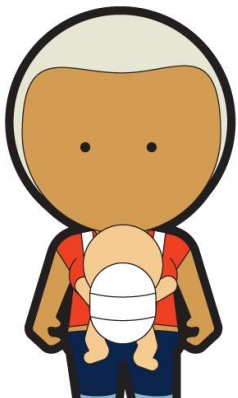
2.5% Not Known

During last 12 months, 0.4% decrease in patients of British White Ethnicity. 0.1% decrease in patients of BME Origin.

Over last 11 years steady increase in BME activity in A&E. 2010/11: 3.5% / 2020/21: 6.2%

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 2020/21

86.7% of Patients of British White Ethnicity

12% of Patients from Black & Minority Ethnic Groups

1.3% Not Known

During last 12 months: 0.5% decrease in patients of British White Ethnicity. 0.5% decrease in patients of Black and Minority Ethnic Backgrounds. During last 6 years: 3.3% decrease in patients of British White Ethnicity. 2.5% 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 2020/21 Top Languages Requested

Polish, Romanian, Arabic, Kurdish Sorani, Farsi, Russian, Urdu, Spanish

Trends show the same top languages as 2019/20 with Urdu and Spanish added to the list. As predicted, due to the Covid Pandemic, the number of face to face interpreters decreased and the number of telephone interpreters increased.

During 2020/21:

31 Translations into other languages

5 Other formats - 4 Large Print / 1 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

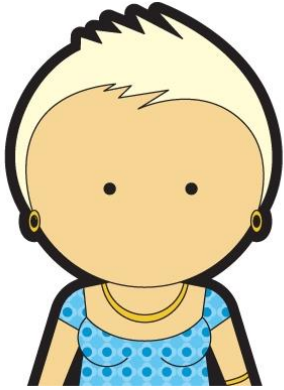
are small compared to the size of the total population and

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 2020/21
58% Female
42% 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 2020/21
% 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



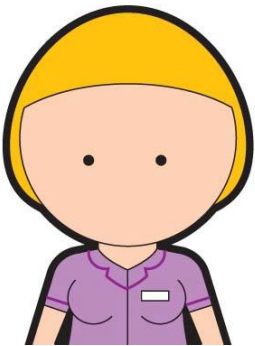
During 2020/21
% of patients accessing out-patient services

68% Christian	16% Unknown
14% None	0.2% Hindu
0.6% Muslim	0.2% Atheist
0.1% Buddhist	0.1% 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 (62,674 patients).

Sexual Orientation and Transgender



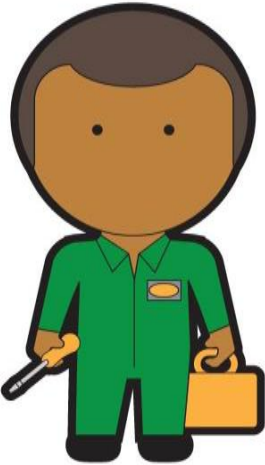
Based on recent research and LGBT inequalities data it is estimated that there are

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.

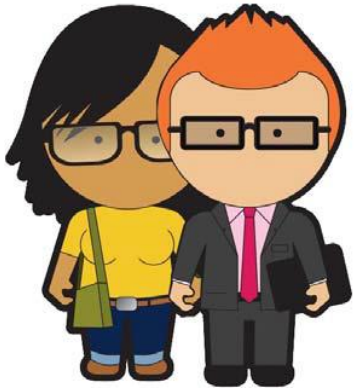
The Accessible Information Standard

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



393 Complaints Received during 2020/21
198 Female **194** Male

375 British White Ethnicity
10 Black & Minority Ethnic Background
8 Not Stated

69% Aged 50 years or above

- ### 5 Main Subject Complaints
- Clinical treatment
 - Communications
 - Admissions and Discharges
 - Patient Care
 - Value and Behaviour

No trends in relation to protected characteristics noted

Appendix 4 - Compliance against National Standards - Dashboard

Equality National Standards	Requirements	Update	RAG Rating
<p>Equality Act 2010:</p> <p>Public Sector Equality Duty - General Duty</p>	<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>Evidenced within Annual EDS Action Plan.</p>	<p>Green</p>
<p>Equality Act 2010:</p> <p>Public Sector Equality Duty - Specific Duties</p>	<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>Draft EDI Annual Monitoring Report 2020/21 produced. Currently being reviewed. To be tabled at Workforce Committee in November 2021 and then published on Trust Website by 31/01/22.</p> <p>WWL's current EDI Strategy expired at the end of 2020 and due to the Covid Pandemic is yet to be finalised. Agreed that it was important to take the time to reflect the learning from the pandemic in the strategy and objectives, as national media coverage has demonstrated that Covid has disproportionately affected some protected groups and exacerbated health inequalities. In light of this, members of the Executive Team are in the process of reviewing the strategic approach to EDI, how we monitor and provide assurance and how we can work not only within our organisation, but across the local borough to develop objectives and an EDI Strategy that effectively addresses these crucial issues. Draft EDI Strategy themes and aims agreed. Consultation commenced. Deadline for responses 15/10/21.</p> <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>Yellow</p>
<p>Equality Delivery System (EDS2)</p> <p>NHS Standard Contract Requirement</p> <p>Embedded within CCG Assurance Framework & CQC Inspection regime.</p>	<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>At the start of the COVID-19 pandemic, the EHRC confirmed that due to the pandemic the specific reporting duties of the Public Sector Equality Duty would be suspended for the financial year 2020-2021.</p> <p>Although the Trust did not produce an EDS Assessment Scores and Equality Objective Annual Review Report for 2020/21, EDI Annual report still produced.</p>	<p>Green</p>

