Equality, Diversity and Inclusion

Annual Report

2017 - 18

Striving for excellence

INTRODUCTION

1. The Trust published its first EDI Strategy for 2016 – 2020 in July 2016. The strategy established five Equality Objectives (EOs) to provide clear focus and a framework to thread EDI into core business, as follows:

    *   Objective 1: Involving and empowering stakeholders
    *   Objective 2: Understanding local population and patient profiles and needs
    *   Objective 3: Measuring and monitoring patient experience
    *   Objective 4: Building Inclusive leadership
    *   Objective 5: Delivering a representative workforce

    Throughout the year, updates on delivery against these five strategic objectives have been made to the Board's Resources and Performance Committee on a quarterly basis. This report provides the overall, end of year position for the second year of the strategy and describes the work undertaken to progress delivery against the five Equality Objectives.

2. The full report is attached at Appendix A. Below we highlight some of the successes achieved during the year and identify a couple of projects that are proving challenging to progress.

3. March 2017 saw the introduction of the statutory regulations requiring employers with more than 250 employees, to publish their Gender Pay Gap on an annual basis starting from the first 'snap shot date' of 31 March 2017; the deadline for publishing the 2017 report was 30 March 2018. Information about the Trust's report is provided in the section on 'Equality Objective 4 – Inclusive Leadership' in Appendix A.

HIGHLIGHTS

4. **MY Project SEARCH**
    This scheme is designed to help young people aged 17 to 25 who have special educational needs (SEN) to get the skills they need to find paid employment. The nine month supported internship programme provides the students (Interns) with three placements during the course of the academic year. In view of where the Interns live, the project is currently based on the Pinderfields site but it hoped that in future we may be able to expand it to our Dewsbury and Pontefract sites.

    Whilst one Intern had to withdraw a few weeks in to the scheme, the six remaining Interns have gone from strength to strength and it really noticeable how their confidence has grown as their socials and work skills developed.

The project has received a lot of interest from the local press appearing in the Wakefield Express and the Pontefract and Castleford Express on more than one occasion. It has also appeared in the Yorkshire Post, been featured on Ridings FM and has regularly featured on the Trust's Twitter and Facebook platforms.

Working in partnership with Highfield School (the main SEN education partner) and using a local film production company paid for by the school, a short video of the project was produced. The video was shot on site at Pinderfields and focusses mainly on the Interns and their families. The video has been widely acclaimed and is to be featured at Project SEARCH's European conference in London in June

In February 2018 one of the interns secured a post in our Pharmacy Department. Three more Interns were also very close to securing jobs within the Trust and it was hoped that the other two would be 'job ready' by the end if the programme and would then secure employment either with the Trust or with other local employers.

In recognition of the success of the Mid Yorkshire Project SEARCH so far, it was nominated and subsequently shortlisted in the 'Non Clinical Initiative of the Year' section of the Trust's Celebrating Excellence Awards. Whilst it didn't win, the Interns and their families really enjoyed the party and dancing with the Chief Executive!

Cross-sector, partnership working is a key requirement if the project is to be a continuing success. Our project involves Health (the Trust), Further Education (local Post 16 special needs schools), Higher Education (Wakefield College), Local Government (Wakefield Council) and the Third Sector (Hft Supported Employment Charity). As there are no contractual arrangements in place the project has to work through consensus decision making and trust between the partners. In recognition of how well the Mid Yorkshire Project Search was working it was shortlisted in the University of Bradford Award for Cross-Sector Working section of the NHS Healthcare People Management Association (HPMA) annual awards which are due to be held in London in June 2018.

In March planning started for the recruitment of the 2018/19 cohort with the date being set for an 'Open House' event. This event is to be led by the Chairman and held at Trust HQ. It is aimed at students and their families who are considering MY Project Search as an option for the coming academic year. It is hoped we will be able to recruit a larger cohort of 10 to 12 Interns for 2018/19.

5. **Improving the Workplace Experience for Black, Asian and Minority Ethnic (BAME) Colleagues**

Following a personal invite from the Trust Chief Executive directly to all BAME colleagues, over seventy staff attended one of the focus groups (FGs) held on each of our main hospital sites in January 2017. The 'Little Conversation' approach was used in each of the FGs to facilitate BAME colleagues in identifying the key actions the Trust might take to improve their job satisfaction. The issues identified included:

- Dealing with inappropriate behaviours, management inaction and unfair and inconsistent application of policies
- Improved networking and support
- Equality in accessing for training and development opportunities
- Establishing Value Based Recruitment (VBR) to move away from the previous over emphasis on previous NHS experience

A Response Plan was developed based on the main issues identified and a full report on progress against the plan is provided in the section for Equality Objective 5 – Developing a Representative Workforce, of EDI Annual Report attached. The highlights included:

