

Evaluation of the Single Equality Scheme 2008 – 2011

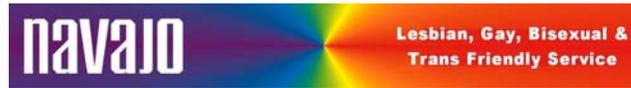
Our vision:

“21st Century health care with well-being at its heart”

Our mission:

*“To improve the lives of the people we serve and ensure that health matters
across the whole community”*

Should you require this information in another language or format (e.g. large print, Braille etc please contact Lancashire Care NHS Foundation Trust Communications Department at: Sceptre Point, Sceptre Way, Walton Summit, Bamber Bridge, Preston, PR5 6AW, Tel 01772 695300.



Contents

Introduction	3
Commitment to Equality and Diversity	3
Scrutiny	4
Governance	5
Action plans	7
Conclusion	18
Recommendations	21
Bibliography	22



Introduction

About Lancashire Care NHS Foundation Trust

Until June 2011 Lancashire Care NHS Foundation Trust provided mental health services for adults of working age and older people and substance misuse services for a population of around 1.4 million people in Lancashire.

Since Transforming Community Services took place on 1 June 2011, the workforce in the Trust has almost doubled to over 7000 staff. The Trust now provides specialist mental health services and a wide range of community based health services from approximately 400 sites. The organisation is one of the largest providers of community based health services in England and Wales.

Commitment to Equality and Diversity

The Trust has a duty to promote equality as part of the Government equalities agenda. To ensure compliance with equalities legislation the Trust has, in the past, produced Race, Disability and Gender Equality Schemes and has actively delivered subsequent action plans. The Trust has also addressed equality on the other previous Government 'Equality Strands' of Age, Sexual Orientation and Religion and Belief. However, the decision was taken to incorporate the six 'equality strands' into one Single Equality Scheme (SES) as the Trust has always seen these equality issues as equal and interdependent.

As a Statutory Sector organisation, Lancashire Care NHS Foundation Trust has been, for many years, committed to eliminating unlawful discrimination and harassment and promoting equality of opportunity for all in terms of their gender, race and ethnicity, disability, age, religion/ belief and sexual orientation. This determination ensures equality runs through employment, service delivery and community engagement.

Questionnaires, focus groups, involvement and consultation events have informed Equality and Diversity action planning in the Trust since 2004 when the Trust's first Equality and Diversity Scheme was produced. The Single



Equality Scheme has included a Strategic Equality and Diversity action plan to deliver Key Performance Indicators and supporting operational action plans across clinical Networks and Corporate departments.

The Trust can now move into a new era of Equality and Diversity activity defined by the Equality Act 2010. Before it does so, the 2008 – 2011 Single Equality Scheme must be evaluated to provide a seamless approach to Equality and Diversity activity within the Trust. The evaluation will also support the organisation to identify new Equality Targets and develop the Equality Scheme for the next three years.

The Strategic updated action plan (appendix 2) has been live since 2008 and has been updated annually. This evaluation of activity including conclusion and recommendations will fully inform the Trusts new Equality Scheme 2012 – 2015 which will include Equality Targets in line with the General and Specific Duties of the Equality Act 2010.

Scrutiny

For the past two years the Trust has completed the Equality Performance Improvement Toolkit (EPIT) which was devised by NHS North West. The Trust's performance has been monitored by lead commissioners at Blackburn with Darwen Primary Care Trust. Previously, the Trust's performance on equality was monitored externally by Government through the Healthcare Commission and the setting of the Standards for Better Health. The Care Quality Commission (CQC) also has standards on Equality and Diversity which are embedded throughout all health care systems.

The extent to which Lancashire Care NHS Foundation Trust has complied with equality duties can also be assessed by the Equality and Human Rights Commission.



