Diversity and Inclusivity
Activity Report
2018 – 2019

Contents

SHERWOOD FOREST HOSPITALS NHS FOUNDATION TRUST
DIVERSITY AND INCLUSIVITY ACTIVITY REPORT 2018 - 2019

1.0 Background

This report provides the Board of Directors with an update on the achievements, progress and developments in relation to the Equality, Diversity and Inclusivity agenda at Sherwood Forest Hospitals NHS Foundation Trust.

At the heart of everything we do is our dedication to giving the best possible care for patients. The Diversity and Inclusivity group has continued to take forward the Equality and Diversity agenda by ensuring equality legislation is embedded within the organisation whilst also working at operational levels within the Divisions and Corporate areas.

We are committed to providing an environment where all staff, service users and carers enjoy equality of opportunity. We oppose all forms of unlawful or unfair discrimination on the grounds of age, disability, gender reassignment, marriage and civil partnership, pregnancy and maternity, race, religion or belief, sex and sexual orientation, political affiliation, trade union membership and social and employment status.

We accept that such an environment requires individual differences and cultural diversity to be recognised and valued. Promoting equality, embracing diversity and ensuring full inclusion for people who use our services is central to the Vision and Values of the Trust and are fundamental to us in building strong communities and services. The Trust understands the importance of being compliant with the equality legislation and acknowledges the benefits and contribution that managing equality and diversity makes to the achievement of its business objectives in the areas of employment, service planning and service delivery.

The purpose of this report is to highlight the activities that have taken place during 2018/2019 and monitors the work being undertaken to achieve the Trust's equality objectives.

2.0 Organisational

2.1.1 Diversity and Inclusivity Meeting

The Trust delivers the diversity and inclusivity agenda via a Diversity and Inclusivity group, which meets bi-monthly. To ensure there is a partnership approach to all aspects of the diversity and inclusivity agenda, there is a nominated staff side lead.

The purpose of the Diversity and Inclusivity group is to support activities within the Trust to ensure the statutory board responsibilities and obligations under law relating to equality and diversity are met, plus raise awareness and promote diversity and inclusivity across the Trust.

The group provides regular reports to the Joint Staff Partnership Forum (JSPF) and provides an annual report to the Board of Directors which agrees the Trust's priorities and actions to be delivered.

The Diversity and Inclusivity group's objectives for 2018/2019 were:

- To continue to ensure the Trust's services are fully accessible to all patients including making sure information and communication is accessible and specific to patient's needs in line with the Accessible Information Standards, by engaging with community groups and patients as necessary.
- To increase the number of staff who have self-reported equality data including disability and Sexual Orientation.
- Ensuring we comply with current legislation and public duty including EDS2, WRES, WDES and the gender pay gap to include enhancing the current EDS2 and WRES process by setting up working groups to review and analyse the data and create individual actions plans.
- To increase the knowledge of the Diversity and Inclusivity agenda across the Trust.
- To embed the 'Time to Change' mental health employee support across the Trust.

This report shows the initiatives and work completed in 2018/2019 to achieve these objectives.

2.1.2 Staff Diversity Support

We continue to have staff support networks for Black, Asian and Minority Ethnic (BAME) staff and Lesbian, Gay, Bisexual and Transgender (LGBT) staff. A BAME and LGBT employee champion also attend the Diversity and Inclusivity group on a bi-monthly basis to provide an arena for staff to raise their concerns or to raise suggestions of how to improve the working environment and patient care for BAME and LGBT groups.

Whilst the LGBT group continues to be a virtual support network, in 2018/2019 the BAME staff support network moved from a virtual network to a face to face network. Terms of reference were agreed and the network currently meets on a six weekly basis to support the Trust in meeting its statutory obligations regarding its duty under the Equality Act 2010.

Local and national events in relation to BAME and LGBT have been publicised throughout the Trust including Black History Month and LGBT History Month.

2.2 Trust Compliance with the Equality Act 2010

2.2.1 The Equality Duty

The Equality Act (2010) places an Equality Duty on public bodies which encourages the Trust to engage with the diverse communities affected by our activities to ensure that policies and services are appropriate and accessible to all and meet the different needs of the communities and people we serve.

The Equality Duty consists of a General Duty with three main aims. It requires the Trust to have due regard to the need to:

1. Eliminate unlawful discrimination, harassment and victimisation and other conduct prohibited by the Act.

2. Advance equality of opportunity between persons who share a relevant protected characteristic and persons who do not share it.

3. Foster good relations between persons who share a relevant protected characteristic and persons who do not share it.

Having 'due regard' means the Trust must take account of these three aims as part of our decision making processes; in how we act as an employer, how we develop, evaluate and review policy; how we design, deliver and evaluate services; and how we commission and buy services from others. The general duty is also underpinned by a number of specific duties which include the need for us to:

• Set specific, measurable equality objectives;

• Analyse the effect of our policies and practices on equality and consider how they further the equality aims;

• Publish sufficient information to demonstrate we have complied with the general equality duty on an annual basis.