- The Trust has continued to promote the Values and Behaviours framework as a way improving the workplace environment and tackling inappropriate conduct
- A virtual network was established to share information on regional and local development opportunities and other relevant information with all BAME colleagues. As result of this new approach, a number of BAME colleagues have secured places on regional development programmes
- Free places were secured on SWYPT's first Moving Forward programme which is specifically for BAME colleagues in AfC Bands 4, 5, 6 and 7. The programme started in February and four of MYHT colleagues secured places. Graduation is to take place in July 2018

Planning started in February to run the 2018 series of BAME Focus Groups across the three main hospital sites. The purpose of this series is to provide feedback to colleagues on the actions taken by the Trust in response to what was said in 2017 and to see if there has been any noticeable improvement in the workplace. Dates for the FGs have been set in July and August 2018

6. **Local Health Equality Panels**
   Building on the progress in the previous two years, the Trust has continued to work with our local CCGs and other local NHS providers to use the to engage local community and patient groups in assessments of EDI performance in 2017/18 using the NHS Equality Delivery System (EDS2).

This approach led to the establishment local Health Equality Panels (HEP) in each of the CCG areas. These panels seek to engage local community groups and charities with the purpose of:

- Maintaining dialogue between the NHS partners and the community groups throughout the year rather than just during the EDS2 process
- Developing relationships and understanding to facilitate the two-way flow of information
- Facilitating joint working on developing the plan for the EDS2 programme for 2017/18

The panels continued to meet throughout 2017/18 and provided a useful source of support and challenge around our performance in meeting the needs of different communities.

Projects Causing Concern

3. **Implementation of the Accessible Information Standard (AIS)**
   The Standard is a legal requirement for all providers of NHS and social care services who have to have arrangements in place to provide information in accessible formats for patients who have a need as a result of disability or long term condition. The Standard became effective in April 2016.

   Implementation of the Standard across the Trust continues to be stymied by a number of issues, including:

   - Arrangements had still not been put in place to ensure GPs inform the Trust on referral, if a patient has an AI need
   - Full AI functionality for our main PAS (eCaMIS) has been awaited since 2016 and was due to become available in the next 'release' (upgrade). We understand that this will not be launched until May 2018.
   - Even when we get this functionality in PAS, the benefit will be limited until the project to determine how 'Alerts' are managed within the Trust is completed. We are told this will be 'a big project'!

   In the meantime we continued to review and develop the contingency arrangements we had put in place to respond to the standard which included:

   - Posters being displayed in all Access, Booking and Choice (ABC) outpatient areas and a pro forma made available for patient to complete to inform the Trust of their AI needs.
   - Reference to AIS being made in the leaflet included with the letter for first time appointments in ABC Clinics. A telephone number has been

provided for patients to call to inform the Trust if they have an AI need we need to be aware of

- Areas that do not use ABC have been required to ensure they have suitable arrangements in place to obtain, record and respond to AI needs

Despite these interim arrangements only a handful of the pro forma from ABC clinic areas have been retuned. Also, although we issued approximately 120,000 new appointment leaflets each quarter, the Trust did not receive calls from patients on this matter.

More recently Access Booking and Choice have been developing an information leaflet to give to all patients on arrival for an appointment. Reference to AIS is to be included in this new leaflet and it is hoped that this will generate more interest and feedback from patients.

It might be considered some comfort that, despite the lack of real progress we have been able to make with implementing the standard due to circumstances beyond our control, we have only had a small number of issues raised by patients referencing the Standard. However the reality is that we continue to remain unable to implement the standard effectively across acute services and provide this particular group of patients with the quality of service they are legally entitled to!

4. **Implementation of the Sexual Orientation Monitoring (SOM) Standard**
   This Standard was published in October 2017 and whilst it is not yet mandatory, NHS providers were expected to start making plans to implement it. Implementation does present some practical challenges, such as:

   - Protecting privacy whilst obtaining the information from patients
   - Training staff to be able to respond to challenges from patients about why such information is being asked for, how it is relevant and how the information will be used

   However, at this time an insurmountable barrier to implementation is that none of our acute IT systems have the facility to record this information. Whilst this was pointed out to NHS England repeatedly during the development of the Standard a national drive to address the system deficits remains absent.