Governance

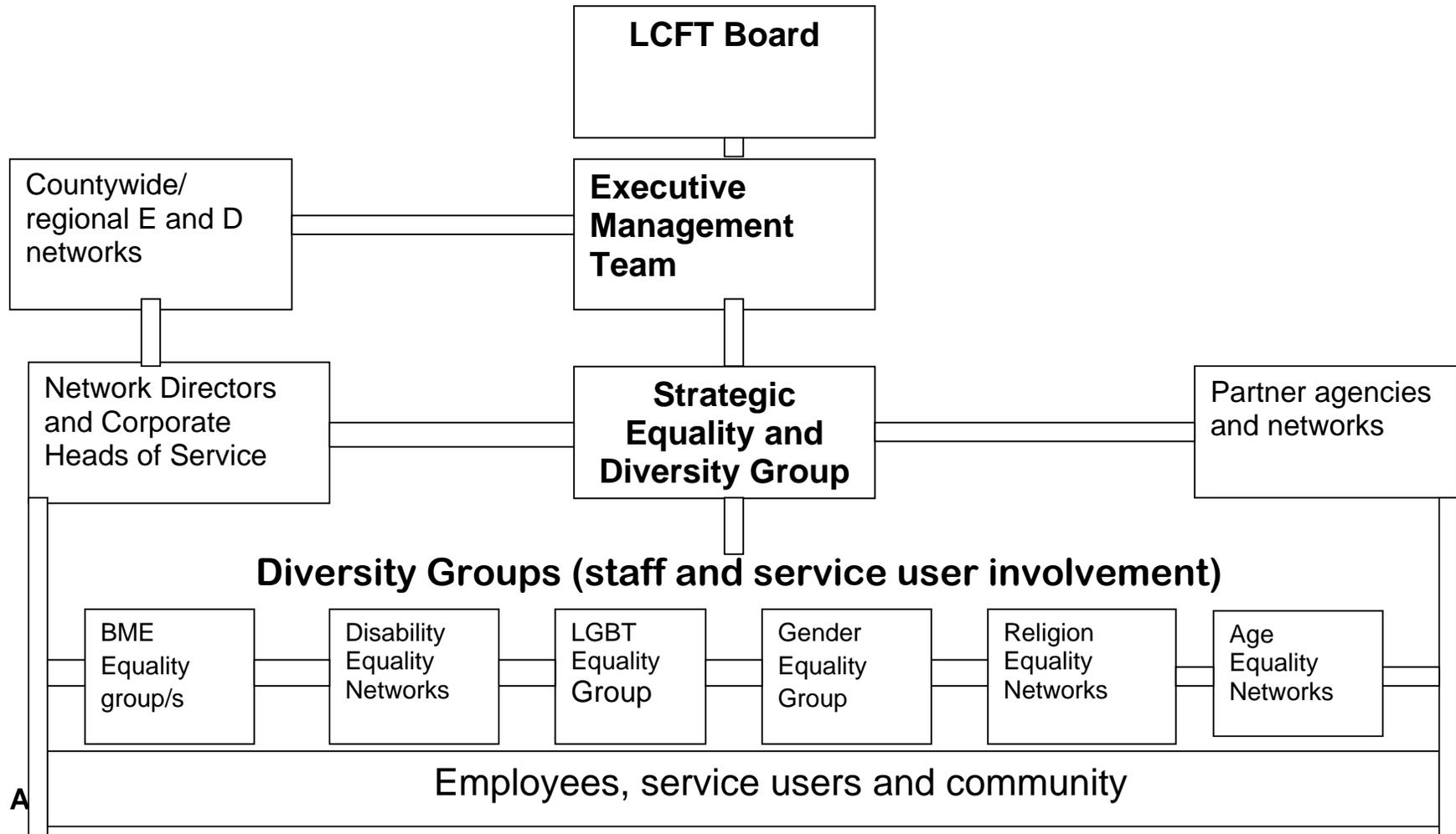
The current Diversity Structure (appendix 1) has helped the Trust to clarify how work on all equality strands were fed into the Strategic Equality and Diversity Working Group. The structure has been fully functional generally, and groups and Networks have come and gone in line with need and effectiveness. The Trust now has strong links with Third Sector organisations working around diversity.

Working with the Clinical Governance department, the Trust has carried out supporting research and audits to inform good practice around equality and diversity issues. Examples of this are available from the Trust's Equality and Diversity Lead (contact details on the last page of this document), or on the Trust intranet and internet Equality and Diversity sections. All work carried out has been evidenced based on and following good practice guidelines from the Department of Health and NHS North West.

Further work is needed to ensure service user and carer involvement in the Equality and Diversity structure, which is to be reviewed. This will form part of the Trusts future Equality Strategy based on the general and specific duties on the Equality 2010, local need and local, regional and National evidence.