Equality National Standards	Requirements	Update	RAG Rating
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>Completed and submitted August 2021. The report has been published on Trust's internet web page.</p> <p>Indications show: A lower relative likelihood of BAME staff entering the formal disciplinary process compared to White staff. Improved percentage of BAME staff that believe the Trust provide equal opportunities for career progression or promotion. Increased BAME board representation.</p> <p>Indications show: An increase in the number of BAME staff experiencing harassment, bullying or abuse from patients, relatives, the public, or staff in last 12 months. This will need to form a key part of the 2021-2022 actions.</p>	
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 and submitted August 2021. The report has been published on Trust's internet web page.</p> <p>Indications show: A lower relative likelihood of disabled staff entering the formal capability process compared to non-disabled staff, as measured by entry into the formal capability procedure (excluding ill health capability). A decrease in the percentage of disabled staff saying that they have felt pressure from their manager to come to work, despite not feeling well enough to perform their duties. An increase in the number of disabled staff stating that their employer has made adequate adjustment(s) to enable them to carry out their work.</p> <p>Indications show: A decrease in the percentage of disabled staff experiencing harassment, bullying or abuse from patients/service users, their relatives, other members of the public, or colleagues in the last 12 months, although an increase for non-disabled staff. An increase in the percentage of staff experiencing harassment, bullying or abuse from managers in the last 12 months. A decrease in the percentage of disabled staff saying that they are satisfied with the extent to which their organisation values their work. This will need to form a key part of the 2021-2022 action plan.</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>Completed and published on Trust's internet web page. 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. There have been improvements since the previous year. 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 2021. Actions to be included in 2021-2022 Action Plan</p>	

Equality National Standards	Requirements	Update	RAG Rating
<p>Accessible Information Standard (SCCI1605) (for people with a disability, impairment or sensory loss)</p> <p>By law (Section 250 of the Health and Social Care Act 2012), all organisations that provide NHS care or adult social care must follow the Standard in full from 1st August 2016 onwards.</p>	<p>The Accessible Information Standard aims to ensure that disabled people have access to information that they can understand and any communication support they might need. 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>Functionality identified on PAS to enable the recording of patient's needs (RPN). AIS Codes developed and added to RPN.</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. 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. Communication difficulties / impairments captured within nursing admission documentation. Recorded on HIS System under 'activities of daily living assessment'. Visible to clinical staff during in-patient stay.</p> <p>Access to Face to Face British Sign Language Interpreters available. Services recently reviewed and new provider sourced and implemented from January 2020. We now have video remote access to British Sign Language Interpreters in A&E & Maternity Services. A dedicated IPAD can be accessed from Reception Staff.</p> <p>Capture of accessible information requirements now incorporated in PAS for elective in-patients and out-patients. This information passes into HIS and is visible in the patient's information tab.</p>	<p>IT Systems unable to facilitate the full requirements of the standard (record / alert & share patient needs across all Trust services). Although controls have been put in place to ensure compliance in all services using PAS, noted no consistent approach Trust wide (over 140 standalone systems). Patients could have their information and communication needs met for some services, but not for others.</p> <p>Risk Assessment Score reviewed in March 2021. Due to new controls put in place, Score reduced from 15 to 20. At Patient experience Improvement committee in March 2021, agreed should be added to Corporate Risk register. Reviewed by Associate Director of Governance in July 2021, risk need to be rearticulated using new scoring matrix and include list of existing controls. Assigned score of 9. Added to Corporate Risk Register. Risk Reduction Action Plan updated.</p> <p>Further resource of £48,000 required to ensure full compliance with AIS: (Resource estimate provided by Business Analysis)</p> <p>Pam Green to raise at HIS Board, requirement for A&E registration to be amended to provide ability to collect patient's needs. Action now addressed within a number of other required updates and scheduled into current resources, so no additional costs incurred (£12,000 projected not required). The changes have been developed and are currently being tested. Once signed off a release into the live environment will be scheduled. Date to be confirmed.</p> <p>£36,000 - Funding to be sourced for contracted Business Analyst to investigate the scope of the capability of all other standalone systems managed within the Trust, including Community Services (SystemOne).</p>	

Equality National Standards	Requirements	Update	RAG Rating
<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>	

A detailed account of all Trust Equality Monitoring Data for 2020/21

can be accessed via our Trust Website

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