





Title of the paper	Annual Equality Duty Report 2020												
Agenda Item													
Presenter	Andrew McMenemy, Chief People Officer												
Author(s)	Arfan Bhatti, Inclusion & Diversity Manager												
Purpose	<i>Please tick the appropriate box</i> <table border="1" style="width: 100%; text-align: center;"> <tr> <td style="width: 33%;"><i>For approval</i></td> <td style="width: 33%;"><i>For discussion</i></td> <td style="width: 33%;"><i>For information</i></td> </tr> <tr> <td>√</td> <td></td> <td></td> </tr> </table>			<i>For approval</i>	<i>For discussion</i>	<i>For information</i>	√						
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Executive Summary	<p>The Equality Act 2010 introduced a duty for public bodies to show due regard to:</p> <ul style="list-style-type: none"> • eliminate unlawful discrimination, harassment and victimisation • advance equality of opportunity, and • foster good relations between those who share a protected characteristic and those who do not <p>This paper provides information aligned to our equality objectives which are set out in our 2020-2025 People Strategy:</p> <table border="1" style="width: 100%;"> <thead> <tr> <th style="text-align: center;">West Herts equality objectives</th> <th style="text-align: center;">Progress</th> </tr> </thead> <tbody> <tr> <td>1. Build an inclusive and diverse team</td> <td>Twice as many colleagues have now shared that they have a disability.</td> </tr> <tr> <td>2. Support and engage our team</td> <td>Additional support has been introduced to mitigate the risks and outcomes of COVID19 for older, BAME and disabled staff via our Virtual Hospital, risk assessments are undertaken and wellbeing initiatives launched.</td> </tr> <tr> <td>3. Develop our team</td> <td>Only 79% of staff believe the Trust acts fairly with regard to career progression despite the uptake of CPD courses and job band increases, broadly reflecting representation across gender and ethnicity.</td> </tr> <tr> <td>4. Moving forward by embracing new ways of working</td> <td>COVID19 has accelerated the introduction of agile working, which has been embedded in the new workplace policy.</td> </tr> </tbody> </table>			West Herts equality objectives	Progress	1. Build an inclusive and diverse team	Twice as many colleagues have now shared that they have a disability.	2. Support and engage our team	Additional support has been introduced to mitigate the risks and outcomes of COVID19 for older, BAME and disabled staff via our Virtual Hospital, risk assessments are undertaken and wellbeing initiatives launched.	3. Develop our team	Only 79% of staff believe the Trust acts fairly with regard to career progression despite the uptake of CPD courses and job band increases, broadly reflecting representation across gender and ethnicity.	4. Moving forward by embracing new ways of working	COVID19 has accelerated the introduction of agile working, which has been embedded in the new workplace policy.
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	<p>The majority of the in depth analysis in this report is limited to gender and ethnicity, due to a lack of ESR data in relation to: disability, religion and sexual orientation.</p> <p>This paper is being brought before PERC having been discussed with senior HR colleagues, the staff network chair's and should be read in conjunction with our comprehensive reporting and action plan in our Workforce Race and Disability Equality Standards.</p>									
<p>Trust strategic aims</p> <p><i>(please indicate which of the 4 aims is relevant to the subject of the report)</i></p>	<p>Aim 1 Best quality care</p>  <p>Objectives 1-5</p>	<p>Aim 2 Great place to work</p>  <p>Objectives 6-8</p>	<p>Aim 3 Improve our finances</p>  <p>Objective 9</p>	<p>Aim 4 Strategy for the future</p>  <p>Objective 10-12</p>						
<p>Links to well-led key lines of enquiry</p>	<p><input type="checkbox"/> Is there the leadership capacity and capability to deliver high quality, sustainable care?</p> <p><input type="checkbox"/> Is there a clear vision and credible strategy to deliver high quality, sustainable care to people, and robust plans to deliver?</p> <p><input type="checkbox"/> Is there a culture of high quality, sustainable care?</p> <p><input type="checkbox"/> Are there clear responsibilities, roles and systems of accountability to support good governance and management?</p> <p><input type="checkbox"/> Are there clear and effective processes for managing risks, issues and performance?</p> <p><input type="checkbox"/> Is appropriate and accurate information being effectively processed, challenged and acted on?</p> <p><input type="checkbox"/> Are the people who use services, the public, staff and external partners engaged and involved to support high quality sustainable services?</p> <p><input type="checkbox"/> Are there robust systems and processes for learning, continuous improvement and innovation?</p> <p><input type="checkbox"/> How well is the trust using its resources?</p>									
<p>Previously considered by</p>	<table border="1" data-bbox="443 1261 1489 1373"> <thead> <tr> <th data-bbox="443 1261 1123 1294">Committee/Group</th> <th data-bbox="1123 1261 1489 1294">Date</th> </tr> </thead> <tbody> <tr> <td data-bbox="443 1294 1123 1328">PERC</td> <td data-bbox="1123 1294 1489 1328">29 April 2021</td> </tr> <tr> <td data-bbox="443 1328 1123 1373"></td> <td data-bbox="1123 1328 1489 1373"></td> </tr> </tbody> </table>				Committee/Group	Date	PERC	29 April 2021		
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<p>Action required</p>	<p>PERC and Board are asked to approve the enclosed paper as providing evidence that the Trust is meeting the Public Sector Equality Duty requirements to show due regard to:</p> <ul style="list-style-type: none"> • eliminate unlawful discrimination, harassment and victimisation • advance equality of opportunity, and • foster good relations between those who share a protected characteristic and those who do not. <p>Our future work plans are set out in detail via the Trust's People Strategy Implementation Plan which is monitored in the Senior Workforce meetings as well as PERC as part of the Strategy review.</p>									

PERC meeting – 29 April 2021 **Title of paper:** Annual Equality Duty report 2020

Presented by: Andrew McMenemy, Chief People Officer

1. Purpose

The Equality Act 2010 introduced a duty for public bodies to show due regard to the following:

- eliminate unlawful discrimination, harassment and victimisation;
- advance equality of opportunity; and
- foster good relations between those who share a protected characteristic and those who do not.

This paper seeks to demonstrate the Trust commitment by sharing relevant, proportionate information aligned to our equality objectives which are set out in our 2020-2025 People Strategy:

- | | |
|---|--|
| 1) Build an inclusive and diverse team; | 3) Develop our team; |
| 2) Support and engage our team; | 4) Move forward by embracing new ways of working |

2. Background

Compliance with the equality duty is a legal obligation and covers the nine protected characteristics: age, disability, gender reassignment, pregnancy and maternity, race, religion or belief, sex and sexual orientation.

Public authorities are required to have due regard in eliminating unlawful discrimination against someone because of their marriage or civil partnership status. This means that the first aim of the duty applies to this characteristic, however the other aims (advancing equality and fostering good relations) do not apply.

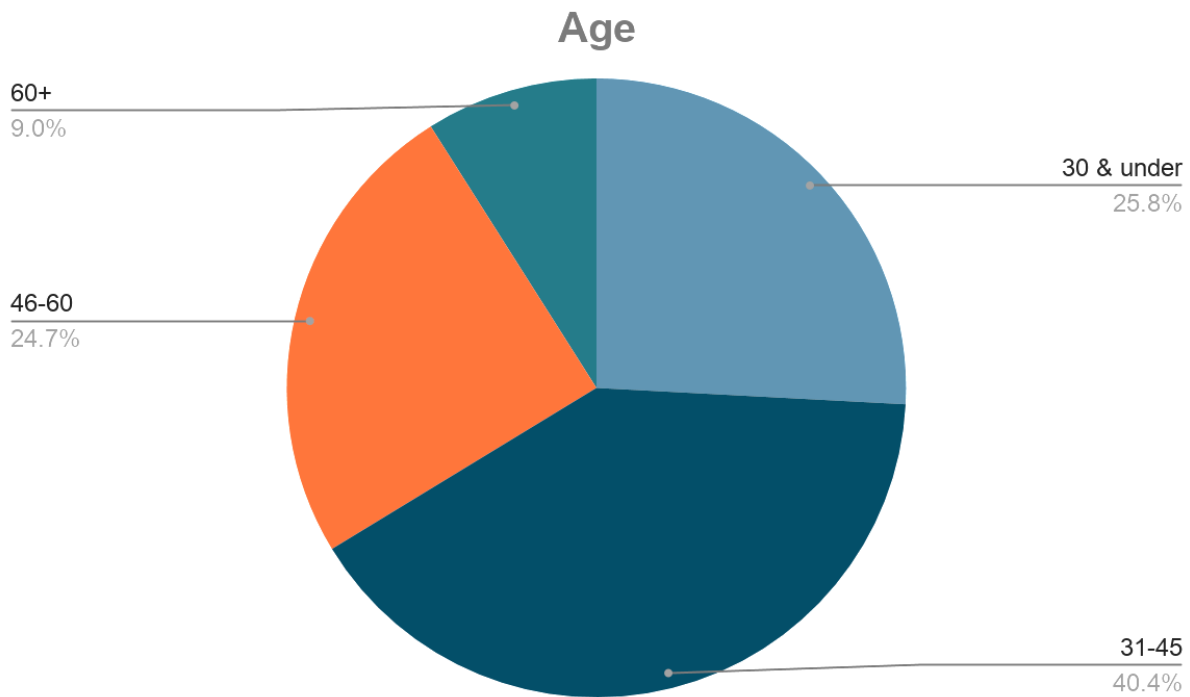
The Equality and Human Rights Commission states that in addition to the legal duty, compliance also demonstrates effective business and service outcomes.. Organisations that are able to reflect the diverse needs of its end users, will find that it carries out its core business more efficiently, is able to better inform decision-making and can lead to services that are more appropriate to the user.