Appendix 1 - Equality and Diversity Governance Structure



**Appendix 2
Lancashire Care Trust – Strategic Equality and Diversity Action Plan - evaluation**

Key Performance Indicator (KPI)	Priority year	Key tasks	Lead person/ Team	Success/ evaluation criteria/ measurables	Situation as of June 2011
1. Leadership that can promote equality and diversity a) High level appropriately skilled diverse representation is achieved and maintained b) Equality and Diversity outcomes relating to leadership, workforce, service improvement, and community engagement are embedded in commissioning and contractual frameworks in partnership with the PCT's and LCC	Year 1	Ensure Strategic E and D Working Group meets regularly involving senior managers from all areas in the Trust.	Director of Human Resources (HR)	Two way dialogue with operational E and D working groups to ensure delivery of KPI's – information captured in minutes of meetings and actions identified	Strategic Group has been meeting regularly since early 2007
	Year 2	Ensuring as a provider service that the Trust complies with Equality legislation and provides statistical data to Commissioners and supporting evidence by request.	Trust Board	E and D activity in the Trust measured through Commissioning agreements – explicit E and D targets within contracts	Equality Performance Improvement Toolkit completed and submitted to Commissioners 2010 and 2011,
	Year 2	Ensure all integrated services carry out joint Equality Impact Assessments (EIA) on all joint policies, procedures	Senior managers of integrated adult services	Joint EIA's completed, published and subsequent action plans being delivered	All integrated services use LCFT processes for EIA's which are published. Further work is needed to ensure meaningful quality of EIA

<p>c) Ensuring compliance with equality legislation and Health Care Commission equality standards are maintained</p>	<p>Year 1</p>	<p>and functions. E and D Standards for Better Health (SBH) returns completed regularly</p>	<p>E and D Lead</p>	<p>Green light achieved on all E and D standards</p>	<p>Equality and Diversity now subsumed into Care Quality Commission returns</p>
<p>d) Modelling of equality during meetings is prioritised</p>	<p>Year 1</p>	<p>All team meetings to address E and D through the embedding of the Trust Values</p>	<p>Trust Board, Network Directors and Corporate Managers Clinical Governance</p>	<p>Staff and managers able to discuss concerns around E and D linked to Knowledge and Skills Framework (KSF) Professional Development Plans (PDP) and Equality Impact Assessment (EIA) - Annual audit to be carried out</p>	<p>All Networks at Senior level have had development regarding EIA, mandatory E and D training. Trust Values reflect diversity which must be modelled across the organisation at all levels</p>
<p>e) Trust Board, Directors and other senior managers to take part in on going development around E and D issues</p>		<p>Trust Board to be involved in E and D Development session. Network Directors to discuss and agree E and D training needs and feed into the Strategic Training Group</p>	<p>E and D Lead Network Directors/ E and D Lead</p>	<p>Session delivered and actions for Trust Board identified Discussion re E and D training at Strategic Training Group and actions identified</p>	<p>Sessions carried out in January and February 2009. Equality Act paper with recommendations ratified in April 2011 E and D training is mandatory for all staff and a bank of staff trainers to be involved in training delivery before end of 2011</p>



Lancashire Care Trust – Strategic Equality and Diversity Action Plan

Key Performance Indicator	Priority	Key tasks	Lead person/ Team	Success/ evaluation criteria	Situation as of June 2011
<p>2. Creating a workforce that reflects the population of Lancashire</p> <p>a) 2% increase in the number of BME staff not including medical staffing, with a 0.5% increase in BME staffing at band 8a and above by 2011</p> <p>b) a 10% increase in the number of BME staff moving from band 1 posts into higher banded posts by 2011</p>	Year 3	HR to promote posts amongst BME communities On-going monitoring of data fed into action planning through the BME Equality working group (positive action)	Director of HR	Data collection showing an increase in BME staff across all disciplines	All vacancies are currently advertised on the NHS Jobs website Between 2008 and 2011 the number of BME staff has increased from 7.73% to 9.94%. Undefined and not stated has fallen from 15.23% to 6.49%
	Year 3	On-going monitoring of BME data in terms of promotion within the Trust	Director of HR	Data collection showing an increase in band 1 BME staff moving into higher banded posts	Current systems do not capture movement from band 1 to higher bandings. There has been an improvement in the quality of data over the 3 years and the data suggests that there has been a reduction in band 1 staff who are BME, from over 50% to around 40%



