



## Equality, Diversity & Inclusion 2017-2018



## FOREWORD

This Equality, Diversity and Inclusion Annual Report details the activities and work carried out by City Health Care Partnership CIC (CHCP) to enable the organisation to demonstrate its commitment to the equality and diversity agenda.

The Annual report will be submitted to the Executive Board and will be published on our equality and diversity web page.



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## **1. Introduction**

City Health Care Partnership CIC (CHCP CIC) is committed to developing, supporting and sustaining a diverse workforce that is representative of the community it serves. Equally we are committed to the provision of services that respects our increasingly diverse populations and which promotes equality of access and care. Our culture promotes equity and fairness for all in our employment and care and actively discourages any form of discrimination.

The organisation works closely with its partners and stakeholders to embed this culture in all contracts and partnerships.

## **2. Equality Strategy**

The Equality Strategy explains City Health Care Partnership CIC's commitment to promote equality in accordance to the equality act 2010 and the public sector equality duty. The strategy takes into consideration the organisations strategic objectives and the organisations values whilst also identifying the aim to deliver equality and fairness to all in our care and employ.

The strategy is refreshed three yearly but encompasses an action plan which is refreshed annually with the equality steering group monitoring its progress on a quarterly basis.

The group has identified that the strategy is no longer current with the organisations overall strategy, therefore this will be reviewed and refreshed over the coming year.

## **3. Equality and Diversity Steering Group**

The key activities and accomplishments of the steering group during the period of this report have been:

- Completed the Workforce Race Equality Standard (WRES) and published the results to the organisations web site.
- Submitted updated EDS2 standards report to the National Database
- Reported on the organisations Gender Pay Gap and uploaded full report to the organisations website
- Annual Report submitted to the Executive Board
- Monitored and updated the Equality Strategy action plan
- Monitored developments/improvements of each care groups against EDS2
- Retained Disability Confident Employer Status
- Reaccredited with the Investors in Diversity stage two Award
- Achieved White Ribbon Status
- Successfully employed three staff with learning disabilities/differences to paid employment
- Successfully completed the NHS Employers Partners Programme



## Objectives for 2018-2019

- Refresh Strategy
- Rebrand Equality and Diversity, to become Equality, Diversity and Inclusion
- Support with creating staff forums/networks for staff within protected characteristics
- Support the ongoing work with NHS Employers and NHS England ensuring compliance with the many national standards, including WRES, WDES, EDS2
- Work towards Disability Confident Leader
- Actively work to comply with Accessible Information Standards
- If successful in application support and monitor the progress of training package **(Apprenticeships for All)**
- Continue to support seeking employment for people with learning disabilities in line with the NHS employers initiative

### 4. Projects and Achievements

#### ***Differently Abled Event***

On Friday 9th February, the Wellbeing Service and the Carers' Information & Support Service joined forces to host the 'Differently Abled' event. The partnership working project - involving members of Humber NHS Foundation Trust, East Riding Carers Service, Hull & East Riding Councils and Hull & East Riding CCGs - successfully saw over 800 people visit the event which had over 85 services for people with a Learning Disability or Autism. Staff had the chance to network at the event, creating a wider knowledge base, as well as an opportunity for friends, family, carers and people with a learning disability/autism to see the wide range of services that're in our local area.

Some of the feedback from the day included;

***"A great variety of stalls, friendly advisors and staff providing plenty of information including leaflets, booklets etc. to take with you."***

***"The largest gathering of services I've ever seen. Very informative, excellent networking opportunities!"***

***"The atmosphere was buzzing. Lots of information and friendly people were there to talk to!"***

***"Knowledge and skills of the huge number of stalls and organisations were very impressive."***

This event was attended by over 800 people, many of whom had a learning disability and/or autism. There were over 85 stalls representing services to support people who are differently abled from birth through to end of life. These stalls were manned by over 200



staff and the event was supported by 70 volunteers including student nurses from Learning Disability and paediatrics, self-advocates and young people who are differently abled. Staff who attended the event hugely benefited from the networking opportunity and a greater awareness of what services are out there.

There has been a huge push to make this event an annual event, with East Riding CCG, HEY, Humber and Hull CC all expressing an interest in offering financial support. The second Differently Abled event will take place at Hull Venue on 14<sup>th</sup> February 2019.

### ***Downs Syndrome Pathway***

Anna Daniels, Clinical Trainer has worked with NHS Hull CCG in developing the Down's Syndrome Pathway to support people who have Down's Syndrome, and their families, carers and professionals to navigate services and identify health conditions early.

There are some health conditions that people with Down's syndrome have a higher chance of developing, and therefore the threshold for investigating these is lower than the general population of people who do not have Down's syndrome. The pathway is aimed at everyone who has an interest in health needs of someone who has Down's syndrome - from pregnant women expecting a child who may have Down's syndrome right through to older adult services.

The pathway was launched on World Down's Syndrome Awareness Day, 21<sup>st</sup> March 2018 with the morning being attended by people with Down's syndrome, Professionals, Voluntary groups, charities, families/carers and commissioners.