A workforce that has a supportive working environment is also more productive and therefore more cost effective.

The next sections demonstrate the protected characteristics covered by the Equality Act and for the purpose of the paper provides analysis alongside relevant alignment with the Trust People Strategy.

3.1 Analysis: Age

Build an inclusive and diverse team



As of 31 March 2020 the Trust employed 5,138 employees, an increase of 181 employees in comparison with the previous year.

Overall, our data demonstrates a balanced and representative age demographic in all trust departments, with a number of generations working side by side. Our age profile also broadly aligns to NHS workforce averages.

Our most notable change from 2018/2019 is our 46-60 age group, which has decreased by 9%. This is despite the fact that the 46-60 age group were under-represented in terms of leavers.

All other age group representation therefore increased, 30 and under by 2%, 31-35 by 4% and 60+ grown by 2%.

Supporting and developing our team

Despite the decrease of staff in the 46-60 age group, staff aged 55 represent 20% of the Trust's workforce. This poses a risk given potential retirements and or reduced working hours of staff in this group.

The effect may result in a loss of experienced staff aged 55 and above and given the current difficulties in recruitment of some health care roles, this may lead to an increase in vacancies and an increase in agency staff usage. The impact may result in reduced patient care due to difficulties in staffing.

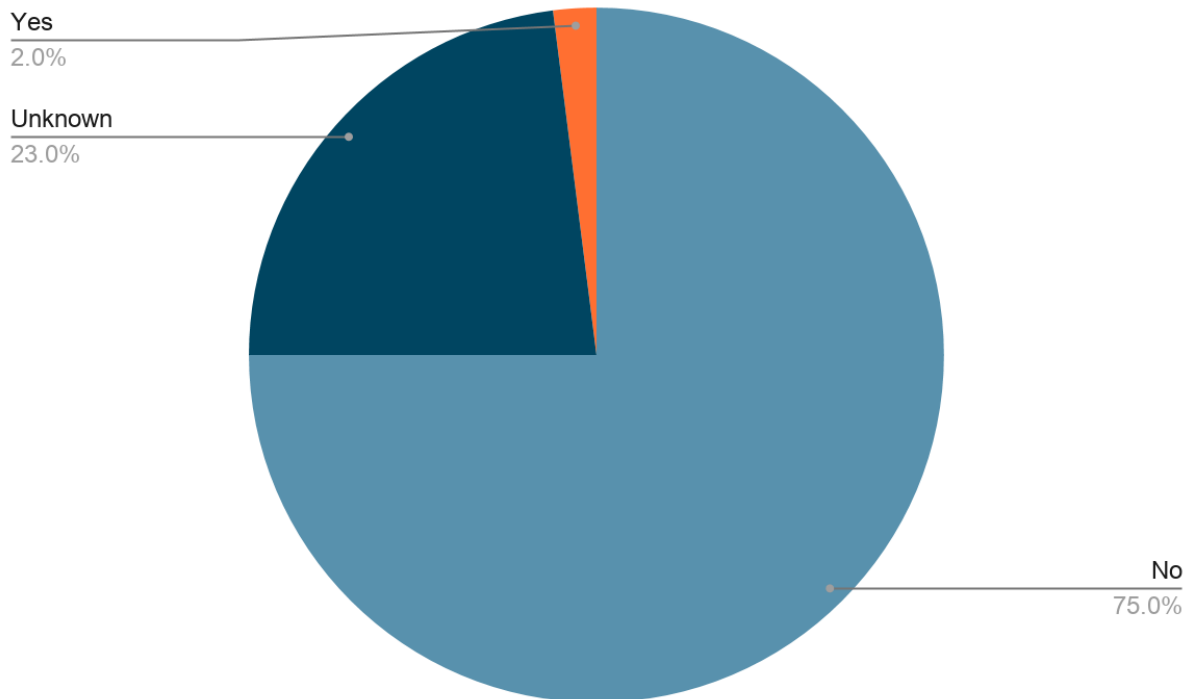
Work is currently being carried out to determine the areas most at risk and coaching sessions have been set-up to enable older employees to have discussions about how they can “wind down” towards retirement, rather than leave the trust.

Moving forwards

[The NHS Working Longer Group](#) was established to examine the implications of a raised retirement age. This includes deteriorating eyesight and motor skills (a concern of surgeons); the physical strain of lifting and handling patients (cited by nurses); the risks associated with working in hazardous work environments (noted by paramedics) and the stress of working in an increasingly stretched health service (mentioned by almost everyone).

Further work in relation to mitigating these challenges are aligned to our work in relation to disabilities, which is outlined below.

3. 2 Analysis: Disability



Building an inclusive and diverse team

We have doubled the number of staff who have disclosed that they have a disability to 2%, which is just below the overall NHS average of 3%. This is significant progress as it has remained at 1% in previous years

These figures remain significantly below national averages, such as a House of Commons 2020 report on Disabled People in Employment, which stated 19% of the working age population have a disability.

Given so few colleagues share their disability status on ESR, no significant conclusions can be analysed from the data above.

Supporting our team

Significantly, we know the majority of disabilities are acquired during an individual's employment and most ESR's are completed at the start of their employment.

Some of the actions we have implemented to increase this data include, regular comms in our all staff bi-weekly email, promoting a step-by-step guide to complete ESR, highlighting what the data is used for and targeting the members of our disabled staff network Diversability.

We also launched a 'Please Communicate Clearly' badge for colleagues with auditory impairments who rely on lip reading and have therefore been impacted by the wearing of face masks. The application form for these badges also included a reminder of the need to update ESR.

A number of our colleagues who have been shielding from Covid 19 also fell within our disabled staff demographic. The Trust has pro-actively supported them throughout the pandemic through redeployment and via our Clinical & Absence Hubs.

The HR Absence Hub was created to ensure the Trust was keeping in touch with colleagues who were absent from work with Covid-19 symptoms, had to isolate or were classified as clinically extremely vulnerable.

The Hub support staff via Absence Response Managers who have detailed conversations with staff about their absence, the help they may require to return to work and establish a timeline of on- going contact. They also sign post staff to support that is available and remind them of the various wellbeing initiatives offered by the Trust.

A mental health condition is also considered a disability if it has a long-term effect on your normal day-to-day activity, as per the Equality Act 2010.

The Trust therefore has a number of actions in place to mitigate staff burnout and increase specialist psychological support, such as:

- the recent appointment of a full-time onsite counsellor
- development of a referral pathway to embed and enhance a coordinated and streamlined service with links in other services such as Occupational Health and Pastoral Care
- counselling services aligned to existing remote psychological support that is offered across the West Essex and Hertfordshire NHS Integrated Care System. This includes the Employee Assistance Programme and other support lines such as “Here for You”.
- Adult and Children Safeguarding nurses are also visible daily in clinical areas from Monday to Friday to provide advice on any safeguarding cases or concerns. They are supported by the clinical nurse specialists.
- an annual Health and Wellbeing calendar which will support national awareness campaigns, as well as hosting more local events such as Kindness Week, Long Service Awards, Star of Herts and Winter Wonderland. The Trust has also booked Project Wingman to return with their new bus initiative in the Summer and will attend all sites as part of a Wellbeing event.
- ‘We Value You’ week in November 2020, which celebrated of the wonderful staff within the trust and recognised their hard work throughout the pandemic.

Developing our team

Training days to re-integrate clinically extremely vulnerable staff back to working on site have taken place alongside cultivation of peer-to-peer support networks.

Our Diversability staff network also help ensure the Trust is not making assumptions about the lived experiences of disabled staff and does so by;

- supporting staff who consider themselves as having a disability or long-term health condition
- raising awareness within the Trust of different disabilities
- improving the experience of staff who have a disability / long-term health condition
- review the Trust's Workforce Disability Equality Standard (WDES) data and actively contribute to the Trust's [WDES Action Plan](#).