c) 10% increase in numbers of staff who have a disability by 2011	Year 3	Opportunities for BME staff to access study/ training courses as part of professional development	Director of HR	More people with disabilities during application, interview and recruitment and 'reasonable adjustments' being made	The number of staff not declared or undefined has fallen from 67.25% to 46.42% over the 3 year period. The number of people stating that they do not have a disability has risen from 27.25% to 48.15% over the period and the number of people stating that they have a disability has stayed constant at round 5%
d) 10 mentoring opportunities available for BME	Year 3	HR to promote job opportunities amongst Disability group across Lancs	Director of HR	Data collection on staff mentoring to include collection of BME statistics	Info from NW Mentoring at NHS GMW - Mentor Net system began in May 2011 and confidentially collects equality and diversity information for each member who registers on Scheme. Developers are currently working on a set of reports, but they have not been completed just yet.
e) Monitoring of sexual orientation in employment and training to be carried out routinely by 2011	Year 3	Mentoring opportunities to be made available to BME staff	Director of HR/ Training and Development manager Director of HR	Improved data on sexual orientation being collected in employment and during recruitment	Number of staff stating that they are lesbian, gay or bisexual has increased from 1.21% to 1.44% over the 3 year period. Number of heterosexuals stating



<p>Note: Staff statistics on age show that the Trust reflects the age breakdown of the working population of Lancashire including those under 25 and those over 50</p>		<p>HR to ensure existing and new staff understand why we need to collect this data</p>	<p>Director of HR/ E and D Lead</p>		<p>has increased from 56.71% to 64.22%. undefined has decreased from 39% to 30% and do not wish to disclose has increased from 2.94% to 3.96%</p> <p>Trust reflects the age breakdown of the working population of Lancashire including those under 25 and those over 50</p>
---	--	--	-------------------------------------	--	--



Lancashire Care Trust – Strategic Equality and Diversity Action Plan

Key Performance Indicator	Priority	Key tasks	Lead person/ Team	Success/ evaluation criteria	Situation as of June 2011
3. Deliver services responsive to diverse communities across Lancashire a) Identification of mental health and substance misuse service inequity that impacts on equality target groups and ensuring this is addressed through E and D action planning and the equality impact assessment process within teams by 2011 b) The Trust having a comprehensive	Year 1 - 3	To ensure the EIA process is comprehensive and in line with SHA quality standards (to be produced Jan 09) EIA action plans to be produced and delivered	Network Directors/ E and D Lead	EIA's produced and published with action plans to be delivered before next review of policy, procedure or function	The EIA toolkit is part of the Policy on policies ensuring that all policies and procedures must have a completed EIA before ratification. All EIA's are published on the internet and intranet. The Trust can provide evidence of good practice in term of action plan delivery and improved services (EPIT returns 2010 and 2011)
	Year 3	Ensure tendering processes include E and D issues in line with current	Trust Board	Trust ensuring compliance with legislation as a minimum and examples of good practice on E and	EPIT returns 2010 and 2011 completed for Commissioners. All Trust



<p>response to Commissioning in terms of equality and diversity by 2011</p> <p>c) 6 monthly analysis of HR, training, inpatient and outpatient data to inform E and D action planning and equality impact assessments</p> <p>d) Improving care pathways for service users from diverse backgrounds that will be monitored through service users satisfaction surveys carried out annually</p> <p>e) Care Services in Partnership (CSIP) and LCFT</p>	<p>Year 2</p> <p>Year 1 - 3</p> <p>Year 1 – 3</p>	<p>and changing equality legislation</p> <p>Information to be collected and forwarded to E and D lead every six months All EIA's to include relevant and up to date data as part of evidence base</p> <p>Service user surveys to include E and D monitoring data for all six strands</p> <p>To employ project manager, admin officer and researcher to ensure effective delivery.</p>	<p>HR, Training and Development, Network Directors, Clinical Governance</p> <p>Clinical governance</p> <p>Director of HR/ E and D Lead</p>	<p>D widely available across all functions of the Trust</p> <p>Data collected and impacting on operational E and D action plans</p> <p>E and D data collected and used to improve services in light of responses</p> <p>Project delivered highlighting actions for service improvement. Service improvements carried out</p>	<p>tendering processes include equality and diversity standards (East Lancs Procurement Hub)</p> <p>Data collated annually Latest Workforce Annual</p> <p>Report 2010 -11 demonstrates equality data collection and analysis. Inpatient and Outpatient equality data is now available and will be used to inform the Trusts new Equality Scheme and targets. Local data has been used to provide information for EIA (e.g. Forensic Services) and for Network operational E and D action plans (all now in place)</p> <p>Service user surveys include equality issues such as: Movement around the ward</p>
--	---	---	--	--	---