2.2.2 Specific Duties

The Equality Duty is supported by specific duties, set out in the regulations which came into force on 10th September 2011. The specific duties require public bodies to publish relevant,

proportionate information demonstrating their compliance with the Equality Duty; and to set themselves specific measurable equality objectives. All information must be published in a way which makes it easy for people to access.

The information published must include;

• Information relating to employees who share protected characteristics (for public bodies with 150 or more employees); and

• Information relating to people who are affected by the public body's policies and practices who share protected characteristics (for example, service users).

However it is up to each public body to decide itself what information it publishes to show its compliance with the Equality Duty.

2.2.3 Publication Duties

The information must be published on an annual basis. The Trust has published;

Workforce Figures

The information published on workforce figures identifies information in relation to the Trust's workforce and protected characteristics as defined by the Equality Act 2010.

- Workforce Diversity and Inclusivity report March 2019
- NHS Staff Survey Summary 2018
- Workforce Race Equality Standards (WRES) July 2018
- Equality Delivery Standard 2 (EDS2) summary report 2018
- Equality Dashboard 2018/2019
- Gender Pay Gap Report 2017-2018

Patient Figures

As part of the Equality Act 2010 information in relation to patients and protected characteristics must be collated and published. The patient figures published reports which are related to patients and particular protected characteristics.

- Patient activity data on protected characteristics 2018-19
- Membership report within the Annual Report and Accounts 2018/2019

Organisational Information

The Trust published its Equality Objectives Plan 2018-2021 along with the following documents which supports how the Trust is meeting the needs of the Equality Act 2010:

- 2018 NHS Staff Survey results
- Disabled Access Report 2019
- Diversity and Inclusivity Work Plan 2018 – 2019
- Equality Impact Assessment Guidance
- Same Sex Accommodation Declaration

3.0 Gender Pay Gap Reporting

In accordance with the Equality Act 2010 (Gender Pay Gap Information) Regulations 2017, employers with 250 or more employees are required to publish statutory calculations no later than 30th March each year.

The information aims to establish the pay gap between male and female employees as at 31 March the previous year. For example, 31 March 2018 pay information had to be published by 30 March 2019.

The Equality and Human Rights Commission defines the difference between equal pay and the gender pay gap as follows:

Equal pay means that men and women in the same employment performing equal work must receive equal pay, as set out in the Equality Act 2010.

- The gender pay gap is a measure of the difference between men's and women's average earnings across an organisation or the labour market. It is expressed as a percentage of men's earnings.

Salaries at the Trust are determined through a national NHS job evaluation scheme called Agenda for Change (AFC). Job evaluation evaluates the job and not the post holder. It makes no reference to gender or any other personal characteristics of existing or potential job holders. Therefore, the Trust is confident it is paying the same salary to roles of equal value.

The legislation requires an employer to publish six calculations:

- Average gender pay gap as a mean average
- Average gender pay gap as a median average

- Average bonus gender pay gap as a mean average
- Average bonus gender pay gap as a median average
- Proportion of males receiving a bonus payment and proportion of females receiving a bonus payment
- Proportion of males and females when divided into four groups ordered from lowest to highest pay.

A summary breakdown of our workforce by gender and pay banding as at March 2018, which was published in March 2019, can be found on the Trust's internet site by clicking [here](#)

The Trust will undertake a number of actions which relate to these findings as follows:

- Gender analysis undertaken in relation to the Trusts leadership talent management work
- Use the information within this report to inform the Trust's Diversity and Inclusivity work plan and objectives

4.0 Equality Delivery System 2 (EDS2)

EDS2 is a mandatory framework to assist us with ensuring we treat our patients and staff fairly and equally. We undertook an EDS2 grading exercise in 2018, engaging and consulting with staff, patients, carers and communities to determine the goals to focus on i.e. what things matter the most for patients, communities and staff.

The results of the grading exercise were compiled and published in December 2018. It is mandatory that EDS2 grading is completed by the Trust annually.

5.0 Workforce Race Equality Standard (WRES)

The Workforce Race Equality Standard (WRES) is another mandatory framework that we have to complete on an annual basis. The WRES standards are included in the NHS Standard Contract and all NHS organisations are required to demonstrate progress against nine indicators; four workforce data metrics, four staff survey findings regarding White and BME experiences, and one Board metric to address low levels of BME representation. The CQC inspect on the WRES implementation under the well-led domain. The Trust's WRES data for 2017/2018 was published in July 2018 and a WRES action plan developed.

6.0 Equality Impact Assessments

We have agreed that no policy, procedure or process can be approved until an Equality Impact Assessment (EqIA) has been carried out. An EqIA is the detailed and systematic analysis of the potential or actual effects of a policy, procedure or process, which is undertaken in order to establish whether the policy, procedure or process has a differential impact on different groups of people. The aim of the EqIA is to eliminate discrimination and produce positive outcomes for equality. EqIA audits are undertaken on a quarterly basis and reported back to the Diversity and Inclusivity group.

7.0 Analysis of Data

7.1 Workforce Information

The Trust is committed to treating all its service users and staff with dignity and respect. Embracing diversity supports the delivery of our strategic vision and helps to ensure that we are providing effective services that meet the needs of our community. SFH has an Equality Strategy, which is a public declaration of how we will demonstrably take forward our commitment to ensuring equality is embedded within all aspects of the organisation. Further details of our Equality Strategy can be found on the Diversity and Inclusivity page on the Trust's website.