The network are instrumental in developing a Reasonable Adjustments Passport that seeks to improve outcomes for staff by enabling individuals to easily record information about themselves and request reasonable adjustments with their line manager in a structured format.

Moving forwards

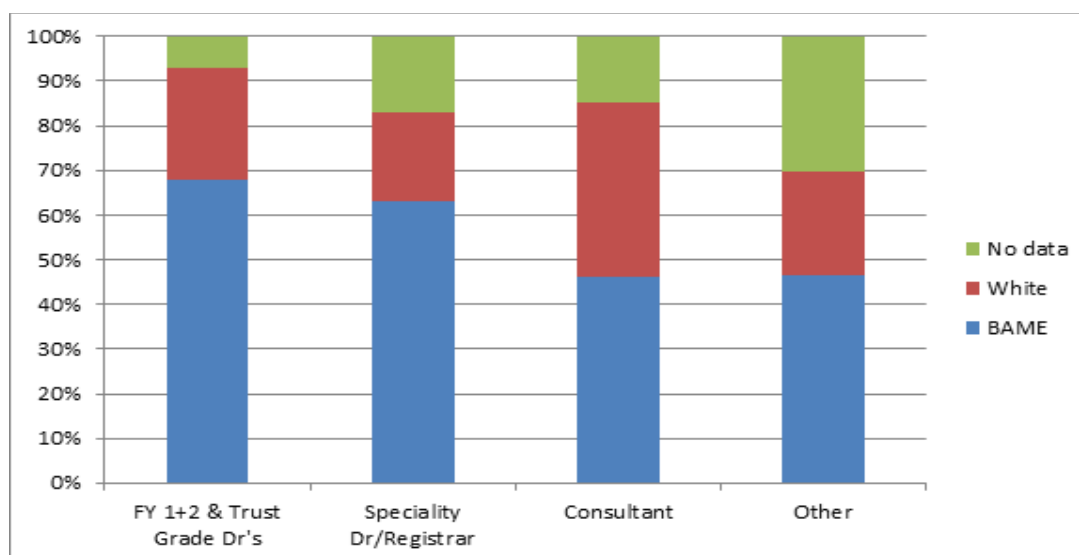
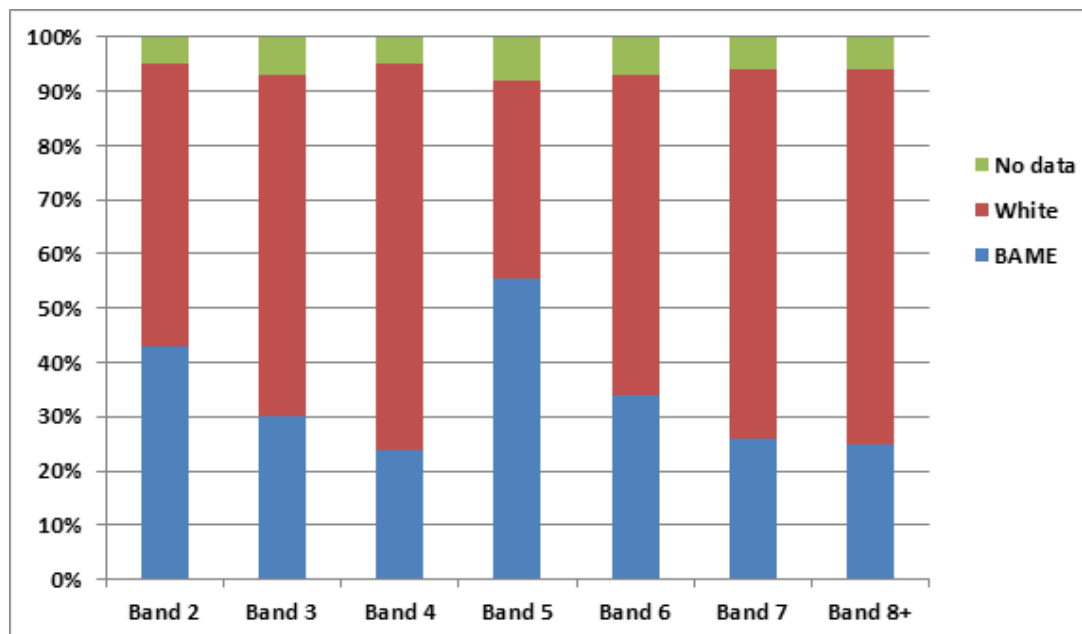
In the short term we have been fortunate to partner with Watford Football Club and Project Wingman to offer staff additional rest areas. The Trust has also developed a 'Changing Herts' project group who have been overseeing the development of the physical environment, leading to the redevelopment of staff rest areas. This includes enhancing the physical environment within critical care with a 'calm zone'.

In the long term the redevelopment of West Hertfordshire Hospitals NHS Trust's estate is the most significant opportunity to ensure our physical environment is more inclusive for our disabled staff.

We expect to hear if funding has been approved by the end of 2021 or early 2022 in respect of the transformation of the site and buildings at Watford General Hospital (with up to 90% new buildings) and refurbishment of our hospitals in Hemel Hempstead and St Albans.

3.2 Analysis: Ethnicity

Building an inclusive and diverse team



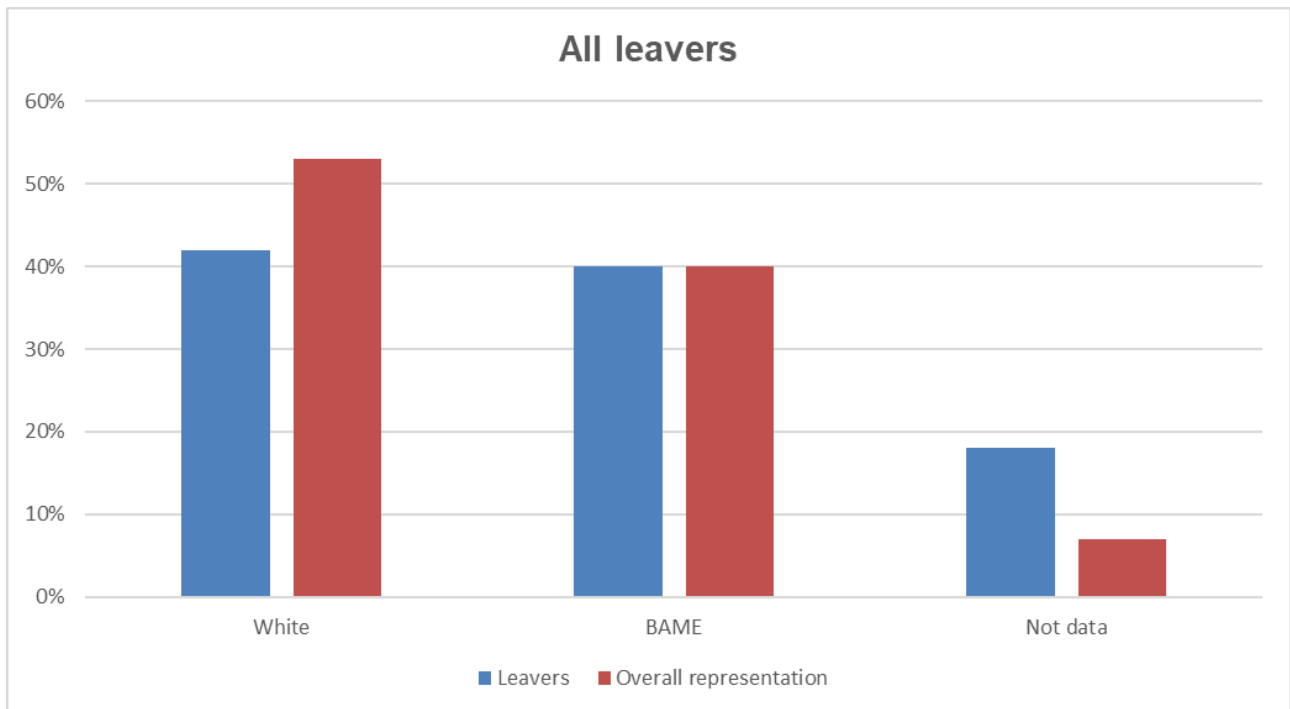
Overall BAME representation has increased from 37% to 40% across the Trust. This is significantly above the local representation of West Hertfordshire, which ranges from 9% in Hemel Hempstead to 20% in Watford.

Our BAME representation is also higher than neighbouring Trusts just outside of London, such as East & North Hertfordshire Trust's 29% and Buckinghamshire Trust's 23%.

For the purpose of this report the BAME staff demographic does not include colleagues of White European heritage, who potentially account for around 9% of all staff according to ESR.

Colleagues of an Indian heritage make up the largest ethnic group, representing at least 14% of all staff.

