Sheffield City Council

Sheffield Health and Social Care **NHS**
NHS Foundation Trust

Annual Equality and Human Rights Report 2015 – 2016

Contents

Introduction

The Equality Act 2010 includes the 'Public Sector Equality Duty' which applies to a number of public sector organisations including NHS Foundation Trusts. The Public Sector Equality Duty means that Sheffield Health and Social Care (The Trust) must have *'due regard'* to:

- Eliminate discrimination, harassment, victimisation and any other conduct that is prohibited by the Equality Act 2010

- Advance equality of opportunity between people who share a relevant protected characteristic and people who do not share it, and

- Foster good relations between people who share a relevant protected characteristic and people who do not share it.

Protected Characteristics are:

- Age

- Disability

- Gender Reassignment

- Marriage and Civil partnership

- Pregnancy and Maternity

- Race

- Religion or Belief

- Sex

- Sexual Orientation

This duty applies to the Trust as an employer and as a provider of services and also when the Trust is undertaking any other significant activities.

The Trust also has what are known as 'specific' legal duties these include a duty to identify and publish 'Equality Objectives' and a duty to report at least annually on the progress the Trust is making on meeting the Public Sector Equality Duty.

This report provides information about activity the Trust has undertaken between the 1st of April 2015 and the 31st of March 2016 to support these duties. The report also includes an update on

progress the Trust has made towards achieving the Trust Equality Objectives; these were first identified and published in April 2012.

This report should be read alongside other reports that the Trust produces which are also relevant to Equality, Inclusion and Human Rights these include:

- The Sheffield Health and Social Care Annual Report

- The Sheffield Health and Social Care Quality Report

- The Sheffield Health and Social Care Business Plan

- The Sheffield Health and Social Care report on membership activities

- The Workforce Race Equality Standard Report 2015.

Detailed background information is published in the Supplementary Information document which is published at the same time as this report; this is intended to complement this report and should be considered as an appendix.

Eliminating Unlawful Discrimination, Harassment and Victimisation

We review all our written policies to ensure that they do not unlawfully discriminate and are written so that wherever possible they promote equality. When we are undertaking equality analysis we also aim to consider Human Rights and Health Inequalities.

In 2015/16 we:

- Consulted on our Zero Tolerance of Harassment Third Party) Policy, which is being updated.

- We agreed that we would incorporate Human Rights into the Trusts new policy on meeting the requirements of the new Mental Health Act Code of Practice.

- Agreed to develop a Problem Resolution Framework (see below for more details)

Written policies are published on our main web site. The Equality Impact Analysis (EIA) for each policy and review of compliance with Human Rights can be found as appendices in the policy.

http://www.shsc.nhs.uk/about-us/policies

Moving Forward Equality of Opportunity

In 2015/16 we prioritised the following areas:

- We continued to take forward the Trust Strategy to Promote and Improve Equality Diversity and Inclusion for Black Asian and Minority Ethnic Staff and Service Users.
- We worked with other Trust in Yorkshire and the Humber to review the information we have about the experience of staff that have a disability
- We undertook work to implement the Accessible Information Standard

Trust Strategy to Promote and Improve Equality Diversity and Inclusion for Black Asian and Minority Ethnic Staff and Service Users

In 2015/16 we made good progress on our strategy action plan:

- We delivered two Race Equality Cultural Capability Courses (RECC) we have now delivered this course to over 70 senior staff in the Trust.

- Five Board members took part in the trust mentoring project overall this has involved 10 senior BME staff being involved in mentoring. This project is currently being evaluated and plans are being developed to extend the project.

- A number of BME staff network group members attended the NHS BME network conference and since returning they have met to discuss how to develop the trust network further including development of a communication plan.

Working other Trust in Yorkshire and the Humber to review the information we have about the experience of staff that have a disability

This builds on successful work that was undertaken before the introduction of the workforce race equality standard. NHS England are aiming to introduce a similar standard for disability to prepare for this a group of NHS trusts are reviewing their current policies on supporting staff with a disability and also comparing the results of the NHS staff survey i.e. the experience of staff who have a disability compared to staff who do not. This work is already roving useful in providing a foundation for action for improvement.

Implementing the Accessible Information Standard

This is discussed in detail in the section about out equality objectives.

Fostering Good Relations

Working in partnership continues to be an area that the trust sees as essential to supporting equality and inclusion for staff and service user, in 2015/16 we worked in partnership to foster good relations including the following:

Engagement with Sheffield City Council Equality Hubs

Sheffield City Council have established a set of Equality Hubs to engage with a range of stakeholders that have an interest in equal opportunity for people in groups protected under equality legislation. The Trust aims to support the work of the Hubs, for example in 2015 a number of hubs identified health as a key issue, a stakeholder health event was organised by Sheffield City Council. The Trust attended and supported the event; the Trust provided a presentation to the LGBT hub regarding mental health and attended the women's hub to support a focus on health.