Ethnicity

In 2018/19 the ethnicity composition continues to remain stable when compared with the previous year. The ethnicity profile of our staff is positive compared with the profile of the local community which is 4.5% BME. Staff from a Black, Asian or Minority Ethnic group has increased slightly compared to 2017/18.

	2018/2019		2017/2018	
Ethnic Origin	**%**	**Headcount**	**%**	**Headcount**
Asian	6.51%	315	5.97%	280
Black	1.72%	83	1.77%	83
Chinese	0.27%	13	0.36%	17
Mixed	1.47%	71	1.30%	61
Not Stated/Undefined	1.78%	86	1.73%	81
White	88.26%	4,269	88.87%	4,170
Grand Total		**4,837**		**4,692**

Disability

The Trust collects data from all new employees regarding disability status and employees are encouraged to keep their staff record updated throughout their employment. The current data identified 26.34% of staff have not declared their disability status, a decrease compared to last year

	2018/2019		2017/2018	
Disabled	**%**	**Headcount**	**%**	**Headcount**
No	69.44%	3359	66.20%	3,106
Not Declared	26.34%	1274	30.31%	1,422
Undefined	1.03%	50	0.70%	33
Yes	3.18%	154	2.79%	131
Grand Total		**4837**		**4,692**

Staff Age Profile

The overall age profile for the Trust's workforce is dominated by the 41-50 and 51-60 age bands, something that the Trust is planning for in terms of potential retirements within coming years giving particular consideration to the Registered Nurse staff group where Nurses who have special class status can retire from 55 years of age. The facility for flexi-retirement continues to retain staffs' valuable knowledge, skills and experience within the Trust; allowing staff to retire and return to work. On the whole the age demographics continue to remain static, with a typical distribution across the age ranges. The Medical age profile is representative of the numbers of Dr's in training.

Trust Age profile - % of staff - 31st March 2019

	2018/2019		2017/2018	
	%	**Headcount**	**%**	**Headcount**
Under 20	0.97%	47	0.92%	43
21-30	19.56%	946	18.88%	886
31-40	23.01%	1113	22.95%	1077
41-50	24.54%	1187	25.72%	1207
51-60	25.80%	1248	26.24%	1231
61-65	5.13%	248	4.43%	208
66 and over	0.99%	48	0.85%	40
Grand Total		**4,837**		**4,692**

Medical Staff Age profile - % of staff - 31st March 2019

	2018/2019		2017/2018	
	%	Headcount	%	Headcount
Under 20	0.00%	0	0.00%	0
21-30	26.36%	131	25.85%	122
31-40	28.77%	143	28.39%	134
41-50	21.93%	109	22.67%	107
51-60	17.30%	86	17.58%	83
61-65	3.82%	19	3.39%	16
66 and over	1.81%	9	2.12%	10
Grand Total		497		472

Nursing Staff Age profile - % of staff - 31st March 2019

	2018/2019		2017/2018	
	%	Headcount	%	Headcount
Under 20	0.00%	0	0.00%	0
21-30	17.29%	246	16.59%	229
31-40	23.75%	338	24.42%	337
41-50	26.49%	377	27.10%	374
51-60	27.48%	391	28.26%	390
61-65	4.57%	65	3.33%	46
66 and over	0.42%	6	0.29%	4
Grand Total		1,423		1,380

Gender

In 2018/2019 the female workforce accounts for 81.1% of the total population of the workforce. This is a small increase when compared to the previous year's figures. Male headcount increased slightly compared to the previous year; however the position continues to remain relatively static. Whilst the male demographic of the workforce is considerably lower than the local demographic, this is comparable with NHS national demographic.

	2018/2019		2017/2018	
	%	Headcount	%	Headcount
Male	18.90%	914	19.10%	896
Female	81.10%	3,923	80.90%	3,796
Grand Total		4,837		4,692

Sexual Orientation

In 2018/19 the sexual orientation composition continues to remain stable when compared with the previous year. The current data identified 21.54% of staff have not declared their disability status, a decrease compared to last year.

	2018/2019		2017/2018	
	%	Headcount	%	Headcount
Bisexual	0.68%	33	0.49%	23
Gay/Lesbian	1.20%	58	1.17%	55
Heterosexual	76.58%	3704	74.64%	3,502
Do not wish to disclose	21.54%	1042	23.57%	1,106
Undefined	0.00%	0	0.13%	6
Grand Total		**4,837**		**4,692**

7.2 Membership

As a Foundation Trust we are proud of our membership totalling in excess of 21,000, which is around 5% of the local population. Excluding staff membership this number is closer to 16,000. The breakdown for this can be seen below:

Public membership breakdown at 31st March 2019

	Number of Public Members	Change over 12 months
Age (years)		
0 – 16	0	-1
17 – 21	59	-36
22 – 29	761	-99
30 – 39	692	-76
40 – 49	1303	-203
50 – 59	2343	-139
60 – 74	4856	- 630
75 +	4511	-131
Not Stated	1154	-251