The evening session was an informal celebration attended by children, young people and their families to raise the profile of the pathway and come together to acknowledge World Down's Syndrome Awareness Day.

The pathway is a great example of co-production, and there was a real sense of partnership working at the consultation events and launch.

Since the launch the pathway has been presented to the Learning Disability Partnership Board and there is a meeting scheduled to present to Hull City Council 'Leaders meeting'.

A copy of the pathway can be found on the NHS Hull website under 'current projects' tab.

### ***End of Life Care***

Fiona Robinson, Clinical Team Leader for end of life services within CHCP, worked in partnership with a colleague from the university of hull to write an article 'Discharge from critical care into the community for end-of-life care. The article was published in the JCN. The article discusses the considerations and actions take to facilitate the discharged of a ventilated end-of-life patient from a critical care unit (CCU) to their expressed preferred place of care. The article focused on how care was provided by teams from primary and secondary care teams working together to facilitate the discharge giving the patient the wishes to die peacefully at home. The article focused on real care and following the episode



of care a root cause analysis was undertaken to capture lessons learnt for improvement for the process of discharge from CCU to the community.

### ***Health Awards***

A number of services provided by City Health Care Partnership CIC were nominated for a Hull Daily Mail Award, including: The Palliative Care Night Team, Palliative Care Team, Wellbeing service and Youth Employment Initiative

### ***NHS Employers Programme***

CHCP were one of forty NHS and Independent Health Providing organisations to be successful in securing a place on the 2017/2018 NHS Employers Partners Programme. The programme offers support to participating organisations by providing forums to share best practice and develop their equality and diversity performance focusing on four key modules:

- Equality standards in the NHS
- Capacity Building
- Delivery
- Evaluation

As an outcome of completing the programme work has now commenced to re-brand equality and diversity to being equality, diversity and inclusion. The aim is to show that the organisation is committed to becoming a diverse and inclusive employer engaging directly with staff from different groups across the organisation. One of the actions of the project is to introduce staff networks/forums for those who identify within any of the protected characteristics.

### ***Integrated Working - Primary Care Dementia Clinic Pilot***

Hull Clinical Commissioning Group trialled a new clinical model for the delivery of Memory Services to support the 300,000 population of the city, bringing together Humber NHS Foundation Trust, Carer Information Support Services, Alzheimer's Society, a GP (wsi) and a collective group of GP Practices in order to form a pilot project.

A member of the Carers Information Support Service has been assigned to work within the pilot to offer free advice and support to anyone providing a carer role over the age of 18. This support is offered at the initial appointment whilst the patient undertakes an assessment, follow up carers' assessment appointment is offered and subsequent carer support planning. A total of 66 carers received support from the Carers Information Support Service within the Primary Care Dementia Clinic Pilot.

### ***Anti-coagulation Self Monitoring Model***

The Anticoagulation service are proactive in considering different models of care to meet patient needs and ensure safe care. The service has a range of clinics 7 days a week across the city. Clinic appointments are also available 8am -6pm on certain days. Two patients have recently benefitted from a self-monitoring model.



Both patients prescribed warfarin and unable to attend any of the appointments arranged to monitor their blood levels. This was due to very busy work and family life, often unable to leave work to attend and worried about losing their jobs. Due to a lack of monitoring this led to unstable blood levels. It was very important for the warfarin and blood levels to be monitored to prevent any risks and further health problems. To resolve this the patients were offered a self-monitoring device and education so that the patient could monitor their own blood levels. Contact is then made with the service by telephone for medication dosing advice. Both patients willingly engaged with this option and continue to self-monitor maintaining contact with the service. The patients continue with their busy personal lifestyles and has resulted in safe stable blood levels.

## **5. Workforce Profile**

This section of the report provides detailed information about CHCP employees which has been taken from the Electronic staff records

The information looks in detail at numbers of staff in post and provides information related to age, gender, ethnicity, religion, disabilities and sexual orientation and staff groups across CHCP CIC as at 31 March 2018.

The report also takes into consideration the Gender Pay Gap, new legislation introduced in 2017 whereby all Employers who have a workforce of over 250 employees are required to publish gender pay gap data on an annual basis. The legislation was brought in, in April 2017 giving a year for employers to prepare and publish their first reports by 31<sup>st</sup> March 2018.

The Gender Pay Gap is not to be confused with equal pay which is unlawful practice of paying men and women differently whilst working in the same or similar roles. It looks at women working in lower paid occupations and occupying less senior roles comparing to the men working within the organisation.

There are six calculations to report which include:

- The mean gender pay gap
- The median gender pay gap
- The mean bonus gender pay gap
- The median bonus gender pay gap
- The proportion of males receiving a bonus payment
- The proportion of females receiving a bonus payment
- The proportion of males and females in each quartile pay band

The calculations are based on basic pay and within the Electronic Staff Records a reporting tool has been developed which sits within the workforce profile dashboard this tool will pull the required data.