This year's data also demonstrates we have more of an accurate understanding of our staff ethnicity, with "No data"(staff who do not wish to share their ethnicity) decreasing from 8% to 7%. However, colleagues who do not share their ethnicity on ESR were twice as likely to leave the Trust, as the below demonstrates:



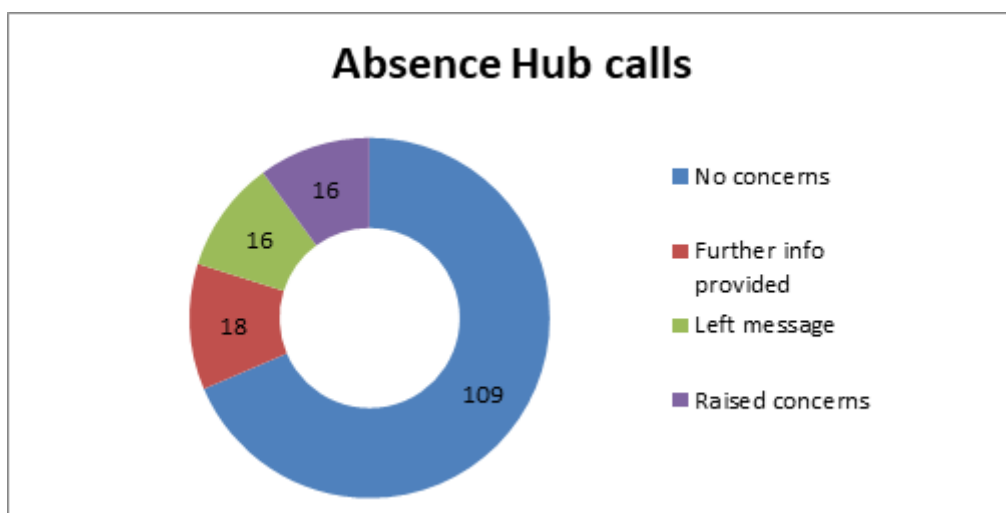
Supporting our team

Due to the disproportionate impact of COVID-19 on BAME communities and healthcare workers, in May 2020 the Absence Hub contacted all non-white staff members (including those with no ethnicity shared on ESR).

The objective of these calls is to:

- a) Improve clarity of information by highlighting/signposting support (a number of our BAME colleagues are not desk based and information may not be as readily accessible to them)
- b) check in with staff confidentially and independently of their line manager (our staff survey suggests that BAME colleagues are twice as likely to report discrimination from a team leader/line manager at the Trust)
- c) uncover any themes which could help us create more targeted interventions.

The below chart provides a snapshot of the calls as of June 2020.



The most commonly raised concerns were:

- a lack of adequate PPE
- breaks not being long enough
- poor relationships with line managers
- anxiety over contracting Covid 19.

A number of unsuccessful call attempts were also made and have not been included in the above chart.

Significantly, the Trust also developed a Covid 19 diagnostic pathway which provides staff with access to clinical support in managing Covid 19 symptoms and access to various pathways, including the Covid 19 Virtual Hospital. This ensures BAME staff who are symptomatic are automatically categorised as "high risk" and placed in the Virtual Hospital.

Added protection is also embedded in our Covid 19 risk assessments for staff who are BAME, pregnant, have co-morbidities and or 60 years old and over.

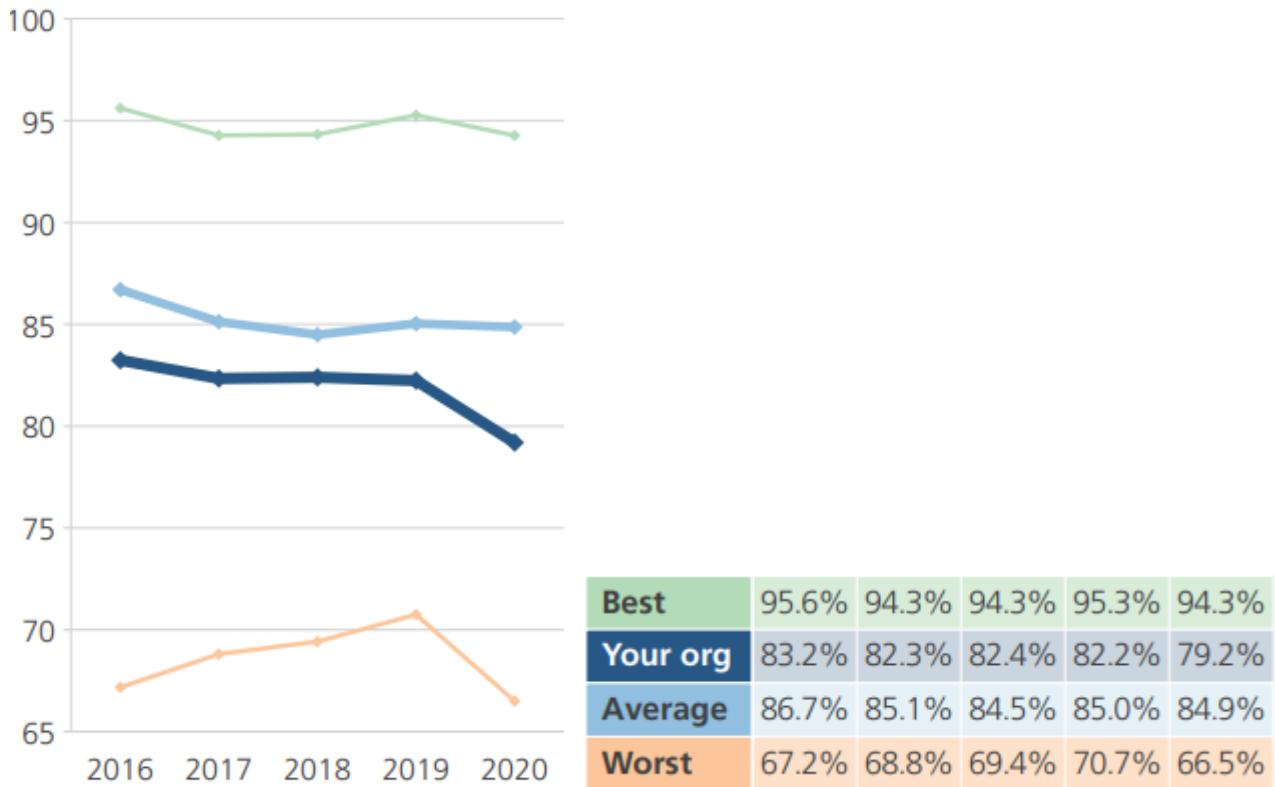
We have also put in place a number of actions to improve the Covid 19 vaccine take up this includes, utilising local faith leaders, increasing awareness for staff who would like to become pregnant and increasing access to walk-in clinics.

A telephone support service for BAME staff, available 7 days a week, 2pm-8pm was also launched in June 2020 in collaboration with the Hertfordshire and West Essex NHS Integrated Care Service (ICS).