Gender	Number of Public Members	Change over 12 months
Male	5721	-561
Female	9758	-988
Unspecified	200	-17

Ethnicity	Number of Public Members	Change over 12 months
White – English, Welsh, Scottish, Northern Irish, British	13840	-1,466
White - Irish	65	-7
White – Gypsy or Irish Traveller	0	0
White - Other	102	-4
Mixed – White and Black Caribbean	5	0
Mixed – White and Black African	3	0
Mixed – White and Asian	9	0
Mixed – Other Mixed	13	-2
Asian or Asian British – Indian	38	-2
Asian or Asian British – Pakistani	9	0
Asian or Asian British – Bangladeshi	6	0
Asian or Asian British – Chinese	15	-2
Asian or Asian British – Other Asian	16	+1
Black or Black British - African	10	+1
Black or Black British - Caribbean	19	-4
Black or Black British – Other Black	3	0
Other Ethnic Group – Arab	0	0
Other Ethnic Group – Any Other Ethnic Group	8	0
Not Stated	1518	-81

Trust Matters

The Trust produces a monthly news e-magazine for its members known as "Trust Matters." This provides updates on Trust news as well as a regular article from the lead governor and Chief Executive.

Meet Your Governor Events

We continue to hold monthly Meet Your Governor Events which take place over one week at all three of our sites. Governors are timetabled to cover different days and times of days and are available in the main entrances to speak to members and the public. We communicate this in advance on email to members and on social media to the public. Concerns and complaints on the day are directed to the Patient Experience Team to resolve. Themes from this are then discussed at the Membership and Engagement group.

Forum for Public Involvement

The Forum for Public Involvement continues to take place on the first Monday of every month. Discussions have taken place around various issues including PLACE audits, results of various staff and patient survey and review of upcoming patient information leaflets.

7.3 Our CARE Values

The values an organisation holds are central to how it plans, organises and delivers service. Our CARE values describe the ethos of the Trust and our approach to working with patients, the public, staff, and partner organisations. Our CARE values underpin the work of the Diversity and Inclusivity group, and are an effective framework to promote dignity, respect, embrace diversity and promote culture change

7.4 Staff Survey

National NHS Staff Survey – 2018

The Trust participates in the national NHS Staff Survey on an annual basis. The 2018 survey was undertaken from 1st October to 30th November.

In 2018 for the second year, the Trust elected to survey all staff and 2,789 staff responded giving a response rate of 62%, an increase of 5% on the previous year. Our response rate was the 6th best in the NHS. The average response rate for acute trusts in England was 44%. The 62% response rate compares well with the Trust's 57% response rate in 2017.

This year there are significant changes in the way the staff survey findings are reported with the Key Findings from previous years replaced with 10 'themes'. The themes are a specific line of questioning on areas such as; Equality, diversity & inclusion, Health & Wellbeing and Immediate managers. Like all other NHS Trusts in the country, we continued to operate against a backdrop of significant financial pressures and continued high demand on services. Positively, despite these pressures improvement has been sustained. Our results improved in 4 of the 10 themes, with no change in 3 and deterioration in 1 theme. In addition there is one new area (Morale) which it is not possible to compare to previous years.

Very positively, the overall indicator of staff engagement for the Trust was 7.3 (out of a maximum score of 10), which was well above average when compared to trusts of a similar type. This was a further increase on the previous year's score of 7.2 when the Trust was again above average, demonstrating sustained improvement.

Staff recommending the Trust as a place to work or receive treatment

This is one of the significant measures articulated by the NHS Staff Survey results. Questions Q21a, Q21b, Q21c and Q21d feed into the Staff Engagement theme.

	2015	2016	2017	2018	*2018 av.
Q21a "Care of patients/service users is my organisation's top priority"	70.0%	80.9%	80.5%	84.1%	76.7%
Q21b "My organisation acts on concerns raised by patients/service users"	64.5%	76.3%	76.2%	81.0%	72.6%
Q21c "I would recommend my organisation as a place to work"	46.6%	67.9%	69.5%	70.5%	62.6%
Q21d "If a friend or relative needed treatment, I would be happy with the standard of care provided by this organisation"	57.1%	73.2%	77.6%	79.4%	71.3%

The results of this show a marked improvement in all areas to well above the national average for acute Trusts in England. Staff recommending the Trust as a place to work is now 8% above this average and staff being happy with the standard of care provided by SFH is 8% above the average. The places SFH as the:

- top acute Trust in the Midlands for overall engagement and the 11th best in England (out of 89 acute trusts nationally),

- top acute Trust in the Midlands and joint 8th best acute trust in England as a place to work and receive treatment; and
- top acute Trust in the Midlands and joint 6th best acute trust in England for staff satisfied with their quality of work and care they provide.

The 2018 Staff Survey results have been communicated to staff via Staff Brief, Staff Bulletin, screensavers and posters. Staff engagement sessions took place to ascertain how colleagues feel further improvements can be made. There were also a number of individual suggestions for improvement that were captured in the staff survey free text that are being explored. Regular updates via screensavers and the weekly bulletin will keep staff informed of the actions taken as a result of the staff survey feedback.