FURTHER INFORMATION

7. For further information about anything in the report that follows or any other EDI issues you can email the Trusts EDI Lead: gordon.smith@midyorks.nhs.uk

<div align="right">**APPENDIX A**</div>

Equality, Diversity and Inclusion Annual Report 2017/18

Objective 1 – Improving Stakeholder Engagement		
Work Stream	**Aim**	**Progress**
NHS Equality Delivery System (EDS2)	Engage with diverse communities and use the EDS2 framework to assess our performance against the Goals and Outcomes and use the feedback to inform improvement	- A series of meetings was organised with community groups across Wakefield and Kirklees during late 2017 and early 2018 - MYHT presented evidence on the actions it had taken to involve patients in the development of its latest framework for improving patient experience - The community groups were asked to rate the Trust's efforts using the EDS2 scoring mechanism and identify improvements that could be made. - Although the Trust was rated as 'Developing' (Delivering for some protected groups) overall, its efforts to engage local communities were recognised and received positive comments during the process - The feedback received is to be used to inform future work on engaging patients and improving patient experience - A Full report on the 2017/18 EDS2 process is available separately
Engaging with Wakefield District Sight Aid (WDSA)	Engage with the blind and partially sighted community to better understand their service needs and expectations	- In October 29017, following an invitation from the D&I Service, the charities new Chief Executive and one of the Volunteers joined the Trust's Access Group and have continued to attend since. - Regular input from representatives of this community have proved extremely useful in improving our understanding of their needs and experiences - The Head of D&I was subsequently approached to attend the Annual General meeting of the Charity as a guest speaker and was due to attend on 14 May to talk about the work the Trust is doing to improve the patient experience for this community.

MYHT Access Group	Quarterly meeting with stakeholders who have disabilities to identify ways of improving access	• The Group covered a range of issues throughout the year. Examples include: ➢ Regular updates and subsequent discussions on issues raised by patients through the Family and Friends test ➢ Supporting and advising on the Trusts work to develop an internet based video streaming platform for BSL interpreting in emergency situations. Following success in securing changes to the NHS broadband connectivity (N3) an approach is to be made to Ambulatory Care with a view to them piloting the system ➢ Quarterly updates on progress with implementing the Accessible Information Standard, highlighting the ongoing barriers that we faced which are beyond the control of the Trust
Engaging with Kirklees Blind and Partially Sighted Group	Engage with the blind and partially sighted community to better understand their service needs and expectations	• The Head of D&I continued to attend the Group to provide updates on action being taken by the Trust to improve the experience for patients with visual impairment and to listen to the issues they face in accessing services. • A key concern is the use of monitors to advise patients when it was their turn in for their appointment in Outpatients. Patients are to be involved in considering how best to overcome this issue
Engaging with Kirklees Deaf and Hard of Hearing Group	Engage with the Deaf and hard of hearing community to better understand their service needs and expectations	• The Head of D&I continued to attend the Group to provide updates on action being taken by the Trust to improve the experience for patients with visual impairment and to listen to the issues they face in accessing services. • The issues discussed over the year include: ➢ The Opening Doors Project ➢ Inclusive Volunteering ➢ Community Plus ➢ Updates on H2H (Home to Home) project and AHL funding • As attendance by community representatives tailed off during the year it was agreed that the future of the group should be reviewed in early 2018/19

| Local Health Equality Panels (HEPs) | Provide a framework for ongoing engagement with patient and community groups | • Whilst attempts to convene the Kirklees HEP during 2017/18 proved futile, it was pleasing that a series of quarterly meetings has been established for 2018/19.
• Meanwhile meetings of the Wakefield Panel were well supported throughout the year. Examples of the issues covered include
➢ Regular updates form the providers involved on work to address the issue identified in the EDS grading process
➢ The CCG Communications, Engagement and Equality Strategy
➢ Improving Access to Psychological Therapies (IAPT) – Turning Point
➢ Issues of access for patients with hearing and visual impairments |

Equality Objective 2 – Using Data and Improving Access

Work Stream	Aim	Activities

Accessible Information Standard (AIS)	To implement the Standard to provide better communication for patients with disability to improve access and patient experience	• Implementation of the Standard across the Trust continued to be stymied by a number of issues, including:
		  ➢ Arrangements had still not been put in place to ensure GPs inform the Trust on referral, if a patient has an AI need
		  ➢ Full AI functionality for our main PAS (eCaMIS) has been awaited since 2016 and will only become available in the next 'release' (upgrade); this upgrade was subsequently delayed until May 2018.
		  ➢ Even with AIS functionality in PAS, the benefit will be limited until the project to determine how 'Alerts' are managed within the Trust is completed.
		• In the meantime we continued to review and develop the contingency arrangements we had put in place which included:
		  ➢ Posters being displayed in all Access, Booking and Choice (ABC) outpatient areas and a pro forma made available for patient to complete to inform the Trust of their AI needs.
		  ➢ Reference to AIS being made in the leaflet that is included with the letter for first time appointments in ABC Clinics. A telephone number is provided for patients to call to inform the Trust if they have an AI need we need to be aware of
		  ➢ Areas that do not use ABC have been required to ensure they have suitable arrangements in place to obtain, record and respond to AI needs
		• Despite these interim arrangements only a handful of the pro forma from ABC clinic areas have been retuned. Also, although we issue approximately 120,000 new appointment leaflets each quarter, the Trust received no calls from patients on this matter.
		• Access Booking and Choice have continued work to develop an information leaflet to give to all patients on arrival for an appointment. Reference to AIS is to be included in this new leaflet and it is hoped that this will generate more interest and feedback from patients.