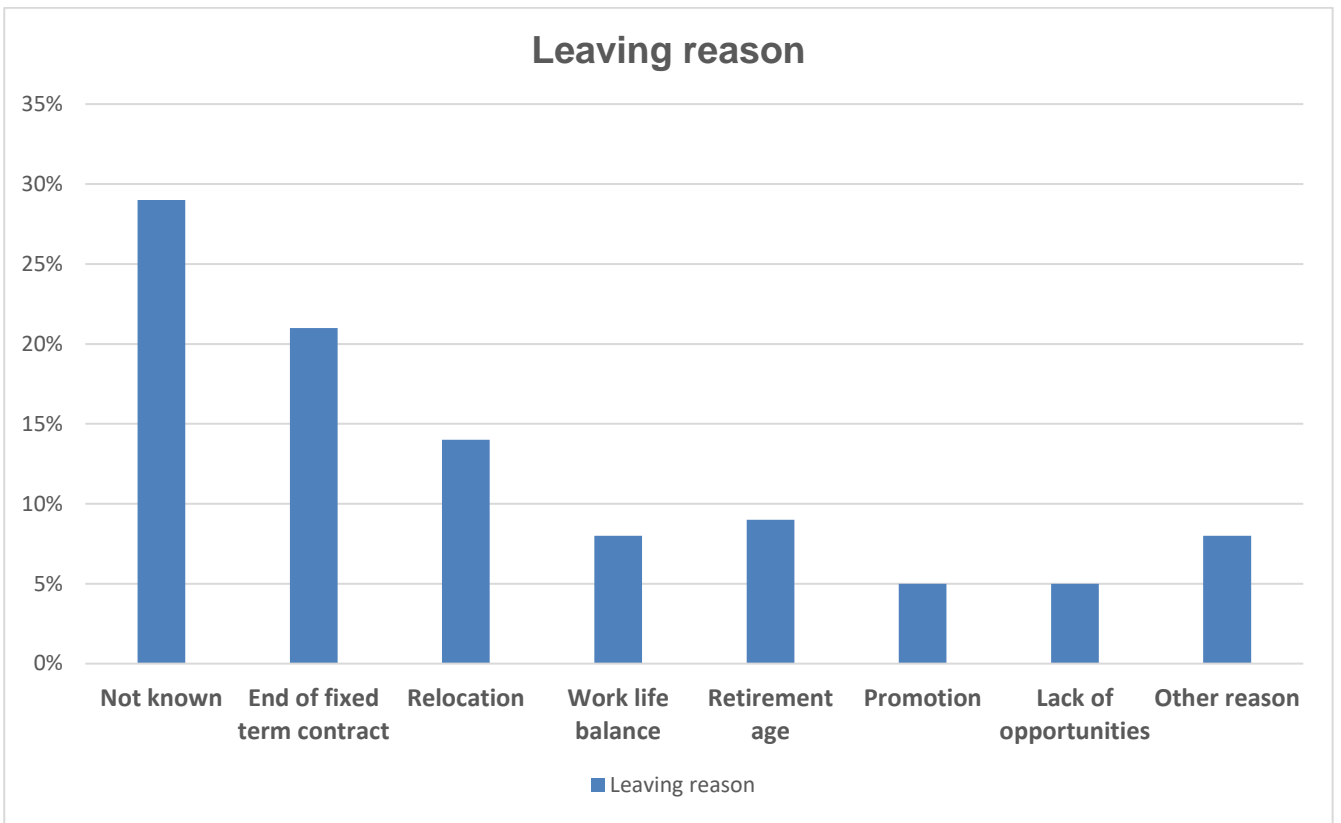
It is important to note that the Trust sadly lost 6 members of its BAME staff to Covid 19, the actions included in this report provide an insight into the measures taken to reduce the risk and is continually monitored in line with the Trust's risk register and committee.

Developing our team

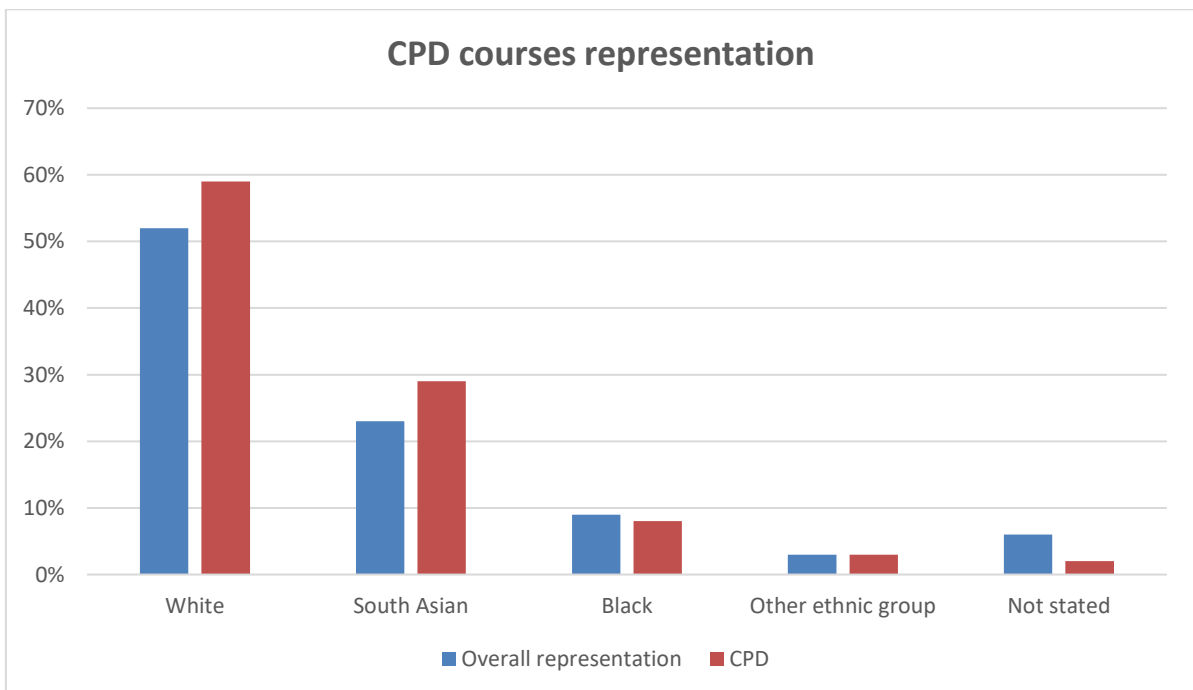
Our People Strategy sets out our goal, “for everyone to enjoy their working lives with us” and access the right information, right support and are developed at the right time, however, according to the 2020 staff survey only 79% of staff, believe the Trust acts fairly with regard to career progression and promotion regardless of ethnic background, gender, religion, sexual orientation, disability or age. The tables below provides further detail:

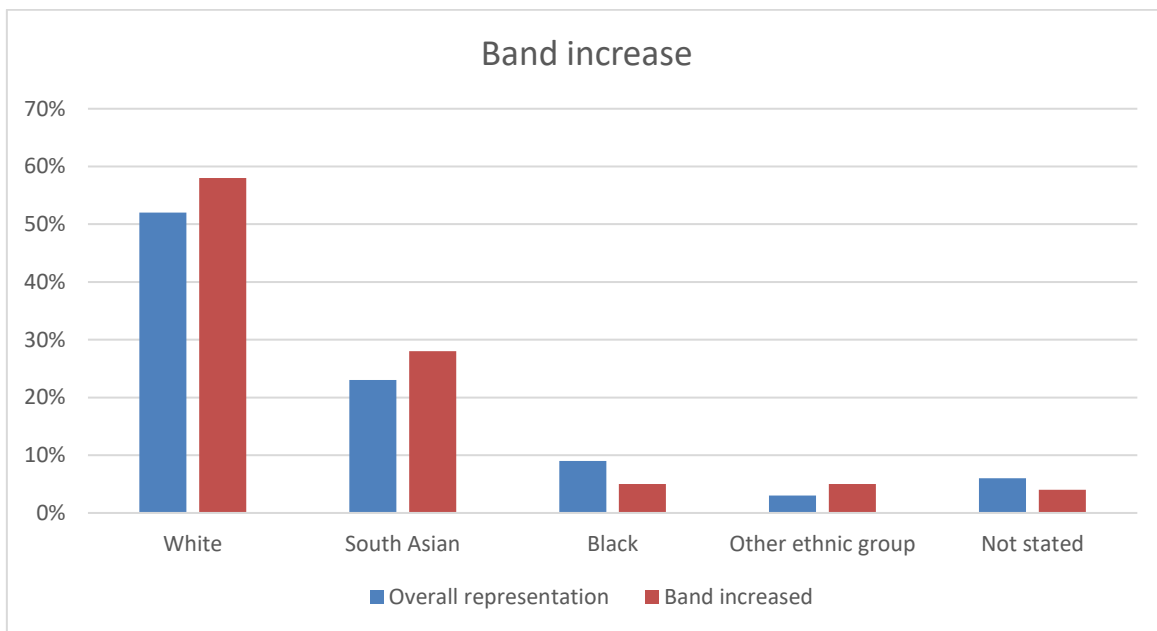


Out of a total of 889 leavers, 25 staff have resigned (from all staff groups) due to a lack of opportunities and a further 15 to undertake further education or training elsewhere.



In order to evaluate the lack of opportunities “leaving reason” more closely, a breakdown of staff who have successfully applied for continuous professional development (CPD) funding is included below. The only protected characteristics we can examine due to data limitations are gender (included in section 3.5) and ethnicity:





Further work to undertake the kinds of courses under-taken, such as the ratio of mandatory to non-mandatory training is underway.

The Trust [Workforce Race Equality Standard \(WRES\) action plan](#) also has a number of actions in place designed to improve BAME representation in our most senior roles, this includes

- diversifying interview panels and increasing interviewer training
- running focus groups with our BAME staff from Band's 8b, 8c and 8d to understand barriers and
- evaluating our BAME Pay gap via Divisions.

Our annual [Workforce Race Equality Standard \(WRES\) action plan](#) sets out our ambitions in more detail.

Moving forwards

Our governance structure for our work in relation to ethnicity are now significantly improved, particularly through our BAME staff network Connect who re-launched with a new Terms of Reference with aims/deliverables and significantly expanded roles/steering committee.

The objectives of Connect are to:

- support the Trust in its strategic objectives to provide the best care for every patient
- help the Trust be a great place to work by utilising the skills and resources of BAME employees in order to add value
- ensure the Trust is inclusive with a focus on improving BAME staff experience.