Sheffield Hallam University Student Health and Wellbeing Board.

A student Health and Wellbeing Board has been established in the city, the Trust is a member of this new Board and plans to do what it can to support its objectives.

Equality Engagement Group

The Trust remains and active member of the Sheffield Equality Engagement Group, in 2015 the trust provided input into this group which included:

- Providing information to the group members about health policies
- Providing a contact point for raising concerns and issues
- Working in partnership with other health service providers and Sheffield City Council

City Wide Carers Strategy

The Trust was involved in development of the new Carers Strategy for the city.

Health Inequalities

The Trust worked in partnership with public health to look at areas relevant to groups that might be affected by health inequalities; this was linked to project work being undertaken as part of the Sheffield Health and Wellbeing Board city plan for action to 'Improving access to services in order to reduce health inequalities'.

Equality Objectives

Introduction

This section of the report provides information about progress the Trust has made to meet our Equality Objectives and plans we are taking forward to update these in 2016.

Identifying and progressing our equality objectives

We are undertaking a detailed review of our equality objectives, we will agree and finalise new priorities across protected characteristic groups and publish a separate detailed report in 2016.

Review of our objectives involves a detailed analysis of the information we have regarding gaps and priorities using the Equality Delivery System 2 as a framework and including discussion and feedback from the Sheffield Equality Engagement Group, Sheffield City Council Equality Hubs, SHSC staff side and Governors and with members of the Trust executive group.

Areas we are already considering include:

Race

- Objectives linked to the Trust Workforce Race Equality Standard metrics (see the Trust 2016 WRES report and action plan for details)

- Specific improvement targets for Ethnicity reporting for service users in terms of numbers and scope

- Review access and use of mental health services in acute and community settings through a on 'Knowledge Mobilisation' project.

Sex

- Taking forward Gender pay gap analysis.

Sexual Orientation

- Specific improvement targets for Sexual Orientation Reporting

- A 'shared' Equality Objective through the Equality Engagement group EDS2 review on:

- o Training for staff working in services working with people in older age groups raising awareness of the needs of service users from the LGBT community and where appropriate end of life care considerations.

Disability

- Specific improvement targets for Disability Reporting for staff and service users

- Implementation targets for the Accessible Information Standard (for example, access to relevant information and needs recorded)

- Shared Equality Objectives through the Equality Engagement group EDS2 review on:

  - o Health information to the Deaf community in Sheffield

  - o Providing targeted advice on cancer screening to specific groups including mental health and learning disability service users

- Widening participation targets for groups underrepresented in our workforce or specific groups

- Identification of relevant objectives linked to a new standard proposed by NHS England, the 'Workforce Disability Standard'.

Gender Reassignment

- Responding to relevant aspects of the Government Women and Equalities Committee report on Transgender Equality which includes specific considerations relevant to health.

Pregnancy and Maternity

- Review potential action based on the proportionately high use of maternal mental health services by women from Black Asian and Minority ethnic groups

All Groups
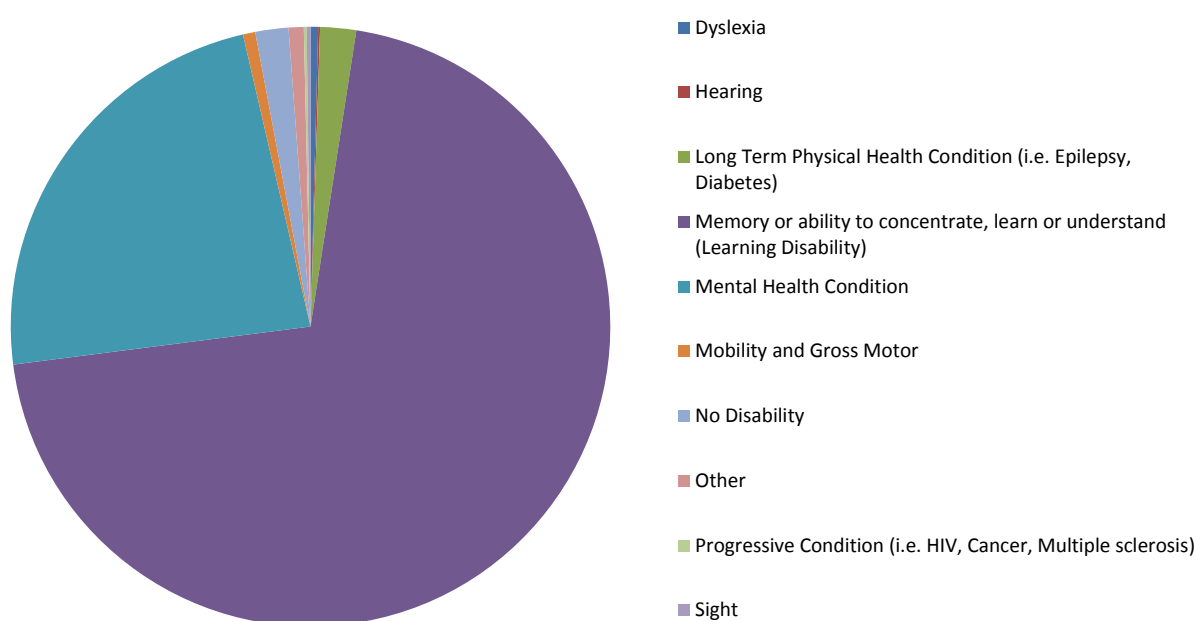
- Ensure that at least one local objective has been identified in each directorate in terms of service development or delivery.