Improving Access	Provide web-based information about accessibility of Trust premises for people with disability (DisabledGo)	• Following the successful launch of the site in May we met with DisabledGo in January to explore how we can develop the facility to improve its usefulness to patients and a range of issues raised are to be addressed

NHS Sexual Orientation Monitoring Standard for patients	Implementing the Standard to enable to collection of data from patients with the aim of improving our understanding of the patient profile for these characteristics across services	• The SOM Standard was launched in October 2016 but is not mandatory at this stage
		• Implementing the standard across the Trust will be challenging in terms of:
		  ➢ The number of front line staff who will need to be trained to enable them to ask the appropriate questions and to respond to queries or challenges from patients
		  ➢ Ensuring patient privacy is protected when the question is asked
		• We had planned to pilot the introduction of the Standard in one service area to inform the development of a model for implementation that could then be rolled out across the Trust.
		• Unfortunately though, we have been informed by IT colleagues that none of the main IT systems we use for patient administration have the facility to record this information at this time. We will therefore need to wait for the suppliers to upgrade their systems to comply with the standard before we can commission a pilot.

Analysis of Access to Services by Ethnicity	To establish if access to services by ethnic groups matched with representation of these groups in the local communities	• At the Resources and Performance Committee meeting in November 2017 the Chief Executive requested an analysis of access to Out-Patients, In-Patients, Maternity and A&E by ethnicity • Unfortunately, as anticipated the usefulness of the data was undermined by the high level of 'Unknown' or 'Not Known' which accounted for 10% to 12% of episodes in some services • One area where this wasn't the case was Maternity where there was high levels of disclosure. The data for this services indicated an over representation of the South Asian community possibly as a result of the rising proportion of people in the 20 – 25 year old group in this community

Equality Objective 3 - Improving Patient Experience		
Work Stream	**Aim**	**Activities**

Wakefield Equality and Cohesion Partnership	Working in partnership with local agencies to improve service access, provision and experience for patients	➢ The Partnership is led by Wakefield Council and involves, amongst others, West Yorkshire Police, Wakefield Healthwatch, the local CCG, Wakefield District Safeguarding Children's Board and Wakefield District Housing.
		➢ The Trust has continued to participate in the Partnership which meets quarterly to share information about the approaches members are taking to equality and cohesion issues
		➢ Issues addressed across 2017/18 included:
		  ➢ Patterns of Poverty, Economic Activity and Exclusion
		  ➢ Scrutiny and IAG
		  ➢ Community Tensions and Hate Crime
		  ➢ Engagement Opportunities and Events

Deaf Awareness Training Sessions Trail	Provide deaf awareness training to front of house staff (Volunteers; Receptionists; etc.) to enable them to interact more confidently with patients with hearing loss	➢ Following an offer by our BSL interpreting provider (Topp Language Solutions - TLS) to deliver free deaf awareness training, we organised a series of sessions for our volunteers and the Outpatient reception staff managed by Access, Booking and Choice ➢ Feedback from the sessions has been extremely positive

Wakefield Community Engagement Partnership	Working in partnership with local agencies to improve service access, provision and experience for patients	➢ We have continued to participate in the Partnership which meets quarterly to share details of the engagement activities each partner organisation is planning
		➢ Issues addressed across the year included
		  ➢ Public Voice Report
		  ➢ Relationships with other partnerships - Health and Well-being Board, Safeguarding Children's Board, Community Safety Partnership
		  ➢ Recent Engagement and Outcomes
		  ➢ Active Citizenship and Volunteering

End of Life Steering Group	Identify ways to improve the quality of care provided to patients and relatives	• A member of the Diversity and Inclusion Service attends the meetings to provide advice from a diversity perspective
		• During the year we have contributed on a range of issues but were more actively involved in a number of the work streams, including:
		   ➢ Developing a policy and guidance on Oral Hygiene and mouth care
		   ➢ Reviewing the signage for Mortuaries on our three hospital sites to identify if improvements were needed to assist relatives attending for viewings

Providing Autism Awareness Training for staff	To enable staff to have a better understanding of how they might respond more appropriately to people with Autism	• Although organising the provision of this training was prompted by several of the Project SEARCH Interns being on the Autistic Spectrum, the sessions were offered widely through the Weekly Staff Bulletin and proved be very popular, leading to further session being organised to accommodate the demand. • An unexpected spin-off was an approach by the Head of Audiology who asked if we could accommodate all members of the team • It transpired that that the service had a high proportion of referrals for young people being assessed for autism and a hearing test was part of that assessment. It was felt that the team would benefit from attending the training and the service to patients would be improved • As a result of discussions with the tutor during the session it was recognised that the team could make simple changes to the way they provided services to young people with autism that would be of benefit to the patients and they undertook to follow this up after the sessions
Interpreting and Translation Service	Provide the facility for BSL Interpreting out of hours and in emergency cases to address the current gap in our service provision for Deaf and Hard of Hearing patients.	➢ Work is continuing to establish how we might best be able to utilise an on-line platform which has been developed by our BSL supplier to enable us to provide access to a BSL interpreter in emergency cases ➢ Following a successful test of the system at a meeting of the Trust's Access Group in October we are exploring possible sites to pilot the system in an operational setting

