

Meeting Title	Board of Directors		
Date	23.9.21	Agenda item	Bo.9.21.20

Strategic Equality and Diversity Council July 2021 Update

Presented by	Mel Pickup – Chief Executive Officer		
Author	Kez Hayat, Head of Equality, Diversity and Inclusion		
Lead Director			
Purpose of the paper	<p>The purpose of this report is to:</p> <p>Update the Trust Board on the work of the Equality and Diversity Council and provide an overview of the key areas of focus since our last update in July 2021.</p>		
Key control	Identify if the paper is a key control for the Board Assurance Framework		
Action required	To note		
Previously discussed at/ informed by			
Previously approved at:	Academy/Group	Date	

Key Options, Issues and Risks

The Trust's Equality and Diversity Council (EDC) was developed in January 2021, the first in our Trust history which has a remit for both workforce and wider health inequalities in the district.

Our July 2021 report gave an overview of the last two EDC meetings that took place in May 2021 and July 2021. Since our last report EDC met on 8th September 2021.

As agreed at the May 2021 Trust Board a regular update will be provided on the progress of EDC and any areas for discussion or approval.

Analysis

Having a strategic Equality and Diversity Council chaired by the CEO, puts the Trust in a strong position of influence and action. We have good infra-structure and strong foundations in place which will enable us to improve our performance and advance equality, diversity and inclusion across the Trust both for our diverse workforce and our diverse patients and communities across the district.

Our staff equality networks who bring a range of knowledge and powerful lived experience are key members of EDC. The Trust has engaged well over the last year with members of our staff equality networks who are now actively influencing the equality agenda at EDC meetings. Specific agenda time has been allocated to all three networks at each meeting and this will remain in going forward. EDC recognises and acknowledges the important work of our staff networks and ensures they have a clear voice at this strategic meeting.

EDC are in the early stages of developing a work programme, once agreed this will be shared across the Trust.

Recommendation

It is recommended that the Trust Board:

1. Note the contents of this report
2. Support the proposed areas of work identified in section 3.1

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Risk assessment						
Strategic Objective	Appetite (G)					
	Avoid	Minimal	Cautious	Open	Seek	Mature
To provide outstanding care for patients			g			
To deliver our financial plan and key performance targets			g			
To be in the top 20% of NHS employers					G	
To be a continually learning organisation				G		
To collaborate effectively with local and regional partners					G	
The level of risk against each objective should be indicated. Where more than one option is available the level of risk of each option against each element should be indicated by numbering each option and showing numbers in the boxes.	Low		Moderate	High	Significant	
	Risk (*)					
Explanation of variance from Board of Directors Agreed General risk appetite (G)						

Benchmarking implications (see section 4 for details)	Yes	No	N/A
Is there Model Hospital data relevant to the content of this paper?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Is there any other national benchmarking data relevant to the content of this paper?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Is the Trust an outlier (positive or negative) for any benchmarking data relevant to the content of this paper?	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>

Risk Implications (see section 5 for details)	Yes	No
Corporate Risk register and/or Board Assurance Framework Amendments	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Quality implications	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Resource implications	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Legal/regulatory implications	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Diversity and Inclusion implications	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Performance Implications	<input type="checkbox"/>	<input checked="" type="checkbox"/>

Regulation, Legislation and Compliance relevance			
NHS Improvement: (please tick those that are relevant)			
<input type="checkbox"/> Risk Assessment Framework		<input type="checkbox"/> Quality Governance Framework	
<input type="checkbox"/> Code of Governance		<input type="checkbox"/> Annual Reporting Manual	
Care Quality Commission Domain: Well Led			
Care Quality Commission Fundamental Standard: Good Governance			
NHS Improvement Effective Use of Resources: People			
Other (please state):			
Relevance to other Board of Director's academies: (please select all that apply)			
People	Quality	Finance & Performance	Other (please state)
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

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1	PURPOSE/ AIM
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The purpose of this report is to:

- Update the Trust Board on the work of the newly developed Equality and Diversity Council and provide an overview of the key areas of focus since our last update in July 2021.

2	BACKGROUND/CONTEXT
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2.1 There are a number of national levers and drivers that give us a clear direction for delivering equality, diversity and inclusion. These include the legal framework, the NHS constitution, including our contractual obligations namely, on race, disability and gender equality. Furthermore there is significant focus on improving population health inequalities with focus on our role as an acute hospital in reducing these inequalities.

2.2 The Trust has significant policy and practice in place in line with the above legislative requirements and has been reported to the Trust Board previously in terms of the Trust's performance and progress. EDC will also receive regular reports and updates on the Trust's performance on equality, diversity and inclusion.

2.3 The Role, Remit and Purpose of EDC

2.4 The overall vision for EDC is 'to advance workforce equality and tackle wider health inequalities with the district.

2.5 The role and purpose of EDC is to enable the Trust Board to identify its responsibilities for the Diversity and Inclusion agenda and provide strategic direction, leadership and support for promoting and maintaining equality, diversity and inclusion across the Trust with sharper focus on the following:

- NHS People Plan 2020/21 including the West Yorkshire and Harrogate Health and Care Partnership response to the national people plan with particular emphasis on 'Belonging in the NHS' highlighting the support and action needed to create an organisational culture where everyone feels they belong by building on the motivation at the heart of our NHS to look after and value our people, create a sense of belonging and promote a more inclusive service and workplace.
- The West Yorkshire and Harrogate Health and care Partnership – Tackling health inequalities for BAME communities and colleagues, a range of recommendations focussing on race equality in the workforce and wider population health inequalities.
- Implementing phase 3 of the NHS response to the COVID-19 pandemic
- Tackling wider health inequalities that exist within our district, with focus on our role as an acute hospital

EDC will maintain a strategic overview of the Trust's Diversity and inclusion agenda/objectives ensuring these are fit for purpose and aligned with national and regional priorities, with a view to assessing their adequacy to provide a positive working environment

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for staff, to enable the provision of high quality care and good clinical outcomes for patients and communities.