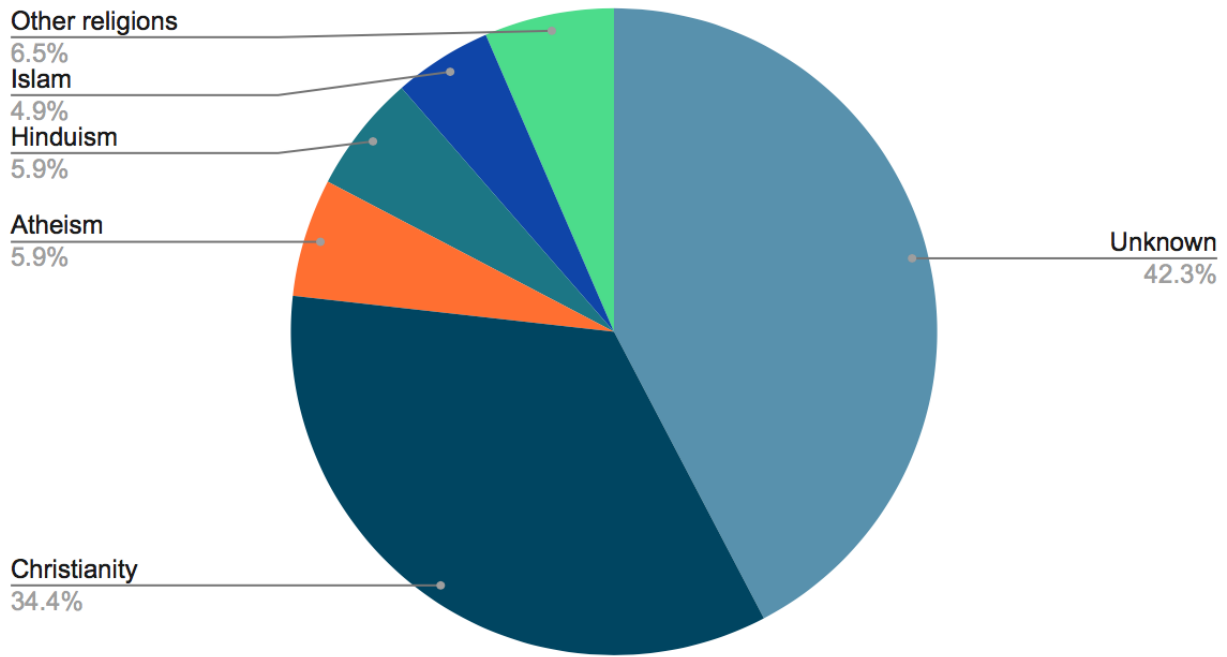
There is also now a standing item for diversity and inclusion on our People, Research & Education Committee (PERC) which reports into Board. The Chair of Connect, attends

these meetings and our disabled staff network Diversability's minutes are included in the meeting papers for information.

3.3 Analysis: Religion

Building an inclusive and diverse team

Points scored



Despite the percentage of “Unknowns” decreasing by 5% our analysis of religion/faith continues to be impacted by the fact that almost half of staff colleagues do not share this information on ESR.

The “unknowns” are also significantly higher than neighbouring Trusts, such as East & North Hertfordshire where 29% of results are unknown and the Royal Free where 28% are unknown.

Due to the higher number of “unknowns” virtually all groups are under-represented in the data when compared to the local population.

Supporting our team

The trust are working towards creating a culture of psychological safety where staff see the benefit of sharing their religion.

The Trust's Chaplaincy offers broad-based pastoral care (emotional, spiritual and religious) to staff, as well as to patients and relatives of all faiths and backgrounds.

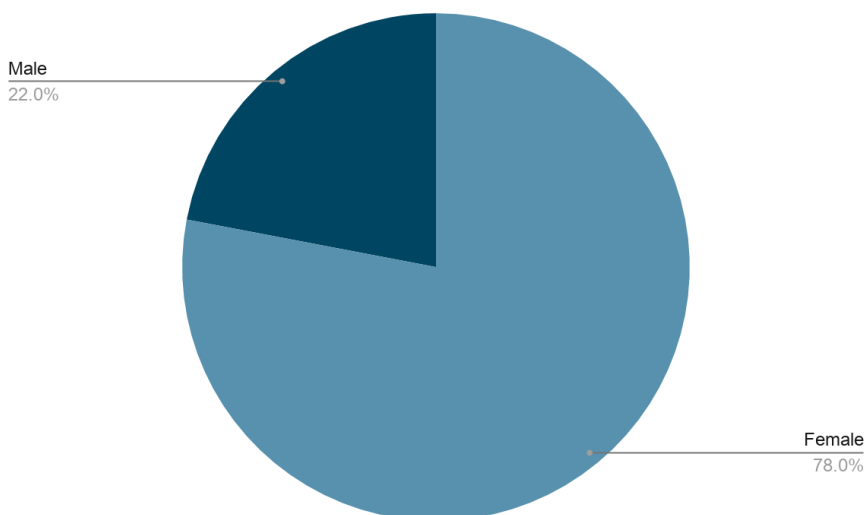
Chaplains provide a confidential 'listening ear' and are available each day, with an on-call service out of hours.

Moving forwards

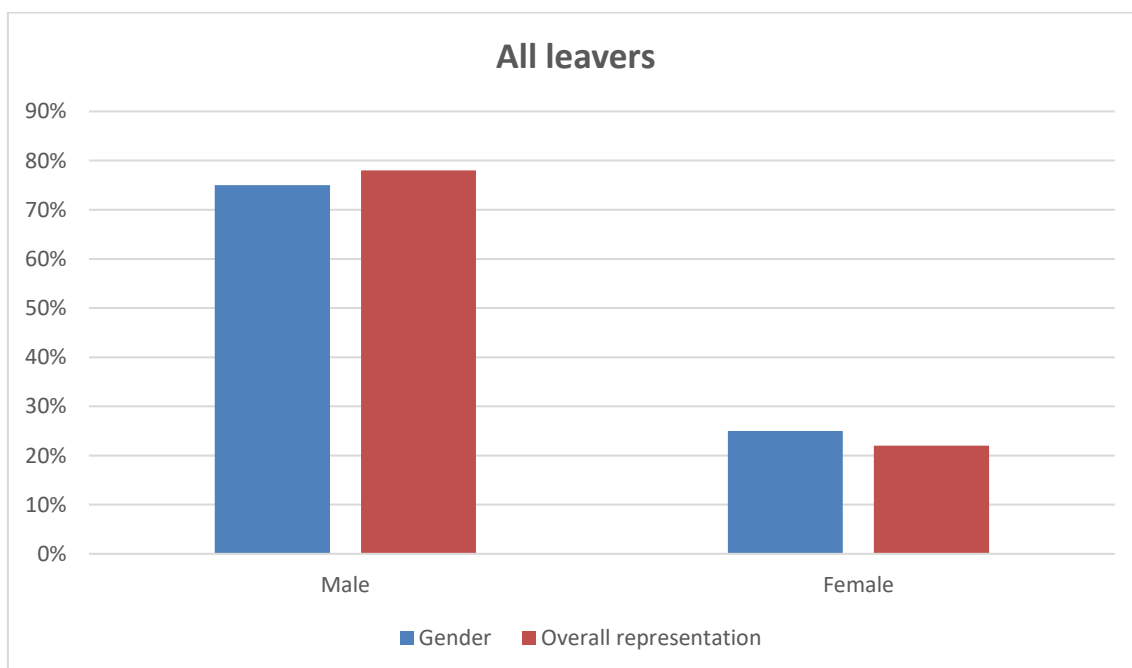
The recent refurbishment of the onsite pastoral and counselling rooms has proven to be extremely beneficial for staff with high utilisation. They can be used for support, quiet reflection, relaxation, meditation, and a variety of other types of support.

3.5 Analysis: Gender

Building an inclusive and diverse team



Our male demographic increased by 1% which means our gender profile continues to closely mirror the NHS workforce as a whole. There is also no disparity in the demographic of our leavers shown in the table below:



Supporting our team

One of the limitations of ESR is that it limits the way colleagues who do not identify as male or female can be classified. The only way for colleagues to do so is by identifying as “Mx” (gender neutral title) in the title category.

We value, welcome and celebrate colleagues of all gender identities and encourage everyone to be their true selves at work; and recognise that gender identity is broader than simply male and female.

We have put this into practice by asking all staff to demonstrate care and respect for the transgender community by including preferred gender pronouns in email signature, alongside your name. (Examples include: “he, him, his”, “she, her, hers” or “they, them, theirs”).

We have also launched online transgender awareness courses.