CHCP CIC met our statutory obligation to report our gender pay gap in March 2018 and reports the organisation has a Gender Pay Gap of 15.3%, which is lower than the national





average of 18%. An outcome of this report would be to promote and support Gender Pay Gap through recruitment processes with the aim being to reduce the gap.

- *Age Profile*

There has been a shift in the data for the workforce against the age ranges reported on with 26 – 30 and 36 – 40 both equally being the group with the highest number of staff, the headcount of which is 288. The second highest group is 36 – 40

In previous years the age group 51 – 55 has been the most dominant group, however for this reporting year the numbers have reduced and this groups sits as the 5<sup>th</sup> highest group with a headcount of 224. This is only a slight reduction in headcount, the previous year this was 227,

The age group 71+ continues to be the lowest with a headcount of just 2, this has decreased since the previous year by 1.

- *Gender Profile*

This year's reporting is consistent with previous ones with females reporting as 88% of the workforce with a headcount of 1802, headcount for males is 243

- *Ethnicity Profile*

The majority of staff within the organisation report as being White (90.66%), this is an increase on last year which reported as (89.4)%

The number of people choosing not to state their ethnicity has remained consistent with 2017 reporting with a percentage of 7.14%

There is just 2% of the workforce that reports as being of a Black and Asian Minority Ethnicity (BAME)

- *Religion*

The data provided as at 31<sup>st</sup> March 2018 shows that the majority of staff choose not to disclose their religion (55.99%), a reduction from 2017 reporting which showed (69.32%) as choosing not to declare.

Out of the 900 headcount declaring their religion, 613 (29.97%) reported as Christianity, a big increase on the previous year of (20.61%)

- *Disability*

Although this reporting year saw a slight increase to the number of staff reporting a disability, the numbers are still very low, a head count of (40) giving a percentage (1.9%) The increase is seen as being due to the increase in the workforce. There are still a significant percentage of staff (33.9%) choosing not to declare, however it has been identified that this may be due to the history of the data within the ESR records, and for the year 2018/19 it is suggested that staff are encouraged to update their personal information within the system

- *Sexual Orientation*



Over half (50.70%) of the workforce have chosen not to declare their sexual orientation and the majority of the remaining staff (48.41%) have identified themselves as being heterosexual.

The report shows that the numbers choosing not to declare has decreased since 2017 (64.91%) which was the first year reporting the data. There has been an increase in the workforce identifying as Bisexual (0.09%), Lesbian (0.29%) and Gay (0.48)

These are positive results and it is hoped that by introducing staff network forums individuals will be more open about declaring their sexuality going forward.

## 6. Monitoring of Complaints by Ethnicity

Row Labels	Comment	Complaint	Compliment	Concern	Grand Total
Bangladeshi				1	1
Black African				4	4
Black Caribbean				3	3
Chinese	1				1
Indian		3		5	8
Mixed White and Asian		1	1	5	7
Mixed White and black African		1		11	12
Mixed White and Black african				1	1
Not stated	17	81	141	514	753
Other Asian			2	3	5
Other Black				2	2
Other ethnic category		5		12	17
Other mixed				68	68
Pakistani		1		5	6
White - British	8	26	82	835	951
White – Irish				4	4
White – Other White		2	2	33	37
Grand Total	26	120	228	1506	1880

## 7. Human Resource Activity

### a. Training



The organisation reports that 89% of staff are compliant with the Equality and Diversity training, which is an increase of 2% from the previous year.

#### b. Colleague Survey

The colleague survey results for 2018 show that 69.4% of the workforce believe that CHCP act fairly with regard to career progression/promotion regardless of ethnic background, gender, religion, sexual orientation, disability or age. There were 4.6% that did not agree with this statement, the remaining 25% declared they did not know. These findings show a decrease when comparing with 2017 results in which 75% believe the organisation acted fairly.

When responding to whether colleagues had personally experienced discrimination in the work place by either patients/service users or managers/colleagues, the responses appear high with the total from both categories being 6.4%, (3.1%) of these were reported as being discriminated against by managers/colleagues. When breaking down the data in respect of protected characteristics the two categories reporting the highest were: Gender with 1.3% and Age with 1.2%. There were 3.1% that declared being discriminated against for other reasons, however no reasons were given. The findings show that overall there has been a slight decrease in colleagues experiencing discrimination, with 2017 reporting as 8%. Unfortunately the methodology used in capturing the data from the previous year does not allow for comparison against each protected characteristic but it did identify the highest category being age discrimination.

#### c. Policies relating to equality and diversity include:

All Human Resource Policies go through a process of review, which includes sign off by the policy development group, and consultation with staff. The following policies all relate to equality and diversity:

- Recruitment & Selection Policy
- Flexible Working Policy
- Grievance Procedure (now incorporates Bullying & Harassment)
- Family Leave Policy inclusive of Maternity, Paternity and Adoption
- Equality Policy
- Whistleblowing Policy
- Supporting Employee Attendance Policy