The 2018 Staff Survey results were discussed at the Staff Communication and Engagement Forum to obtain their views on priority actions. In addition, the Executive Director of Human Resources and Organisational Development has presented the results at senior management meetings and briefing sessions across all the Trust with an open invitation for any staff member to attend and offer further feedback.

Divisions have scrutinised the staff survey results in order to develop their action plans. Delivery of the divisional actions plans will be monitored at the monthly Divisional performance meetings with Executives.

There are also Trust wide initiatives for incorporation into the Workforce Strategy 2019/20. These will include continuation of engagement activities, a focus on staff health and well-being and diversity and inclusivity. Some of the results will also feature in Trust recruitment campaigns.

8.0 Human Resource Activities

8.1 Training and Development

The Training, Education and Development Department at Sherwood Forest Hospitals NHS Foundation Trust have a strong regional reputation for the quality of its education and training provision. The department is extremely proud of the role it plays in developing our current and future workforces to provide high quality and safe patient care.

Sherwood Forest Hospitals NHS Foundation Trust
Training Activities 2018/2019 Gender Profile

Course Title	Male		Female		Total Gender
	Number	%	Number	%	Number
Customer Relations	274	20	1085	80	1359
Health & Safety	1085	23	3565	77	4650
Induction	323	16	1759	84	2082
Informatics					
Medical Equipment	2584	13	17785	87	20369
Occupational Knowledge & Skills	2450	14	14649	86	17099
Personal Development	332	16	1804	84	2136
Resuscitation	689	27	1817	73	2506
Risk Management	3298	20	13334	80	16632

Course Title	White		Other Ethnic Background		Not Stated		Total Ethnicity
	Number	%	Number	%	Number	%	Number
Customer Relations	1163	86	179	13	17	1	1359
Health & Safety	3996	86	605	13	49	1	4650
Induction	1661	80	394	19	27	1	2082
Informatics							
Medical Equipment	17490	86	2654	13	225	1	20369
Occupational Knowledge & Skills	15119	88	1769	11	211	1	17099
Personal Development	2007	94	109	5	20	1	2136
Resuscitation	1929	77	546	22	31	1	2506
Risk Management	14357	86	2080	13	195	1	16632

8.1.1 Diversity and Inclusivity Training

Diversity and Inclusivity training is mandatory for all staff at the Trust. During 2018/2019, a total of 4,643 staff undertook diversity and equality training across the Trust compared to 3,752 in 2017/2018.

8.1.2 Mental Health Awareness Sessions for Managers

In 2017/2018, Mental Health Awareness Sessions for Managers continued to be delivered. The aims of these sessions were:

- To improve managers understanding of mental health conditions
- To improve managers understanding of national guidelines / best practice for supporting staff experiencing mental health conditions
- To understand what resources the Trust can offer to help support managers in managing staff with mental health conditions

This training session is in addition to the Mental Health Awareness training that is open to all staff which is delivered by the Rapid Response Liaison Psychiatry (RRLP) team in relation to patients.

8.1.3 LGBT Awareness and Hate Crime Training

In 2018, an external speaker delivered some training on LGBT Awareness and Hate Crime training focussing on:

- Myths and stereotypes
- Negative laws and recent positive changes in the law
- Supporting victims of LGBT hate crimes
- Degrees of substance misuse amongst LGBT people
- Mental health issues for LGBT people
- Why LGBT people are more likely to avoid health check ups
- What things can be done to make the health service more LGBT friendly

The training was positively reviewed and a further session will take place in 2019/2020.

8.1.4 Orientation

Diversity and Inclusivity continues to be included within the Human Resources section of the Trust's orientation day one for all new staff members and in the volunteer induction programme.

8.2 Human Resource Policies, Procedures and Practice

During 2017/2018, 11 Human Resource policies were developed/reviewed and implemented within the Trust following approval and ratification by the Joint Staff Partnership Forum. This included a revision of the Trust's Equality and Diversity Policy, Sickness Absence and Wellbeing Policy and Speaking up Policy.

The following guidance documents were also developed to support Equality and Inclusivity at the Trust:

- Transgender Staff Guidance
- Menopause at Work Guidance
- Paternity Leave Guidance for Employees
- Paternity Leave Guidance for Managers
- Flexible Retirement Agreement
- Raising Concerns Guidance
- Reasonable Adjustments Guidance

Disability Leave was introduced in November 2018 as a form of reasonable adjustment. Employees who have declared a disability can request a maximum of 5 days paid per year, pro rata, to use for hospital appointments, counselling, assessments or training.

8.3 Workforce Recruitment

The Trust operates fair recruitment practices to ensure equal access to employment opportunities for all. We have been awarded the 'Disability Confident Employer' and use this marque on our recruitment material to show we encourage applications from disabled people.

The scheme helps employers:

- draw from the widest possible pool of talent
- secure high quality staff who are skilled, loyal and hard working
- improve employee morale and commitment by demonstrating that you treat all employees fairly

It also helps us identify those employers who are committed to equality in the workplace.