Patient Experience Sub Committee	Identify ways to improve the care provided to patients and relatives	- The Head of Diversity and Inclusion attended meetings to provide advice from a diversity perspective - Working together with the Matron for Patient Experience in Q2 they undertook an exercise using the result of 2016 FFT surveys which compared: - The extent to which FFT response rates for protected groups reflected their representation in the local communities with a view to identifying potential areas for improvement - The experience reported by protected groups with that of the wider population to identify potential areas for improvement - The report to the Sub Committee in October identified that: - The comparison report provided by Picker had not included an analysis by Age group, so this was subsequently obtained. - Picker had failed to include disability in their analysis so this was requested but will not be available until Picker finished work on the 2017 NHS Staff Survey results - The response rates from other protected groups compared favourably with levels of representation in the wider population - With the exception of Arab patients, the experiences of the other protected groups were similar to those of the wider population - Based on the results of this analytical work, the following actions have been taken: - The free text comments provided by the Arab responders were obtained to see if these provided insight into why they might be less satisfied with their experience. The evidence received suggested that patients from a variety of ethnic groups may have ticked this classification - Interpreters have been asked to encourage the patients they support to complete and submit FFT cards - Efforts have been made to raise awareness of patients about the availability of the Picker language line facility to translate the FFT questions into the appropriate language - It is planned to repeat this exercise using the results of the 2017 FFT surveys results and compare the two years data

Develop a Policy with guidance for staff on supporting transgender patients	To improve the experience and outcomes for this group of patients	• Following the establishment of a virtual Trans Policy Development Group (TPDG) internet based research was conducted to identify:
		  ➢ examples of good practice from across NHS providers
		  ➢ Useful reference materials from other organisations and charities
		• A draft policy and supporting guidance was then drafted during Q3 and circulated to the TPDG for comment.
		• This feedback was then processed and a revised draft circulated to a wider group of stakeholders for comment
		• Yorkshire MESMAC kindly agreed to work with the Trust to improve the policy and guidance and this work remained ongoing at the year end

Produce a toolkit for clinical areas to provide resources and advice for supporting patients with sensory impairment	To improve the experience and outcomes for this group of patients	• A Project Group was established to identify existing areas of good practice in the Trust • Research established that Imperial College Healthcare (London) were being promoted by NHS England as an example of good practice in this area and so their materials were obtained • It then came to light that a similar resource had been developed and piloted in MYHT 7 or 8 years ago and that copies of the materials used were still available • The plan is to identify a suitable service in which to pilot the toolkit but this work was deferred due to winter pressure and staffing issues
Secure the re-provision of BrowseAloud as an accessibility tool on the Trust Internet site	To ensure he content of the Trust's web pages were accessible to those with sensory impairment and those whose first language is not English	• This facility had been provided previously but the licence had lapsed without anyone realising • The Trust is required to make reasonable adjustments so that those with sensory impairment have equality of access to information • A three month free trial period was secured and showed a reasonable amount of utilisation. The trail period was subsequently extend until the end of the financial year • The £3000 cost pressure which would be created by the purchase of the licence was to be considered as part of the financial planning process for 2018/19

Equality Objective 4 – Inclusive Leadership

Work Stream	Aim	Activities
Values and Behaviours (V&B)	Continuing promotion of the of behaviours co-produced with staff to support the programme of culture change in the Trust	• A detailed update for this item is provided in the section for Equality Objective 5 below
Values Based Recruitment (VBR)	Recruit and promote staff who share and promote the values of the Trust	• The Recruitment Team and OD have continued to build VBR into recruitment processes as opportunities allow

Promoting Project SEARCH widely to staff, patients & visitors	Demonstrate the Trusts commitment to developing an inclusive culture	• In order to succeed, this project required commitment and support at Board and Senior Management level in the Trust
		• The Board demonstrated its support by:
		  ➢ Executive Directors agreeing to the Trust's participation in the scheme
		  ➢ The Chairman hosting the first 'Open House' event for potential Interns and their parents in June 2017 and affirming the Trust's support for the scheme
		  ➢ Ongoing advice and support to deal with the various challenges faced in establishing and running the project on the Pinderfields site
		• Senior Management demonstrated its support by:
		  ➢ Identifying a suitable onsite Project Training Room despite accommodation being tight resources at Pinderfields
		  ➢ Providing a wide range of suitable work placement opportunities for the Interns
		  ➢ Supporting the Interns in their placements and working with the project team to identify potential job opportunities
		• As a result of this commitment the project progressed well form the start and one of the Interns secured a post in Pharmacy in February 2018