2.6 EDC Membership

Membership of EDC has been carefully selected to ensure the representation of EDC reflects the wider core-functions of the Trust including external system partners who have a remit in tackling health inequalities. This membership is continually reviewed to ensure we have the right people present at each meeting.

- 2.7 The chair of EDC shall be the CEO who has also been assigned as the Executive Sponsor for Diversity and Inclusion across the Trust and also is the Trust Lead for health inequalities within the District.
- 2.8 The Trust's three staff equality networks, Race Equality Staff Inclusion Network (RESIN), Enable and LGBT are represented at EDC which ensures that our staff networks have a voice at this strategic meeting but more importantly they are actively influencing the Trust's Diversity and Inclusion agenda.
- 2.9 EDC will work to bring people and organisations together to realise the vision for a personal, fair and diverse health and care system, where everyone counts and NHS values are brought to life. It helps improve the access, experiences and health outcomes for all patients and communities, and to support us to become a more inclusive employer by making full use of the talents of our diverse staff and the communities we serve.
- 2.10 The first meeting of the Equality and Diversity Council took place on 26th January 2021. An updated was provided to Trust Board in May 2021 about this initial meeting and the subsequent meeting which took place in May 2021 and July 2021. EDC will meet quarterly going forward.

3 PROPOSAL

3.1 Summary of agenda items and actions arising from EDC since the last Trust Board update provided in July 2021

A range of areas are currently being explored by EDC and since its inception a range of agenda items and discussions have taken place. The table below captures some of the discussions from the meeting which took place on 8th September 2021.

8 th September Meeting 2021
<ul style="list-style-type: none"> Mel gave a brief overview of the "Reach in – Reach Out" initiative. Cat Shut to provide a more detailed overview at the next EDC. Sohail Abbas gave a presentation on the "Reducing Inequalities Alliance". He confirmed they are moving away from an "Academy" approach and are looking to bridge the gaps between civic, community centred and service based interventions to address health inequalities in the Bradford and Craven district. Sohail shared 3 questions for EDC members to provide their feedback to the Reducing Inequalities Alliance:

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- 1- How do inequalities impact on your area of work?
- 2- What are the challenges and obstacles you face in your work towards reducing inequalities?
- 3- How could Inequalities Alliance help and add value in overcoming those challenges?

Mel challenged all to consider how inequalities can be addressed incrementally to improve life chances (consider every interaction and engagement opportunity)

- Dinesh Chawla (Service Improvement Lead) gave a presentation on the goals of the “Patient Optimisation Programme” which is looking at how we maximise services (pre-operative care and guidance) to ensure people are at their physical and mental best to get the best out of surgery. The workstreams they are focussing on are:
 - Fit for referral
 - Pre-operative assessment
 - Prehabilitation
 - Health Inequalities and Waiting Lists
 - Improving Patient Information

Evidence has shown that this type of programme can have positive results for cancer patients. EDC discussed how we can utilise and learn from patient experience and complaints in some of these activities.

- Kez updated EDC on the “Root out Racism” movement. He shared images of the launch event which took place on 23rd August and informed EDC what will happen next in terms of planning, comms and future events and the links to some of the upcoming work in the Trust around:
 - Civility in the Workplace (a report to be presented to ETM with proposals)
 - Progress on our WRES action plan
 - Wider focus on inclusion and belonging
 - Roll out of anti-racism training (awaiting launch of the national toolkit)
 - Work with the Race Equality Staff Inclusion Network (formerly BAME staff equality network)
- Kez presented a paper on protected time for Staff Networks. EDC agreed to 4 hours per month to support the work of the Chair, Deputy Chair and communications officer to ensure the networks are thriving and their work is aligned to regional and national ambitions around EDI. He emphasised the crucial roles network will play in realising the aims of the NHS People plan (inclusion and belonging agenda). Kez also informed EDC that discussions are taking place around the introduction of a medical & dental sub group to the Race Equality Staff Inclusion Network. Staff Networks will be refreshed and re-launched with some targeted engagement in October 2021.
- The Race Equality Staff Network generated discussions around the review of the Recruitment & Selection policy and Kez gave an update on some of the positive changes that are being made as part of that review.
- Kez gave an update on behalf of the LGBT+ and Enable staff networks (who were unable to attend on this occasion). To build on the excellent progress made by the new chair of the Enable staff network; Kez confirmed plans for some targeted comms and engagement in the coming weeks, and announced the appointment of a new EDI colleague who will be focussing on ensuring all our networks are thriving. Progress on this to be reported at the next EDC.

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3.2 Next EDC is due to take place on 1st December and the agenda for the next meeting is currently being developed.

4 RECOMMENDATIONS

It is recommended that the Trust Board:

1. Note the contents of this report
2. Support the proposed areas of work identified in section 3.1

5 Appendices

N/A