Our applicant tracking system specifically highlights to appointing managers when an applicant has declared a disability to ensure we do not miss the opportunity to offer preferential interviews if the applicant meets the person specification. We also make

reasonable adjustments throughout the recruitment and selection process to support disabled job applicants and employees.

The Trust support employees with a disability in a number of ways and takes steps to meet the needs and achieve equal outcomes, even if this requires 'positive action'. For example, designating disabled parking bays close to entrances, adjusting application processes, purchasing any required additional equipment, plus providing support or advocacy. Any employee who has a disability during the course of their employment is supported by occupational health assessments, making reasonable adjustments to their duties and if necessary supporting their search for suitable alternative employment, with the aim of valuing and redeploying employees to retain their knowledge, skills and experience in the Trust.

8.4 Mindful Employer

The Trust continues to be a signatory to the Charter for Employers who are positive about Mental Health reflecting the general philosophy of Mindful Employer. 2018/2019 was the eighth year we have been a signatory to the Charter. This Charter helps the Trust to support staff that experience mental ill health, assisting us in achieving the following aims:

- Show a positive and enabling attitude to employees and job applicants with mental health issues, including positive statements in local recruitment literature.
- Ensure all staff involved in recruitment and selection are briefed on mental health issues and the Equality Act 2010, and given appropriate interview skills.
- Make it clear in any recruitment or occupational health check that people who have experienced mental health issues will not be discriminated against and that disclosure will enable both employee and employer to assess and provide the right level of support or adjustments.
- Not make assumptions that a person with a mental health issue will be more vulnerable to workplace stress or take more time off than any other employee or job applicant.
- Provide non-judgemental and proactive support to individual staff that experience mental health issues.
- Ensure all line managers have information and training about managing mental health in the workplace.

8.5 Time to Change

In 2018/2019, we continued to support the 'Time to Change' Employer Pledge demonstrating a commitment to all that we intend to change the way people think and act about mental health at work at every level in the organisation. As at 31st March 2018, we had 28 employee champions who are available to support staff with their mental health as well as raising awareness about the subject to help break down the stigma. There is also a dedicated Time to Change intranet site and email address for staff to request support.

Time to Change champions have supported staff by encouraging staff to be open about their mental health, signposting to support services and holding awareness events for all staff.

8.6 Age Positive

DWP's Age Positive initiative brings together research and information from employers on effectively managing an ageing workforce of all generations. As we support and practice the points covered by the DWP's 'Employing older workers' guide, we can now freely display the Age Positive logo on recruitment materials.

We support the Age Positive initiative by:

- Offering flexible working, flexible retirement and apprenticeships
- Providing training on being age positive on the Trust's recruitment and selection training
- Not stating number of years' experience on our job adverts or person specifications
- Not specifying qualifications as selection criteria where they're not essential for the job so as not to exclude older candidates who might have the right skills and experience but didn't have the opportunity to take the qualifications specified
- Not asking for date of birth in our main application, only in an equality monitoring section

8.7 Menopause Support

In October 2018, to support World Menopause Day, we commenced our tailored support for staff going through the Menopause. A Menopause conference for both managers and staff was held on the day with the launch of a Menopause guidance document for staff.

There is a Trust working group for Menopause Support which is chaired by the Chief Nurse and monthly Menopause support sessions for staff commenced in March 2019.

9.0 Supporting Vulnerable Adults (Including Learning Disabilities / Mental Health, Children and Young People)

Safeguarding Teams

Safeguarding Adults, Domestic Violence, Learning Disability, Children and Young People, Mental Health and Dementia, work closely together under the wider remit of the Safeguarding Team. The reporting structure for safeguarding is via the Safeguarding Steering Group and then to PSQG. The Trust Safeguarding steering group meets every quarter and includes Divisional membership and on invitation external stakeholders such as the CCGs. For assurance the safeguarding teams produce quarterly reports and yearly annual reports outlining all activity and exception reports where required to ensure risks are highlighted to the Board.

The safeguarding team are available in core hours via a safeguarding duty system; this ensures that all queries are responded to within the working day. Out of hours support is available via the information recorded on the safeguarding intranet site. Work is also underway to develop support processes for senior members of staff out of hours.

Training

The safeguarding team facilitates:

- Safeguarding for both children and adults under a combined Think Family remit.
- A Mental Capacity/ Deprivation of Liberty study day is facilitated monthly. This is currently a full day training session facilitated by the Adult Team, Safeguarding Consultant and legal services.
- Safeguarding Adults/children, Learning Disabilities and dementia champion's networks are in place, with each department nominating Champions for their area. The Champions are supported by the team.
- There is a national PREVENT mandatory e-learning module for all staff to undertake we are able to evidence full compliance with this training and staff are required to update annually via e-learning.
- All the training has been reviewed in line with National developments and also includes themes from safeguarding referrals.