<p>funded Delivering Race Equality and Clinical Trailblazer projects completed and future activity and funding identified by 2011</p> <p>f) Ensure all policies procedures and functions</p>	<p>Year 1 - 3</p>	<p>Strategic Health Authority (SHA) to provide quality standards for EIA process.</p>	<p>Executive Management Team</p>	<p>over life time of project shared across the Trust and other MH organisations</p> <p>Completed EIA's involving service users, staff, partner organisations being published and action plans produced and being delivered.</p>	<p>for people with disabilities Facilities to meet religious and spiritual needs Access for children Level of discrimination from other service users and also staff Access to interpreters Suitable gender mix on wards</p> <p>Project manager, admin support worker, DRE Clinical Trailblazers project worker and training development project worker all recruited. Due to long term sickness the project was significantly reduced. The project produced Trails of Experience –a report addressing the needs of BME service users. The action plan is currently being evaluated in term of outcomes. The training post developed a draft DRE training programme which was not completed due to lack of funding.</p> <p>All policies and procedures are accompanied by EIA and are not ratified without one. Issues of quality are to be addressed with the</p>
--	-------------------	---	----------------------------------	---	--



throughout the organisation are Equality Impact Assessed (EIA) and that the EIA process is embedded by 2011		To agree joint EIA process for integrated services. All EIA's to be published on the internet		EMT reports to Trust Board including outcomes of EIA's	forthcoming Equality Strategy. All integrated services use LCFT EIA processes and all EIA are published on intranet and internet
---	--	--	--	--	--

Lancashire Care Trust – Strategic Equality and Diversity Action Plan					
Key Performance Indicator	Priority	Key tasks	Lead person/ Team	Success/ evaluation criteria	Situation as of June 2011
4. Ensuring effective inclusion and consultation with communities, service users and carers from diverse communities and backgrounds a) Working in partnership to increase engagement and consultation with	Year 1 – 3	Information gathered to be used to inform on going action planning and service improvements on a sustainable level by 2011 (includes EIA processes) A minimum of six interventions to be carried out by 2011	Trust Board Council of Governors EMT E and D Lead BME Project Manager	Number of consultation events carried out Number of positive action interventions carried out Number of partner agencies involved in E and D initiatives Evaluation completed and further actions identified	2 consultation events (200 staff, service users and community members) to inform the SES (2008). Focus groups with HIV+, people , Trans people and people with disabilities and 2 follow up events help to ensure on going information fed into SES action planning Lancashire wide NHS E and D Partnership Group now in place – working



<p>diverse communities, reaching out to communities that have little dialogue with or knowledge of mental health services to assess impact and outcome.</p> <p>b) Developing mental health interventions in consultation with staff, service users, carers and local communities to ensure greater involvement in, and understanding of, diversity issues and the links to mental health.</p> <p>c) Involving service users, carers and diverse communities in the design and</p>	<p>Year 1 - 3</p>	<p>Using community development approaches across the organisation to involve people from diverse backgrounds at all levels</p>	<p>Trust Board, Network Directors, PPI Lead, E and D Lead, Service Transformation Team</p> <p>PPI Lead, BME Project manager, Health Promotion managers</p>	<p>Interventions delivered and evaluated informing content of forthcoming events and service improvements</p> <p>EIA's showing numbers of groups and or individuals involved</p>	<p>together to develop new Equality Schemes, targets and develop joint initiatives</p> <p>Trust completion of EPIT has demonstrated significant improvements and the Trust has achieved an 'Excellent' for diversity engagement work. In depth information available form Trust E and D Lead</p> <p>E.g. Equality trainers being recruited at mandatory E and D Development Sessions</p> <p>Trust completion of EPIT has demonstrated significant improvements and the Trust has achieved an 'Excellent' for diversity engagement work. In depth information available form Trust E and D Lead</p> <p>e.g. Mental Health Awareness training delivered by Mental Health Inreach Teams to staff within Garth, Wymott and</p>
---	-------------------	--	--	--	--



<p>evaluation of services at a sustainable level by 2011</p>					<p>Preston Prisons</p> <p>Trust completion of EPIT has demonstrated significant improvements and the Trust has achieved an 'Excellent' for diversity engagement work. In depth information available form Trust E and D Lead</p>
--	--	--	--	--	--



Conclusions

The Trust's Equality and Diversity Structure including the Strategic Group has supported equality and diversity delivery across the Trust and has provided space for consolidation of sometimes disparate activity.

The Equality Performance Improvement Toolkit (EPIT) has supported equality and diversity activity at all levels which has been demonstrated over the last two years and validated by commissioners. Other drivers such as CQC requirements, QIPP and Quality Accounts have also ensured the Trust embeds equality and diversity throughout all clinical and non-clinical practices.