Providing basic British Sign Language (BSL) training for staff	To enable staff to initiate basic communications with deaf colleagues	• Prompted by one of the Project SEARCH Interns being deaf, we contacted Wakefield District Deaf Society to see if they could help • As a result they identified a volunteer who agreed to provide a ten week programme of basic BSL training for the other Interns and the colleagues working with the deaf Intern • The programme started in December 2017 and was very well received by all those involved
Providing Autism Awareness Training for staff	To enable staff to have a better understanding of how they might respond more appropriately to people with Autism	• Prompted by several of the Project SEARCH Interns having Autism our education partner (Highfield School) suggested staff working with them might benefit from some basic training • The school recommend a contact at Wakefield Council who willingly agreed to provide the training • Whilst staff in the departments that had Interns were specifically targeted, information about the sessions was publicised widely through the Weekly Bulletin • As a result, the demand exceeded the 40 places we had available over the two sessions so we are looking to organise another session in February • The feedback from the sessions was very positive
Developing a policy position and guidance on how to deal with patients who make racist or discriminatory remarks to staff	To support mangers and staff in responding to such incidents	• Research was conducted to understand how other NHS Acute providers might be tackling this issue • Proposed additions and changes to our Policy for Manging Aggression and the Prevention of Violence in the Workplace were being drafted to set out the Trust's approach to dealing with such incidents. • Guidance for managers and staff was also being developed to enable them to respond appropriately • An initial draft was then to be circulated for comment by relevant managers and staff before being submitted for sign off by the Executive Team and launched in the trust

Designing and Delivering a regional conference on topical diversity and inclusion issues	To showcase the latest research, good practice and learning	• The Head of Diversity and Inclusion was part of a sub group of the Yorkshire and Humber Region E&D Leads Network which was convened to deliver the conference on 8 November 2017.
		• The themes for the conference were:
		  ➢ Bullying, Harassment and Abuse
		  ➢ Transgender
		  ➢ Talent Management for Protected Groups
		• The conference, which was attended by over seventy delegates, evaluated very positively and received significant positive mention on social media platforms at the time

Equality Objective 5 – Developing a Representative Workforce

Work Stream	Aim	Activities
Project SEARCH	Provide work experience opportunities for young people with Special Educational Needs (SEN) to improve their chances of securing paid employment on leaving education	• Seven Interns, a Job Coach and Project Tutor arrived on site at Pinderfields in early September. Following a period of three weeks in the Training room they started their Internships (placements) in a range of departments such as housekeeping, stores portering, pharmacy, sterile services, recruitment and catering. • Following a series of absences due to illness, the Intern working in catering had to withdraw from the programme. However following this unfortunate turn of events the remaining Interns continue to do well • The project has already resulted in a range of actions being taken which will support the creation of an environment more supportive to colleagues with different needs • It has also demonstrated to existing staff that the Trust is taking action to support young people with special need in the workplace leading to conversation about family members who have special needs that would never have happened otherwise; a sure indication that the project is helping to change perceptions. • By the end of the second rotation one Intern had already secured employment and it is hoped that more will be successful by the time they graduate in July
Migration from the DWP Two Ticks Scheme to the new Disability Confident (DC) scheme	To increase recruitment of people with disability and provide support in the workplace to improve retention	• Following a commitment made by the Trust to work on the Activities and Actions set out in Level 2 of the scheme our status as a 'Disability Confident Employer' was extended for a further two years to July 2019 • A draft paper, comparing the DC criteria with current provision in the Trust and proposing actions to deliver on the DC commitment, was prepared and circulated for comment to Workforce colleagues • In view of the departure of the Director of Workforce at the end of the financial year it was decided to defer submission of the proposals to the Executive Team until after they had been considered by the new Director

Workforce Disability Equality Scheme (WDES)	Participation in a national group to support the development of the WDES	• The Trust continued to participate in the national group and monitor progress by NHS England with developing the Standard and the supporting Technical guidance • The launch of the Standard and guidance had previously been put back to September 2017 but then further announcements were made indicating that the NHS Standard Contract would not require submission of the data until 31 August 2019 • In line with this new timeframe, regional WDES Consultation Events were being planned by NHS England to take place in April 2018 with a view to the final version of the metrics and the supporting technical guidance being published in Autumn 2018 • Based on this revised timeframe the plan was to run a set of Trust results based on our 2017 NHS Staff Survey Results and 2017/18 workforce performance to provide an early indication of how the Trust might perform against the standard