- The safeguarding team facilitate a session on the annual mandatory update; this is updated each year and focuses upon the lessons learnt within hot Trust from a safeguarding perspective each year. We link this also to learning from local and national incidents.
- The Hospital staff continue to receive training on Learning Disabilities via the Induction day (New nurses and Healthcare assistants) and via the Mandatory training programme. This programme has been reinvented with the use of video of the experiences of local patients followed by questions based on observations

Learning Disabilities

The referral processes for patients attending the Trust with a Learning Disability continues to develop, the key to this processes being effective is communication with the patients GP. We are reliant upon them to identify the patients so we can flag their records and develop plans for care to support their transition into the hospital settings

We are continuing to develop strategies to support staff work with patients with learning disability to support them identify their needs, communicate with them effectively and to identify symptoms of deterioration that may present differently due to the patients underlying presentation.

Referrals continue to come from a variety of sources, however most occur via external agencies. In light of this a Learning Disability Process has been distributed to all wards, a

Learning Disability Care Plan has also been created to ensure that any patient admitted receives all the correct and most up to date paperwork. This plan is inclusive of risk assessments, care plans, mental capacity assessments, pain tools, traffic light assessments and discharge planning.

The complexity of cases continues to increase and several referrals have been made for patients without an LD/IDD, but other conditions like ADHD, Asperger's, Cerebral Palsy and other patients with complex health and social care needs. The age range for referrals is 18years+ however, more and more cases are requiring input at a younger age, with the youngest being 15.

We continue to work with our community colleagues to ensure that the care provided is of an individualised nature and in line with the trusts care values.

Dementia

The Trust has responded during the last year to the national requirements for dementia screening and reports this to NHSI on a monthly basis; we have achieved the required target of over 90% for this data consistently over the last year.

The Dementia Nurse Specialist provides training to both staff on the induction, clinical skills and mandatory update sessions. This year the update involved the patients' voice from the perspective of a carer. This session has been extremely moving and received excellent feedback from the course attendees. Moving into the next year we aim to focus the training on the interface with our mental health colleagues and how we can focus on working cohesively to further improve the patient's journey.

Mental Health

We have over the last year developed more effective processes to ensure that patients who access our services with mental health problems receive timely and safe care. We have forged closer links with the mental health trust and formalised some statutory processes.

We acknowledge that we need to focus during the next year on the mental health of our staff and support managers to help their staff where needed. The Specialist Practitioner Mental Health and Think Family will work with HR colleagues and occupational health to develop some training to support managers to help identify staff that may have or be developing mental health problems and also equip them to support staff when needed.

10.0 Chaplaincy Services

The Chaplaincy team continues to provide spiritual, religious, pastoral and emotional support for Trust patients, staff, volunteers and families and friends. The Chaplaincy team specialises in providing for specific religious and cultural needs, including holding regular services of prayer and Holy Communion, bedside visiting by the appropriate chaplain or faith representative where possible and responding to all referrals and requests.

Our end of life service has been enhanced by using Nerve Centre. This enables us to visit ward areas and ask staff to offer chaplaincy support to patients and their families. This support is already available with the end of life bundle but the gentle reminder to staff has been welcomed.

Our chaplains offer a non-judgemental, open and empathic listening ear and advocacy support. We are appreciative of diversity and individual need; we always seek to assess need and offer support as appropriate. This involves working with cross-site multi-disciplinary colleagues as well as liaising with chaplaincy colleagues in other Trusts, community faith leaders and other care providers.

The King's Mill garden and memorial cairn continue to be popular with staff and visitors. People enjoy seeing the flowers and the care that is given to the space. Employees seem to appreciate the quietness of the area when they have breaks and are respectful of the peaceful environment.

The baby loss group spent time clearing the garden area at Mansfield Community Hospital next to the Pilgrim centre and planted some bedding plants which then were watered by the occupational therapy patients as well as chaplaincy staff during visits.

Newark Chapel area has had a screen placed there to develop some privacy for people to use the area more discretely.

We provide inclusive materials and resource for prayer, worship and reflection in our sacred spaces. Our resource boxes are well used in the ward areas.

Each contract funeral and memorial service is always designed to the individual preferences and beliefs of the deceased and their family members as well as staff.

One of our Muslim colleagues said that the chaplaincy service was one of his reasons for deciding to work at Sherwood Forest which is a great tribute to the work done by the chaplaincy team which leads us nicely to our multi-faith provision.

This is a very important aspect of our work. Throughout the year we publicise and recognise the major Christian festivals and also significant religious festivals including Ramadan/Eid and Holocaust Memorial Day. This year we added Diwali to our festivals shared with our Sikh and Hindu staff. The B'hai community come to the Faith Centre four times a year for their significant events.

As a further development, and as part of working with other Trusts, we have supported Chesterfield Royal Hospital in the search for a new lead chaplain and are working to continue that support with a service level agreement for their on-call service

Chaplaincy Volunteers

Our volunteer ward visitors continue to support patients and visitors through their weekly visits, greatly enhancing the impact of the chaplaincy team. In 2018/19, we had three new volunteers who have been welcomed into the team.

Staff Training and Teaching

Training provided by the Chaplains during the last year has included:

Orientation days: ten minute introduction to Chaplaincy Service and staff support available to all staff groups

Clinical Staff Induction: 45 minute presentation on spiritual and bereavement care to Registered Nurses, Healthcare Assistants and Allied Health Professionals

End of Life Care (EoLC) specialist sessions for EoLC Champions and other specialist staff, the Quelca group were very welcoming and appreciated the support given.

