

Meeting Title	Board of Directors		
Date	10 March 2022	Agenda item	Bo.3.22.13

## Strategic Equality and Diversity Council March 2022 Update

Presented by	Mel Pickup – Chief Executive Officer		
Author	Kez Hayat, Head of Equality, Diversity and Inclusion		
Lead Director			
Purpose of the paper	The purpose of this report is to:  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 September 2021.		
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			
<p>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.</p> <p>Our September 2021 report gave an overview of the last EDC meetings which took place on 8<sup>th</sup> September 2021. Since our last report EDC met on 1<sup>st</sup> December 2021.</p> <p>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.</p>			
Analysis			
<p>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.</p> <p>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.</p> <p>EDC are in the early stages of developing a work programme, once agreed this will be shared with relevant colleagues to ensure EDC business is aligned to other key areas of activity.</p>			
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			
<b>NHS Improvement: (please tick those that are relevant)</b> <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

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 September 2021.

## 2 BACKGROUND/CONTEXT

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.

EDC will maintain a strategic overview of the Trust's Diversity and inclusion agenda/objectives ensuring these are fit for purpose and aligned with local, regional & national priorities for EDI, with a view to assessing their adequacy to provide a positive working environment 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. The Race Equality Staff Inclusion Network (RESIN), Enable and LGBT networks are all represented at EDC which ensures that our

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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 Jon Prashar and Selina Ullah were assigned as dedicated Non-Executive Directors who attend EDC on a regular basis. Selina Ullah has now left the Trust and Sughra Nazir, newly appointed NED has been assigned to replace Selina.
- 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.

### 3 PROPOSAL

- 3.1 Summary of agenda items and actions arising from EDC since the last Trust Board update provided in September 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.

Work is currently under way to agree a workplan for EDC with a schedule of confirmed agenda items to ensure the agenda is representative of the overall aims of EDC in going forward.

The table below captures some of the discussions from the meeting which took place on 1<sup>st</sup> December 2021.

1 <sup>st</sup> December Meeting 2021
<p><b>“WRES, WDES and GPG – Update on action plans – what have we achieved and what’s coming up?”</b></p> <p>Kez gave an in depth presentation outlining some of the key highlights including some measurable areas of progress towards the Workforce Race Equality Standard (WRES), Workforce Disability Equality Standard (WDES) and the Gender Pay Gap (GPG) and also some key areas for action. The presentation outlined a wealth of activity, including a number of unique initiatives that are successfully under way and included what we will be focussing on next in our EDI journey.</p> <p>The timing of Reciprocal Mentoring was discussed and many felt that there was a challenge for some staff to submit the application at this point in time due to current workloads. It was agreed that staff would be invited to submit expressions of interest at this stage with a view to submitting an application form at a later date.</p> <p>Proposals made to increase representation of our senior management team by introducing a BTHFT degree level management apprenticeship and a BTHFT BAME fellowship for the internal development of our own staff.</p>

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### **“Health inequalities and the Act as One diabetes programme”**

John Holden, Director of Strategy & Integration introduced himself in his role as Senior Responsible Officer for the Act as One diabetes programme and John was welcomed as a new member of EDC.

John gave an inspiring presentation outlining the outcomes driven work of the Act as One diabetes programme.

John gave an overview of how this programme fits with “Act as One”, where Health and Care organisations work collaboratively across Bradford District and Craven to improve access to services and with focus on 6 priority population health programmes. The “Act as One” diabetes programme is one of these 6 priority population health programmes. John explained that the programme is held to account by the Health & Care Partnership Board which is chaired by Mel Pickup.

John outlined the main focus of the programme and how they are working to address inequalities in both access and health outcomes for diabetes patients and how services across the district can be more effective by having shared objectives and tailoring their approach to the inequalities identified (resulting from mental illness, learning disability, deprivation and ethnic diversity).

The programme brings together experts from across the system who have developed an inequalities profiling dashboard to continuously measure access to services, so targeted work can be continuously adjusted increase take up of care and improve outcomes for those people that need it most.