Stonewall Diversity Champions Programme	Improve support for LGBT staff in the workplace and develop a reputation as an LGBT friendly employer	• As agreed by the Trust's multi-disciplinary Stonewall Project Steering Group (SPSG), a submission to the 2018 Index was made in August 2017 using the newly published 2017–2020 version of the Stonewall Equality Index
		• This new Index set a very high standard and based on our experience in completing our submission we recognised that there was still a lot we need to do to improve the workplace for LGBT colleagues
		• Our scores and ranking reflected this deficit
		    ➢ Score for the Index was 30.5%
		    ➢ Score for Trans Inclusion work 32.0%
		    ➢ Ranking in the overall Index was 357 out of 434
		    ➢ Ranking in the Health and Social Care Sector was 46 (Total Not Available)
		• The Feedback Report we reived from Stonewall provided some detailed information about our performance against the ten areas of the Index and this is to be used by the SPSG to decide where to focus our attentions going forward

GDPR		• March 2017 saw the introduction of the statutory regulations requiring employers with more than 250 employees, to publish their Gender Pay Gap on an annual basis starting from the first 'snap shot date' of 31 March 2017; the deadline for publishing the 2017 report was 30 March 2018. • Unfortunately, the programme procured by the NHS national ESR (Electronic Staff Record) Team to produce the data for each NHS employer was not delivered until early February 2018 • It was therefore agreed by the WYAT Workforce Directors that we would all publish our pay gap data on 8 March (International Women's Day) with minimum comment, but a commitment to work to address any of the contributing factors that might be within the employer's control • A copy of the report published by the Trust is included as Attachment 1 to this Report. • As the Director of Workforce and OD was due to leave at the end of the year it was agreed to discuss next steps with the new Director once he/she was in post
Workforce Race Equality Scheme (WRES)	To identify issues for BAME staff in the workplace and devise a set of actions to provide improvements	• The overall results for 2016/17 showed improvements in some areas such as recruitment and reductions in the number of BAME staff involved in formal disciplinary proceeding • However there was still work to do, particularly as BAME colleagues report higher levels of bullying, harassment and abuse that white colleagues and are less likely to agree that the trust is an equal opportunities employer • The issues raised in the 2017 BAME Focus Groups were incorporated into a Response Plan and an update on progress against each area in the plan is provided in the following sections

BAME Response Plan Dealing with: • Inappropriate Behaviour • Management Inaction • Unfair and Inconsistent Application of Policies	1. Continuing the focus on the use of the Values and Behaviours framework to promote and support the development of a more inclusive workplace culture	• We have continued to promote the revised Behaviours Framework in all the awareness raising events and displays delivered by the D&I Service. It has also been referenced in any presentations or training the Service provided • The revised framework has been adopted by the various Trust award schemes/nomination processes • All relevant Trust leadership and management development courses and programmes have had Values and New Behaviours component since April 2017 • Trust Executive agreed during December 2017 to pilot Talent Management using a New Behaviours component. Pilot expected to be complete late spring/early summer 2018 • As part of the scheduled review to update Trust Workforce policies, all relevant policies now use the Trust New Behaviours to aid policy success/compliance
	2. Review our Policy for Managing Aggression and the Prevention of Violence in the Workplace	• Research was conducted to understand how other NHS Acute providers might be tackling this issue • Proposed additions and changes to our Policy for Manging Aggression and the Prevention of Violence in the Workplace were being drafted to set out the Trust's approach to dealing with such incidents. • Guidance for managers and staff was also being developed to enable them to respond appropriately • An initial draft was then to be circulated for comment by relevant managers and staff before being submitted for sign off by the Executive Team and launched in the trust

BAME Response Plan Networking & Support	Establish a virtual 'network' to maintain contact with BAME colleagues and raise awareness of relevant matters and opportunities	• Initially, a virtual network was established with those BAME colleagues who either attended or expressed an interest in attending the focus groups • Subsequently the email addresses for all BAME colleagues employed in the Trust were obtained and used to establish a virtual network with them all. This distribution list has been updated quarterly • This group of staff have been contacted on a regular basis with information about relevant events and network and training opportunities provided by NHS England and the Leadership Academy • Planning commenced in March for the 2018 series of BAME Focus Group, involving the Chief Executive and Chairman. The purpose of these sessions will be to report progress since the last set of meetings, provide feedback on the 2017 NHS Staff Survey and the 2018 WRES results and to listen to issues staff may want to raise • The plan is then to hold these Focus Groups on annual basis to maintain focus on this group of staff
BAME Response Plan Development	Commission a programme to provide support and development of aspiring BAME staff	• Work began to develop an in-house programme, however during this time we were approached by SWYPFT with an offer of free places their first Moving Forward programme which is specifically for BAME colleagues in AfC Bands 4, 5, 6 and 7. The programme started in February and four of MYHT staff secured place. Graduation is due in July. • A decision on next steps will be based on an evaluation of the programme provided by the four MYHT Colleagues