The report referred to above will include detailed information about these areas and why we have decided these as specific areas to focus on , including the information we have used to review these areas and the process of consultation and engagement we will have completed to agree final priorities and specific targets.

The following section provides an overview of the progress we have made to date with our existing equality objectives

Equality Objective 1   Improve How We Record When Service Users Have Physical Impairments

To achieve this objective we updated our recording systems and briefed staff. In our last report recording was so low that we could not provide a report but in 2015 recording disability had significantly improved. Records are now available for 1966 people who use our services. The chart below shows a breakdown.

- Dyslexia
- Hearing
- Long Term Physical Health Condition (i.e. Epilepsy, Diabetes)
- Memory or ability to concentrate, learn or understand (Learning Disability)
- Mental Health Condition
- Mobility and Gross Motor
- No Disability
- Other
- Progressive Condition (i.e. HIV, Cancer, Multiple sclerosis)
- Sight

Plans were also put in place to achieve the Accessible Information Standard this requires the trust to identify where a service user has a need linked to a disability. In 2015 we:

- Updated the system we use to record information about the people who use our services so that needs can be recorded where someone has a disability.

- Worked with a social enterprise, Sheffield City Council and Disability Sheffield in supporting the introduction of a Disability 'Access Card' in the city.

- Reviewed how the trust could meet the needs identified under the accessible information standard.

- In 2016/17 we plan to introduce a new web site to support staff with advice about meeting the standard for people using our services.

Equality Objective 2 - Improve How We Record Sexual Orientation

To achieve this objective we also updated our recording systems and briefed teams to record sexual orientation. Recording remained low in 2014/15 but had started to improve, this improvement has continued in most services in 2015. The table below shows the percentage not recorded, improvement shows as a reduction in this percentage. Recording remains low but in most services but there has been a year on year increase in recording.

Sexual Orientation Field Percentage Blank								
	Gender Identity Service	Learning Disability Service	Mental Health Service	Perinatal Mental Health	Substance Misuse Service	Eating Disorders Service	Improving Access to Psychological Services (IAPT)	Average for All
2015/2016	93.60%	84.18%	90.76%	97.42%	98.10%	56.35%	97.32%	94.68%
2014/2015	97.68%	90.21%	92.71%	96.71%	98.45%			95.15%
2013/2014	99.00%	96.00%	95.00%	96.40%	99.30%			96.30%
2012/2013	99.20%	96.90%	95.60%	97.00%	99.40%			96.80%

Equality Objective 3 - Improve Staff Satisfaction for Staff from Black and Minority Ethnic Groups

The Trust Strategy to Promote and Improve Equality Diversity and Inclusion for Black Asian and Minority Ethnic Service Users and Staff has been put in place and supports this. This objective has also been supported by the introduction nationally of the Workforce Race Equality Standard (WRES).

The Trust will publish its second WRES report by the 1st of August 2016, along with a detailed set of targets supported by an action plan.

Originally we intended to complete a second staff survey following the survey we undertook in 2012 that led to this objective being set. However the WRES programme includes a new staff survey report that provides a comparison between White staff and BAME staff experience.

The Trust staff survey results are provided in the table below – we have identified a detailed action will be published alongside the trust WRES report in 2016.

WRES Metric Five - *Percentage of staff experiencing harassment, bullying or abuse from patients, relatives or the public in last 12 months*

	SHSC 2015 STAFF SURVEY	AVERAGE (MEDIAN) MENTAL HEALTH	SHSC 2014 STAFF SURVEY
White	35%	32%	29%
BAME	27%	37%	33%

In 2014 more BAME staff than White staff (who completed the staff survey) reported a negative experience.   In the 2015 staff survey the percentage reporting a negative experience reduced, it is also lower than for White staff and below the average for Mental Health in 2015.

WRES Metric Six - *Percentage of staff experiencing harassment, bullying or abuse from staff in last 12 months*

	SHSC 2015 STAFF SURVEY	AVERAGE (MEDIAN) MENTAL HEALTH	SHSC 2014 STAFF SURVEY
White	27%	21%	18%
BME	15%	23%	21%

In the 2015 staff survey the percentage of staff from BME groups reporting a negative experience reduced , it was also lower than for White staff and below the average for Mental Health in 2015.