Developing our team

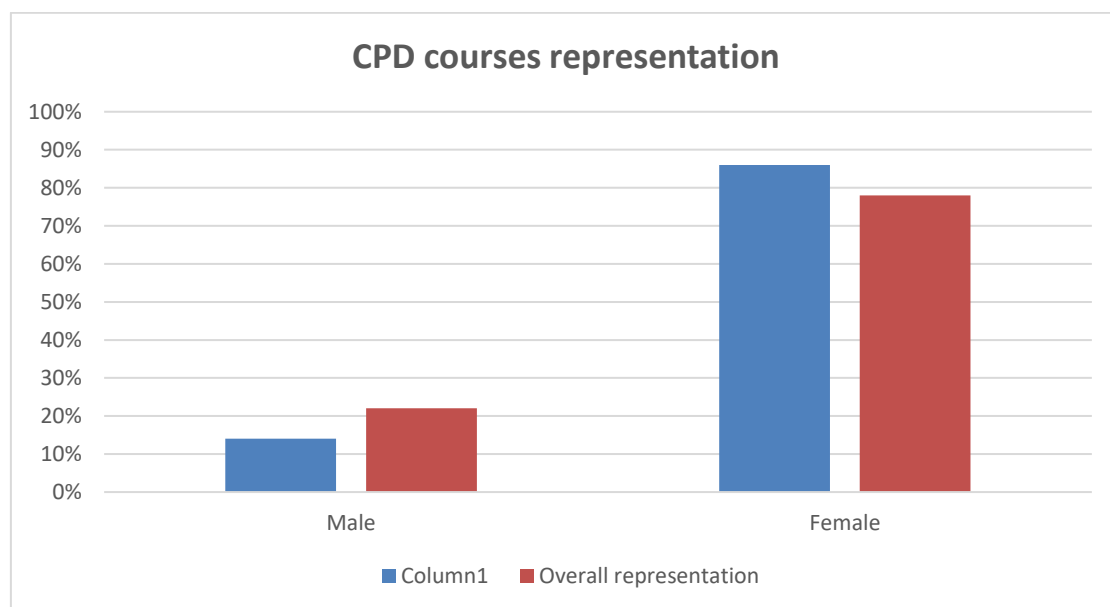
While our gender ratio breakdown is broadly reflected in our pay quartiles the exception is the upper pay quartile; which is a clear indicator of our gender pay gap due to the over-representation of male Consultants. Our full report and actions in relation to the Pay Gap [can be accessed here](#).

In August 2020 the Trust Board supported a major consultation exercise run by NHS Employers to gain input into proposed reforms of the Clinical Excellence Awards scheme, which is how our Gender Bonus Gap is calculated.

NHS Employer’s view is that the local current clinical excellence award (LCEA) scheme is not working as it should. They see it as unfairly disadvantaging BAME doctors, women (exacerbating the gender pay gap) and those who work part-time.

The Department for Health & Social Care [also report](#) a lack of support for colleagues experiencing the menopause as another factor which causes the gender pay gap. The trust is therefore planning on rolling out further training to boost menopause awareness, via in house training following the completion of “Train the Trainer” courses in June 2021.

The Trust is continuing to evaluate the demographic of staff taking up Continuous Professional Development (CPD). There were 313 CPD courses taken up from April 2019 – March 2020 with females marginally over-represented:

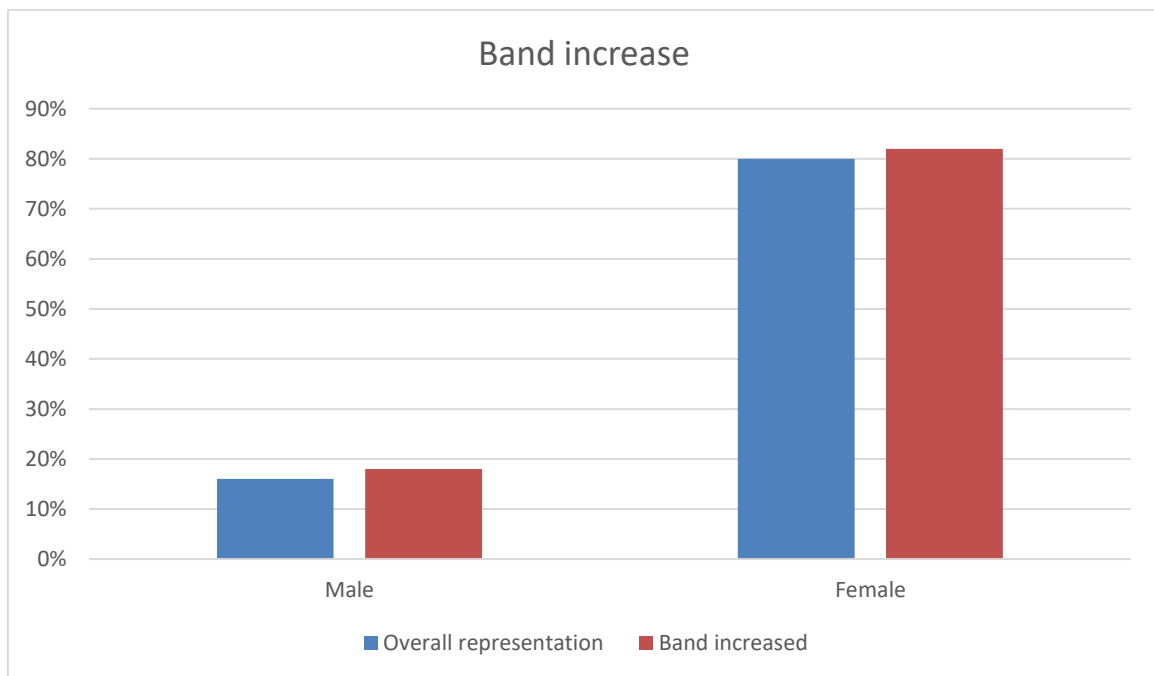


CPD refers to any learning, education, training or staff development activity undertaken by an employee, the completion of which is neither a statutory requirement or mandated by the organisation (e.g. clinical records system training). Last year the CPD budget was £429k for Trust CPD and £112k HEE totalling £541k available for the non-medical workforce (as CPD funds are not for medical staff).

In addition to CPD funding, the Trust also has a number of development initiatives in place, which include:

- Careers Matters: the trust's dedicated careers advisory service
- Introduction of more in-depth coach training programmes to provide more available coaches within the organisation. (If capacity is increased sufficiently, allowing the Trust's coaching service to be available on demand to all staff)
- An application for the Trust to become a Teaching Hospital
- Participation in the regions Accelerated Directors Development Scheme (ADDS).

These development opportunities enable 374 staff, increase their pay band, which equates to 8% of all staff from April 2019 – March 2020. A breakdown is provided below:



Moving forwards

CIPD [state](#) one valuable tool in improving workplace equality and creating inclusive cultures is flexible working. It can help parents return to work, reduce the gender pay gap, help people with fluctuating health conditions stay in work and help carers to balance their work and caring responsibilities.

The COVID-19 pandemic accelerated our work in relation to flexible working, most notably through our newly launched Agile Working policy.

The policy highlights the Trust needs to be satisfied that the employee's role and personal attributes mean they should be able to do their job effectively. This includes criteria for:

- self-motivation and discipline
- time management
- accessibility
- being able to separate work life and home life
- health and safety risk assessment

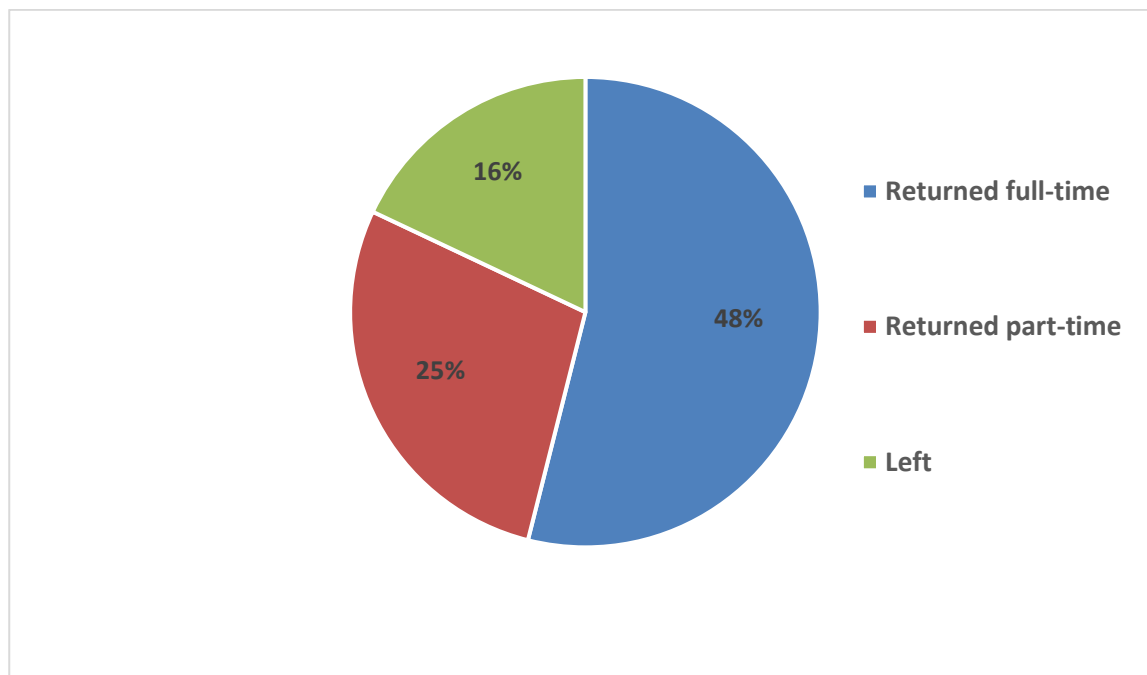
The policy also highlights that managers need to take reasonable steps/responsibility to review staff mental health/wellbeing while working from home and requests for agile working will be considered as a reasonable adjustment under the Equality Act 2010.