John outlined what activity has been taking place around the 5 work-streams for the diabetes programme and how they are working to ensure those who need it most are engaging with the programme:

- Prevention
- Quality primary care
- Multidisciplinary community care
- Podiatry

Awais Habib has been supporting the community engagement programme in his BAME fellowship role, engaging with e.g. the Bangladeshi community to understand their specific needs and lived experiences.

John also talked about the formal launch of the Act as One partnership with diabetes UK with shared priorities, particularly around health inequalities.

John then led some lively discussion around the prevention agenda and there were some useful connections made to feed into the programme.

### **“Staff equality networks – next steps”**

Sonia Sarah introduced herself to EDC as the new Equality, Diversity & Inclusion Manager with a key remit on staff and community engagement, and the development of the BTHFT staff equality networks.

Sonia gave an overview of her paper submitted to EDC around the wider plans in reviewing and refreshing the Trust staff equality networks.

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Meetings are taking place with existing network members to carry out a needs analysis. Sonia highlighted a funding bid has been submitted to the WDES innovation fund, which will allow us to focus on further developing the Enable staff network (this bid has subsequently been successful).

Sonia talked about some of the excellent engagement work she has joined with the Organisational Development team and SPARC team, which has led to a number of staff coming forward with a keen interest in joining and growing the LGBT staff equality network.

Work is ongoing to gauge interest in developing a new medical & dental ethnic minority staff equality network. However, the challenges of the pandemic have slowed progress on this work which requires further engagement.

The paper covers next steps which include;

- liaison with members of the existing networks
- re-energising interest with publicity materials
- generating interest in roles on the network core groups (e.g. chair, deputy chair)
- reviewing and refreshing the terms of reference
- developing work plans
- formal launch of the refreshed networks in the new year.

The paper was met with positivity from the RESIN chair who has circulated it to members for comment.

EDC noted the value of the staff equality networks and agreed to support the suggested next steps, including a relaunch of the networks

**Enable and LGBT Staff Networks:** Specific targets and dates now in place to ensure continual progress on disability equality. Nas Bibi has been working with Sonia Sarah and the network around a piece of engagement work “life through my eyes” as part of disability history month and is working to ensure the network is a place where members can share their experiences and gain support from each other.

RESIN welcomed Nas’ invitation for the networks to work collaboratively with Sonia and to work on some patient engagement together to identify areas for action.

Nas made connections in the meeting around bridging the gap for access to appropriate healthcare for those with neurodiversity. Nas felt there was a lack of support available because of the complexity of needs. She suggested further research on how we identify and address these needs.

**Race Equality Staff Inclusion Network:** Ami expressed gratitude from the network around the Trust response on the Root out Racism movement. There was some discussion around a potential response from the Trust to the allegations at Yorkshire Cricket Club. There was agreement that the BTHFT commitment to Root out Racism and some of the ongoing actions we are taking (including the establishment of EDC, the development and action around WRES, support of the trust equality networks and plans for anti-racism training) should continue to be promoted to ensure staff are assured that this is constantly on the agenda not just as a reaction to what is happening outside the Trust.

Kez confirmed that the networks will be approached to be involved in the development of the anti-racism training.

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**LGBT staff equality network:** Kez reported that five new members have come forward with a keenness to be involved in the re-launch of the lgbt staff equality network and it is hoped there will be a regular representative at EDC for future meetings.

**Any other business:**

**“Award Nominations”:** At the last meeting EDC members were urged to make nominations for WY&H HCP Inclusion week awards. Our EDI unit were nominated along with Mel Pickup and Karen Dawber who were recognised at a regional level for their leadership during the pandemic. Our chaplaincy service won their award in recognition of their ground breaking and tireless work during the pandemic.

The Trust were also nominated at the Nursing Times Awards for our approaches to Equality, Diversity & Inclusion.

**3.2** Next EDC is due to take place on 15<sup>th</sup> March. Agenda for this and subsequent meetings for 2022 are 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