WRES Metric Seven - *Percentage believing that trust provides equal opportunities for career progression or promotion*

	SHSC 2015 STAFF SURVEY	AVERAGE (MEDIAN) MENTAL HEALTH	SHSC 2014 STAFF SURVEY
White	90%	88%	91%
BME	67%	75%	86%

In 2014 less BME staff than White staff (who completed the staff survey) believed that the trust provided equal opportunities for career progression or promotion however at 86% this was near to the White score of 91%.   In 2015 this score for BME staff has worsened to 67% which is also below the median for Mental Health

WRES Metric Eight - *In the last 12 months have you personally experienced discrimination at work from a manager/team leader or other colleagues*

	SHSC 2015 STAFF SURVEY	AVERAGE (MEDIAN) MENTAL HEALTH	SHSC 2014 STAFF SURVEY
White	7%	7%	7%
BME	13%	13%	4%

In 2014 the trust had a relatively positive score for BME staff in comparison to the average for Mental Health i.e. less BME staff said they had personally experienced discrimination at work from any of the following a Manager/team leader or other colleague. In the 2015 staff survey this score has worsened although it is in line with the average for mental health

Equality Objective 4 - Improve Information about Staff Who Care For Family or Friends Who Have a Disability

This Equality Objective was identified because the Trust did not have good information about staff who care for family or friends who have a disability. This information would help to identify the potential impact of caring responsibilities on Trust staff and help to identify what support and Information might be beneficial for this group of staff.

Initially we undertook a survey of staff carers and as a result identified that a number of staff were not aware of policies for carers. We have undertaken a number of actions to support this objective and this area is now being taken forward as part of the wider work the trust is undertaking to develop a trust strategy.

Equality Objective 5 – Identify at Least One Equality Objective Annually Through the Trust Annual Quality Objective Setting

We have continued to identify equality related targets through our Quality Accounts over the last four years.

Equality Objective 6 – Share Equality Objectives with Other Local Health and Social Care Organisation's

The work of the Sheffield Equality Engagement group has supported this objective and in 2015/16 we worked with other NHS organisations to review EDS2 information.

Unfortunately in terms of the original intentions of this objective it has not been achieved.

The NHS Equality Delivery System

The Equality Delivery System 2

The NHS Equality Delivery System 2 (EDS2) has been developed by the NHS to support NHS organisations to meet equality duties. The Trust aims to embed action to achieve the goals of the NHS Equality Delivery System 2 into its day to day activity and in the action the Trust takes to meet its Equality Objectives and to support the Public Sector Equality Duty.

The Goals of the NHS Equality Delivery System 2 are:

- Better health outcomes
- Improved patient access and experience
- A representative and supported workforce
- Inclusive leadership

In our previous report we noted plans to consider with partner NHS organisations how to respond to inclusion of EDS2 in the NHS standard contract.

In 2015/16 using the EDS2 framework, we took this forward and worked in partnership with health and social care commissioners and providers in the city to review equality data and use this to identify good practice ,inform new equality objectives and action that would support the EDS goals.

Information that the Trust used to inform this work included a review of reports and data relevant to protected characteristic groups in the city and national reports. The Sheffield Equality Engagement group provided feedback on the areas reviewed and also provided information about priority areas that they have identified. Feedback from the Sheffield City Council Equality Hubs health focused event was also considered.

Workforce elements of the EDS have been considered and some action has been incorporated into the work we are taking forward in relation to race equality. In 2016/17 priorities are likely to focus on gender pay review and work linked to the development of a national workforce disability standard.

The Workforce Race Equality Standard
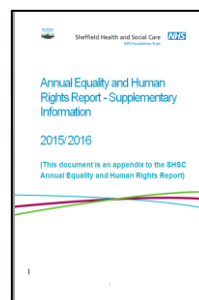
The NHS Equality and Diversity Council announced on July 31 2014 that it had agreed action to ensure employees from black and ethnic minority (BME) backgrounds have equal access to career opportunities and receive fair treatment in the workplace. It planned to do this by introducing the Workforce Race Equality Standard (WRES). The Trust published its first WRES report in July 2015 and its 2016 report, action plan and targets in July 2016.

Reports can be found through the following links:

- **2016 WRES Report**
- **2016 WRES Action Plan and Targets**
- **2015 WRES Report**

We included action to support the WRES in our strategy (please see above for more details). In 2016 we plan to identify key targets to support achievement of the WRES these will form one element of our updated equality objectives.

Supplementary Information Report

The supplementary Information published alongside this report contains the following information:

– Local population information

– Staff related data and information.

– Patient related data and Information, and

This document forms an appendix to this main report.