BAME Response Plan Mentoring	Develop a 'reciprocal' (or '2-way') mentoring scheme involving Executive and Non-Executive Directors and Very Senior Mangers	• The initial response was to develop an in-house Reciprocal Mentoring Scheme specifically for BAME staff and involving Executive Directors, Non-Executive and Very Senior Managers • However, when we explored the logistics of such a scheme it became apparent that we would only be able to accommodate a comparatively small number of staff over the course of a year which wouldn't be a very effective response to the issue • The Trust already offers coaching and mentoring to staff so the issue appears to be more about equality of access than availability of a suitable scheme • It was therefore agreed that this issue should be picked up as part of our planning for IIP accreditation
BAME Response Plan Recruitment & Selection	Establish Value Based Recruitment (VBR) to move away from the previous over emphasis on previous NHS experience	• The Recruitment Team and OD have continued to build VBR into recruitment processes as opportunities allow
BAME Response Plan Recruitment Monitoring	We continue to monitor our performance in the recruitment and selection of BAME candidates using the NHS Workforce Race Equality Standard (WRES)	• Over the last two years we have seen a slight improvement at Trust level in the chances of BAME candidates being appointed from shortlisting so that now they are on a par with those of white candidates • We are currently exploring the possibility of monitoring recruitment performance at a Divisional level using the WRES metrics
BAME Response Plan Manager 360° Appraisal	Build 360° Feedback into relevant management training programmes	• 360° Feedback has already been included in the Band 6/7 Circle of Excellence for Ward Managers and Team Leaders • However, there were no plans to introduce a system of 360° Feedback as part of the management appraisal process

BAME Response Plan Monitoring BAME Access to Training and Development	We will continue to monitor this using the answer to Q18 in the annual NHS Staff Survey	• With Divisions holding the budgets and managing the processes for accessing training external to the Trust it is not possible within existing systems to monitor whose applications are approved and whose are denied. • We therefore continue to use an analysis of the answers to Q18 in the annual NHS Staff Survey as part of the WRES metrics *(% receiving access to job relevant training, learning or development in the last 12 months)* and compare the responses for White and BAME Staff • In 2016 NHS Staff survey a greater proportion of BAME staff (70%) reported receiving job relevant training than white staff (63%). The analysis of the 2017 results for Q18 were not due to be available until the new financial year
BAME Response Plan Lack of awareness arrangements for raising issues such as nepotism, discrimination, etc. outside of line management structure	Continue to publicise existing mechanisms such as the Freedom to Speak Up Guardian (for issue that affect patient care) and My Concerns on the Trust Intranet	• Reminders about how to raise concerns were circulated regularly • BAME staff are also prompted to raise issues with D&I Service by the regular update emails we send out

25

Mid Yorkshire Hospital Gender Pay Gap Report (2017)

Introduction

1. This report provides the Trust's first Gender Pay Gap (GPG) information based on data for the period including the first snapshot date of 31 March 2017.

2. This report is published in line with the requirements set out in the Equality Act 2010 (Specific Duties and Public Authorities) Regulations 2017.

Gender Pay Gap Information

3. Ordinary Pay

   - Mean Pay Gap = 34.03%

   - Median Pay Gap = 21.84%

   - Quartile Information:

Quartile	% Female	%Male
1 Upper	69.33	30.67
2	87.70	12.30
3	87.32	12.68
4 Lower	87.05	12.95

4. Bonuses

   - Mean Bonus Gap = 37.39%

   - Median Bonus Gap = 33.33%

   - The gender split for those in receipt of bonuses was 72.08% men compared to 27.92% women

Supporting Narrative

5. The Trust has a job evaluation system which underpins our Agenda For Change pay scales to ensure we pay men and women the same for work of equal value (equal pay)

6. We recognize that our Gender Pay Gaps are relatively large. However, through benchmarking we are aware that they are in line with those of other NHS providers of acute services in the Yorkshire and Humber region.

7. The following are amongst the factors that contribute to these significant gaps:

- **Pay Gap**
  - ➢ The relatively high proportion of women in the NHS workforce; around 80%
  - ➢ The predominance of women in the mid-range Agenda for Change Pay Bands 5 and 6 particularly in nursing and therapies
  - ➢ The relatively higher proportion of men in Medical and Dental Consultant posts

- **Bonus Gap**
  - ➢ The relatively high proportion of male Medical and Dental Consultants who receive clinical excellence awards compared to women Consultants

8. In putting forward these factors, some of which are societal, we are not seeking to talk down the Trust's pay gaps, but rather to provide the context in which they exist. For example, in wider society roles, that have traditional attracted a higher proportion of women, such as caring and childcare, are often less valued by society than male dominated roles.

What actions to be taken in response?

9. The Trust plans to undertake further analysis over the coming months so as to gain a better understanding of the causes of the gender pay gaps we have with a view to identifying any actions the Trust might reasonably take to reduce them.