3.6 Analysis: Pregnancy & Maternity

Building an inclusive and diverse team

From April 2019 – March 2020 128 members of staff went on maternity leave, 83% of them returned to employment at the Trust. This is in comparison with 87% in 2019 and 80% in 2018. Neighbouring East & North Hertfordshire NHS Trust have a slightly higher retention rate of 90%.

Supporting our team



To put the above chart into context, 70% of employees overall are full-time and 30% part-time, which is the same as the previous year. This varies slightly across Banding:

- At least 75% of our Band 5's, 8's, 9+'s and Consultant's work full-time.
- Between 62%-66% of our Band 2's, 4's, 6's and 7's work full time.
- Only 55% of our Band 3's work full-time.

The Trust has also launched a Carers staff network, the network recognises the correlation between caring responsibilities and the impact this may have on the hours that they work. The Carers staff network aims to:

- provide peer to peer support for staff with caring responsibilities
- reduce the isolation that can be felt by staff carers
- highlight the support available to staff by the Trust
- share useful resources
- engage with local support for carers

Developing our team

Due to the COVID-19 pandemic, the Trust has ensured that:

- all pregnant staff have a risk assessment about the risk of continuing work, which may involve occupational health
- Pregnant staff who are under 28 weeks' gestation can only continue working in direct patient-facing roles where the risk assessment supports this
- pregnant healthcare workers who are more than 28 weeks, or who have underlying health conditions such as heart or lung disease at any gestation, should be recommended to stay at home. Where pregnant healthcare workers in this group choose not to follow government advice, they must not be deployed in roles where

they are working with patients

- the occupational health assessment must take into account the pregnant worker's physical and mental health.

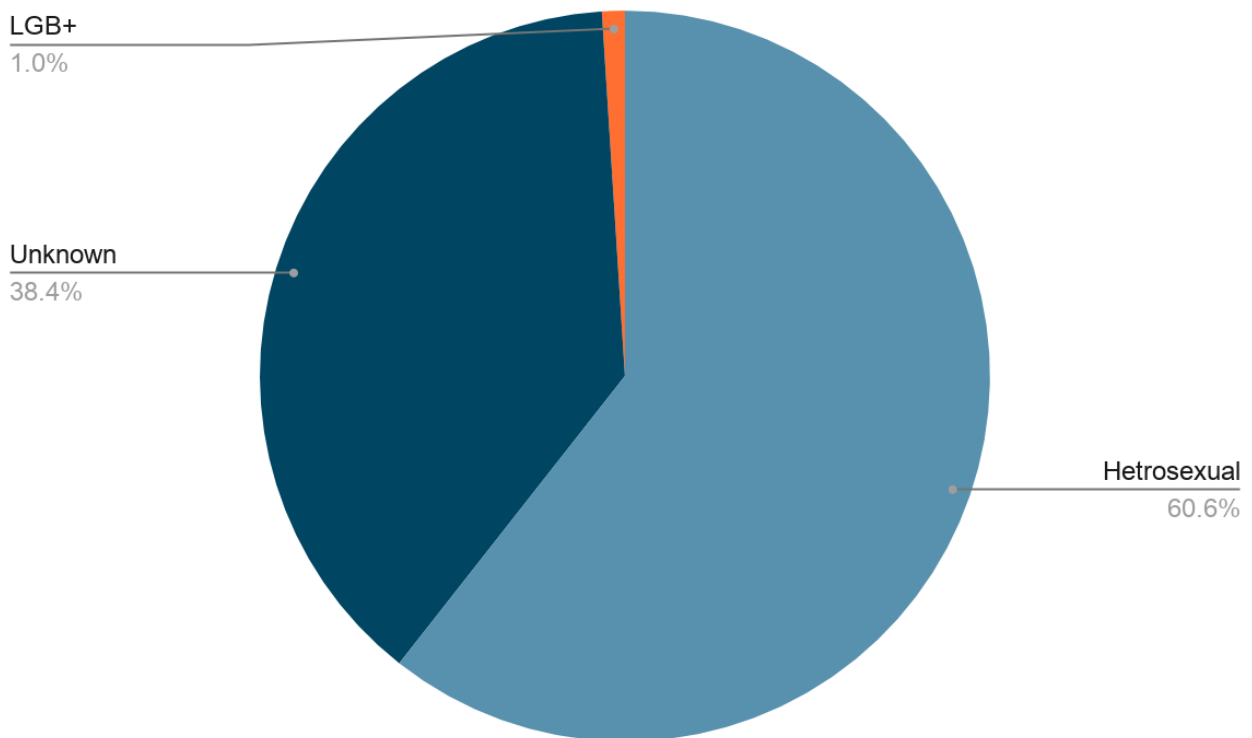
The Trust will be able to analyse the impact of these measures on retention by summer 2021.

Moving Forwards

Our work in relation to moving forwards for pregnancy and maternity mirrors our work in relation to gender in 3.5.

3.7 Analysis: Sexual orientation

Building an inclusive and diverse team



Our heterosexual demographic increased by 5% in comparison with an increase of just 0.1% for our lesbian, gay and bisexual (LGB+) colleagues.

Given the UK LGB+ population is estimated to be anywhere from 2% (Office of National Statistics) to 6% (Treasury) upwards the Trust's declaration rates therefore fall some way short.

Supporting our team

Our recently launched LGBT+ staff network utilises role models from the community to help demonstrate staff can bring their true authentic selves to work. The network is currently developing a work plan to increase psychological safety in relation to staff and

this will be measured by information on ESR.

Developing our team

A training bid has been submitted for colleagues to participate in Stonewall's LGBT Workplace Allies and Role Models training programmes.

The Workplace Allies programme gives non-LGBT individuals the opportunity to explore what it means to be an ally and the space to identify how they are going to create an inclusive environment for everyone.

The Role Models programme gives individuals the opportunity to explore what it means to be a role model and the space to identify how they are going to create an inclusive environment for everyone.

Moving forwards

There have been around 40 changes to the Electronic Staff Record (ESR) platform used by the Trust since March 2019, which include two new portlets for the "My ESR Dashboard" following the success of the Equality and Diversity portlet available for applicants. This gives quick and simple access to manage key diversity data such as: religious belief, sexual orientation and ethnic origin the portlet.

NHS England/Improvement (NHS E/I) are also currently leading on a review of all protected characteristics which could result in a Unified Information Standard for Protected Characteristics (UISPC) or a number of separate information standards.

4. Risks

Risk	Mitigating action
The binary Sex options (M/F) in ESR reflect the legal requirements of HMRC, GPG reporting, etc.	The question of non-binary gender was considered in the Unified Information Standard (UISPC) review. The recommendations are now with the Department of Health for consideration (albeit with no clear timeline).
Lack of data in relation to religion/faith and disability	Continue to increase psychological safety through the work of our Spiritual & Pastoral

	Care team and our Disability Champion/Diversability staff network
Colleagues experiencing equal opportunities for development and promotion	This is registered as a risk on the Trust's corporate risk register and therefore evaluated and actioned every month
Disproportionate impact of COVID-19 on the Trust's BAME staff	This is registered as a risk on the Trust's corporate risk register and therefore evaluated and actioned every month

5. Recommendation

PERC and Board are asked to approve this work as evidence that the Trust is meeting the Public Sector Equality Duty requirements to show due regard to:

- eliminate unlawful discrimination, harassment and victimisation
- advance equality of opportunity, and
- foster good relations between those who share a protected characteristic and those who do not

Our future work plans are set out in detail via the Trust's People Strategy Implementation Plan which is monitored in the Great Place to Work Meeting.

Andrew McMenemy, Chief People Officer

15 April 2021