The Trust's Equality Impact Assessments (EIA) toolkit and supporting development sessions have worked well for those staff and managers who understand equality and diversity and its importance. However the quality of the EIA's is sometimes questionable in terms of affecting service improvements. Integrated services have on the whole embraced EIA and embedded it into practice and a full EIA is currently being carried out on Supported Housing.

Through carrying out Equality and Diversity development sessions with staff it would seem that discussing equality and diversity in relation to the Trust Values supports challenging potential discriminatory or unacceptable behaviour amongst staff and service users. The Equality and Diversity development session for teams have constantly evaluated well and have had an impact on diverse staff engagement (e.g. BME and LGBT Staff Forums) and also on the quality of EIA.

The Trust Board has had mandatory equality and diversity development sessions but the completed EPIT over the last two years shows that more development work is needed for the Board to be able to demonstrate how it ensures it works inclusively through decision making.

The quality of equality data across the workforce and service users (inpatients and outpatients) is improving especially around ethnicity. This will be due to a greater awareness of the importance of collecting the data which helps us to understand what the make- up is of our workforce and services and if the Trust represents the communities it serves.

The Trust now has an Interpreter and Translation policy and procedures in place. This has supported clinical staff in ensuring timely access to language support and also ensured that this support is professional and appropriate at all times.

Consultation and engagement with staff, services users, carers and community members has been successful in terms of the Trust being better informed about equality and diversity and how this improves services. To demonstrate this, the Trust gained an 'Excellent' for engagement on the EPIT for 2010- 11



- **Recommendations**

The Trust needs to develop a new Equality and Diversity structure that is sustainable for the next three years, supporting the delivery of the new Equality Scheme and Targets in line with the Equality Act and the Department of Health's Equality Delivery System (EDS) for the NHS.

- Further work needs to be done to ensure Equality Impact Assessments are of a high quality, meaningful and sustainable for all stakeholders. It is recommended that the Trust uses a toolkit based on the good practice outlined in the toolkit developed by Blackburn with Darwen PCT including Equality and Diversity and Human Rights and a Risk Register linked to governance.
- More work to be done to improve the quality of equality data in the workforce and amongst service users especially on disability, religion and sexual orientation. This will support the Trusts commitment to the migration from EPIT to the DH Equality Delivery System (EDS)
- More work needs to be done around coaching, mentoring and leadership for minority staff as identified in the Black and Minority (BME) and the Lesbian, Gay, Bisexual and Trans (LGBT) staff forums. This will also link to the Trust Values, and the Performance Development Review (PDR) and Personal Development Plans (PDP) processes
- Sustainable and meaningful engagement and consultation work to continue through the Network equality and diversity representatives and working groups. Network action planning to continue and feed into and be informed by the Trust new Equality Scheme 2012 -15

The following recommendations are based on the Trusts EPIT returns for 2011 and the areas where the Trust did not demonstrate progress from 'Developing' to 'Achieving'



- Equality and Diversity to be integrated into key decision making processes and reports to ensure all Trust activity is inclusive and recognises the diversity of service users, staff, carers and community members
- Demonstrate year on year improvements towards developing a diverse workforce that reflects the local population, at all levels including Board level, through the setting of stretch targets.
- Develop better (more detailed and disaggregated) population data in partnership with local authorities and the third sector.
- Ensure all strategies, plans and activities are subjected to equality impact assessments (EIA) in accordance with national directives and equalities legislation
- Develop robust contracts that make E&D activities and responsibilities explicit for providers
- Develop an organisational development programme that pays particular attention to ensuring that boards, particularly E&D executive leads, have the capability and body of knowledge to champion the E&D agenda.



Bibliography

Fit of Strategic Aims, Priorities and Initiatives, Lancashire Care NHS Foundation Trust (2010)

Review and Evaluation of the LSC's Single Equality Scheme, (2011),
Learning and Skills Council
([readingroom.lsc.gov.uk/lsc/National/natreview_and_evaluation_of_the_LSCs
_single...](http://readingroom.lsc.gov.uk/lsc/National/natreview_and_evaluation_of_the_LSCs_single...))

Single Equality Scheme, Lancashire Care NHS Foundation Trust, (2008)

Single Equality Scheme, Department of Health, (2007 –10)

Ten Steps to Your SES: A Guide to Developing a Single Equality Scheme,
Department of Health (2007)

Your Values, Lancashire Care NHS Foundation Trust, (2010)