Staff Support

Formal and informal support of staff teams of departments and wards as requested, particularly team debriefs after significant events such as traumatic incidents or a high number of deaths within a short space of time.

We have taken sandwiches and other refreshments to the Emergency Department at times when they have been very busy as well as doing tea rounds for patients and relatives.

We were able to support staff teams following the death of serving staff offering memorial services where family and friends were able to attend.

Many of our colleagues as previously stated enjoy our hospitality and quiet space. They find the area peaceful and supportive as they seek some refuge from busy areas. We are pleased to see the area receiving more visits.

Baby/pregnancy loss support: the chaplains work closely with staff from Sherwood Birthing Unit/Early Pregnancy Unit/Ward 14/Neonatal Intensive Care Unit and the Emergency Department to support families who have experienced a pregnancy or baby loss.

The baby loss support group meets on the second Sunday of the month and alternates between a family session and adults only session. Due to the group being well attended, the group also now meet on the last Tuesday evening of the month.

Chaplaincy special events April 2018 to March 2019

May/Jun 18	Ramadan Staff support
July 18	Baby loss memorial service
June 18	Armed forces day
Oct 18	Wave of light in the KTC followed by a walk around the reservoir
Nov 18	Memorial service x 4 at KMH; 1 at MCH and 1 at NWK
Nov 18	Memorial service for ICCU x2
Nov 18	Armistice day at KMH/MCH/NWK/AHV
Nov 18	Diwali celebration
Dec 18	Reception of Peace Light from Bethlehem

Dec 18	Carol services at KMH MCH NWK
	Children's Memorial service
	Christmas Eve Carols
Jan 19	Holocaust Memorial Service
Feb 19	Shrove Tuesday Pancakes and support for staff at all three sights

11.0 Diversity and Inclusivity Initiatives

11.1 Diversity Events

To celebrate equality plus raise awareness and promote diversity and inclusivity at the Trust, the following events have taken place during 2018/2019:

- May 2018 - NHS Equality, Diversity and Human Rights Week – Information stands at each site
- October 2018 – World Mental Health Day – Information stands for staff at each site
- February 2019 – Time to Talk Day – A series of events to help tackle the stigma around mental health including a tea and talk session and training sessions

Important equality and diversity dates have also been incorporated in to the Trust's Engagement Calendar.

11.2 International Recruitment

The demographic of the whole workforce is 88% White British which is only slightly lower than the population served by Sherwood Forest Hospitals NHS Foundation Trust which is 95% White. We positively embrace diversity and believe that a diverse workforce, which shares its knowledge and experience, facilitates the provision of high quality patient care. We actively attempt to recruit employees from outside the local area to strengthen diversity.

In 2018/19 we successfully recruited again from overseas for registered nurses and doctors. Cohorts of 20 nurses are in progress of arriving and all will be in place by summer 2019. We also continue to provide certificates of sponsorship for professional employees wishing to stay in the UK but move to the local area.

11.3 Translation Services

Throughout 2018/2019 thebigword have continued to provide our interpreting and translation services. The Nottinghamshire Deaf Society also provides a service for sign language. Divisional management secretaries are responsible for liaising with the supplier on a day to day basis and placing our bookings for face to face interpreting services.

We have also recruited a handful of staff volunteer interpreters during the year, but as yet we have not had a need to call on their services as the languages on offer are not often required.

We continue to maintain links with the Interpreting team at Nottingham University Hospitals (NUH) to discuss improvements which can be made to our services. They have also assisted us on a few occasions where we have been unable to obtain an interpreter in certain languages. The Interpreting Manager at NUH is also available as a support mechanism to our volunteer interpreters should this ever be required.

A draft Interpreting Policy has been developed but is yet to go through formal approval processes.

12.0 Safe Places

Kings Mill and Newark Hospitals are designated 'Safe Places' via the Patient Experience Offices. This is a Mencap scheme to provide safe places in the community where vulnerable people with learning disabilities can go if they get into trouble or feel unsafe, frightened or bullied. The Patient Experience team liaise with Mencap's Hate Crime Co-ordinator to report any contacts we receive as a 'Safe Place'

13.0 Objectives for 2018/2021

In order for us to continue delivering on the Equality and Diversity agenda for the Trust, the objectives for 2018/2021 that the Diversity and Inclusivity group will continue to work towards are as follows:

- To continue to ensure the Trust's services are fully accessible to all patients including making sure information and communication is accessible and specific to patient's needs in line with the Accessible Information Standards, by engaging with community groups and patients as necessary.
- To increase the number of staff who have self-reported equality data including disability and Sexual Orientation.
- Ensuring we comply with current legislation and public duty including EDS2, WRES, WDES and the gender pay gap to include enhancing the current EDS2 and WRES process by setting up working groups to review and analyse the data and create individual actions plans.
- To increase the knowledge of the Diversity and Inclusivity agenda across the Trust.
- To embed the 'Time to Change' mental health employee support across the Trust.

Rebecca Milner   **Robert Simcox**

Human Resources Business Partner   **Deputy Director of Human Resources**